



Child Protection in Crisis

Network for Research, Learning & Action

COMMUNITY BASED CHILD PROTECTION MECHANISMS AMONGST URBAN REFUGEES IN KAMPALA, UGANDA: AN ETHNOGRAPHIC STUDY

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EXECUTIVE SUMMARY

Many countries are currently undertaking mapping of community based child protection mechanisms (CBCPMs) as a critical step in strengthening child protection systems. However, this type of mapping has yet to be undertaken in refugee settings. This project, which includes research in Kampala, Uganda, and in Rwandan refugee camps, is the first study of CBCPMs undertaken in refugee settings.

The purpose of the study reported here was to learn about community-based child protection processes and mechanisms in three urban refugee communities in Kampala, Uganda. In particular, the research sought to identify what urban refugees see as the main harms or risks to children, what CBCPMs exist and how they are used, what protective factors enable children's positive coping and resilience, and whether and how the CBCPMs link with elements of the formal, government led aspects of the national child protection system. This study had a special focus on the protective effects of education. By learning about child protection amongst urban refugee communities, the research aimed to contribute to new knowledge that will be useful in strengthening both the child protection system and services provided to refugees in Uganda.

Methodology

The research used a methodology of rapid ethnography that focused on child protection and aimed to provide a rich, grounded picture of local beliefs, values, and practices in regards to harms experienced by children, and the community mechanisms for their protection and well-being. Recognising the advantages of a mixed methods approach, the research also collected quantitative data regarding participants' ranking of various risks and the pathways of response. The tools and general methodology were developed by or based on the Inter-Agency Learning Initiative on Strengthening Community-Based Child Protection Mechanisms and Child Protection Systems.

This study focused on two refugee nationalities in Kampala: Congolese and Somali. Two Congolese refugee communities were included in the study (Nsambya Kirombe and Makindye Luvuma) and one Somali (Kasaato, in Kisenyi).

This study was conceived by UNHCR, who approached the Child Protection in Crisis (CPC) Network for collaboration. The research team included refugee, national and international researchers. The international researchers were researchers and faculty affiliates of the CPC Network; the national researchers were staff of InterAid Uganda; and seven refugee researchers (five Congolese and two Somali) participated in the data collection phase, following an 11-day training workshop.

The research tools used were: group discussions of child protection risks and typical responses (with male and female adults and young people); semi-structured in-depth interviews (with male and female adults and young people); key informant interviews; and a 'body mapping' exercise with children, designed to elicit sources of children's distress and wellbeing.

A total of 51 group discussions were held (19 in Nsambya Kirombe; 20 in Makindye Luvuma; 12 in Somali community). Of these, one quarter were with adult women, one-quarter with adult men, one-quarter with young women (aged 13-17), and one-quarter with young men. A total of 175 in-depth interviews were held (61 in Nsambya Kirombe; 68 in Makindye Luvuma; 46 in Kasaato). Of these, 83 were with women and 92 were with men; 64 were with young people and 111 with adults. Interviews and group discussions with young people included both those in school and out of school. Forty key informant interviews were conducted with representatives of organisations and institutions knowledgeable about issues affecting refugee children.

A summary of the findings

What role is education perceived to play in children's development and protection? Are there benefits of education to the protection of children?

There was a consensus amongst respondents and key informants that the most effective way to protect refugee children from harm was to send them to school. The protective factor mentioned most commonly was that while a child is in school, he or she is safe, supervised and, most of all, busy. Some also talked about the cognitive skills children developed through going to school as protective factors, including the development of an awareness of right and wrong, and consequential thinking skills, so children were less likely to take action which would lead them into problems. It was agreed to be beneficial for children to have a goal and a sense of purpose that prevents them from engaging in activities which may bring short-term benefits but long term problems (e.g. prostitution, stealing, drug use).

Learning English was said to be a very important aspect of education, which protected refugee children through helping them integrate into the Ugandan society. Children who can speak English were said to be less vulnerable because they are able to read, so can get information more easily, are able to explain themselves and seek help when necessary.

What are the main child protection risks or sources of harm to children?

Lack of access to formal education was by far the child protection issue that most concerned Congolese refugees, with more than 90% of groups listing it among their top three harms. This was followed by discrimination, rape and inadequate or overcrowded houses (resulting in children being exposed to adult sexual activity). The top two harms prioritised by the Somali refugee community were the same as for the Congolese: discrimination and lack of education. However, the third most important harm for the Somali groups was drug abuse, and the fourth was child trafficking.

How do child protection risks vary by gender and age? How do they vary by educational enrolment for different age and gender groups of children?

Child protection risks varied by gender, age and educational enrolment. Younger children were less exposed to risk because they were more closely supervised, although those out of school were said to be at increased risk because they were more likely to wander around the neighbourhood, especially if their parents were out of the home trying to earn money. Young girls were said to be at risk of rape, more so than boys, especially if they were out of school.

Particular concern was expressed about the risks faced by boys and girls once they reached adolescence (typically described as age 12 and above). Children at this age were said to be less accepting of the situation in which they were living, and more likely to try to do something to improve their lives, especially children who are out of school. Children seeking to improve their lives were often said to engage in activities which placed them at increased risk, such as finding employment, engaging in sex work, theft and paying traffickers to take them overseas. There were some gender differences, in that girls were more commonly said to engage in sex work (Congolese more than Somali), and to be at risk of sexual abuse and exploitation through employment. Boys were more likely to use drugs and become involved in criminal activity, exposing themselves to beatings as well as arrest. Adolescent Somali boys and girls were particularly likely to consider paying traffickers to take them abroad.

To whom do girls or boys turn to for help when protection threat X arises? Are schools perceived as a point of entry for reporting protection threats?

The primary helpers for children, in both Congolese and Somali communities, were their parents. For every type of harm discussed, the research team heard that children would go first to their parents. Although it was sometimes reported that children would report harms that occur in school to a teacher, more commonly they would wait until they reached home, and tell their parents.

Schools were not generally perceived as a point of entry for reporting of protection threats. In some cases, this was because teachers were perceived as being prejudiced against refugee children, but generally children seemed to feel more confident talking to their parents than to teachers.

What processes or mechanisms are used by families or communities to support children who have been affected by various protection threats? Are schools involved in this support process?

The processes and mechanisms used by families and communities to support children include both community based and formal structures. Within the Somali refugee community, the community leadership, including religious leaders and the clan-based structures, provided the main source of support for children. They also engaged with non-governmental organisations (NGOs), particularly InterAid Uganda, but had very limited contact with the Local Council representative at community level (LC1)¹ and police.

The Congolese refugee community relied heavily on church associations within their communities for support. These church associations were strong, and provided not only spiritual support but a range of practical services for children, including limited financial support, practical assistance in finding accommodation for unaccompanied or separated children, and advocacy services, or linking children to organisations who may be able to assist them. The church associations, and other community-based organisations, provided English classes, vocational training and other activities to help children who were unable to attend formal school.

Congolese refugee children were also assisted by InterAid Uganda when they faced protection risks, and by other NGOs, including Refugee Law Project, Hebrew Immigration Advisory Service (HIAS), African Centre for the Treatment and Rehabilitation of Torture Victims (ACTV) and Jesuit Refugee Service (JRS). The Congolese community engaged more than the Somali with the LC1 system and the police, but these structures were not seen as being very supportive of children facing protection risks because refugees felt that they were discriminatory and favoured Ugandans over refugees.

Schools were involved in the support process when the risk related to the school environment. For example, when parents were struggling to meet the costs of their child's education, some schools would negotiate flexible payment plans to enable the child to return to school. If a child faced discrimination, or verbal or physical abuse at school, the school authorities would take a lead role in addressing the issue.

What processes or mechanisms are used by families or communities to support out-of-school children? What are the outcomes of those mechanisms, and how satisfactory are the outcomes in the eyes of different stakeholders?

Parents and communities made every effort to find ways of enabling children to return to school. However, it was acknowledged by most that the majority of refugee children were out of school, and faced a number of harms as a result. Parents found it difficult to support their out-of-school children other than to provide guidance, love and moral support to encourage the child, and prevent them from becoming involved in harmful activities. The Congolese church associations organised non-formal education classes and vocational training for adolescents who are out of school, and these were appreciated by both young people and parents. However, they were seen as a poor substitute for formal education, since the quality of the teaching was lower, the classes only took place for a few hours a day, and they did not provide the child with official qualifications which could help them in the future. In the Somali community, parents sometimes sent children to the schools run by religious leaders as an alternative to formal education.

¹ A Local Council (LC) is a form of locally elected government within the districts of Uganda. There are five levels of Local Councils. The lowest level is the Local Council I (LC1), which is responsible for a village or, in the case of towns or cities, a neighbourhood.

For older children, the research team heard that parents sometimes encouraged the child to find work, or they set the child up in a small business. Whilst most parents preferred their children to be at school, it was believed to be better for a child to be working than to be idle at home; not only because the child was able to contribute financially to the family, but also because the child would be busy, so less likely to become involved in harmful activities such as sex work or crime. However, the research team heard that children were exposed to different types of harms through work, particularly exploitation (not being paid for work done), heavy physical labour, and sexual assault.

What are the indigenous, 'traditional' mechanisms of protection and how are they regarded by different groups?

The child protection mechanisms refugees described as functioning in their home communities were primarily family-based for both Somali and Congolese, although Congolese refugees also described networks of friends and neighbours as playing a role in child protection.

These traditional mechanisms have been maintained to some extent within the Somali refugee community but were less strong in the Congolese community. The research team heard frequently that all refugees were struggling to cope, so were less able to help their friends, relatives and neighbours than they would have been in their home countries. Even in the Somali community, where family networks were still strong, respondents said that people were busy working, looking for ways to earn money and provide for their families, so took less interest in the problems of others than they would have done at home.

Apart from indigenous mechanisms, what groups or structures exist in urban refugee communities?

Refugee-assisting organisations played a significant role in educating and sensitising both refugees and Ugandans about child protection issues. In addition, InterAid Uganda, in collaboration with refugee leaders, recently established Child Protection and Education Committees (CPEC) in many of the communities where refugees live in Kampala. The main responsibilities of CPECs were to encourage parents to send children to school, to raise awareness within their communities of child protection issues, and to identify any children who need support. In simple cases, they may be able to provide the support as a committee, but otherwise they referred the child to InterAid Uganda. The committees were still fairly new, so they were in the process of establishing themselves. They have great potential to link formal and community-based child protection mechanisms.

What do communities do to promote school enrolment and safer schools?

Communities contributed financially to assist out-of-school children but, as mentioned, their resources were limited and generally it was difficult for them to enable children to return to school. Some of the Congolese church associations had links with other organisations which sponsored children to go to school, and the research team heard from a key informant (head teacher of a primary school) that refugee children were sometimes supported by Somali associations and a large mosque in Kisenyi to access education.

The research team also heard that CPECs had begun to develop links with schools; they were consulted by teachers if there was an issue relating to refugee children, and were invited to attend general meetings or parents' meetings. CPEC members addressed these meetings, and used the opportunity to raise awareness on child protection issues. They also had meetings with the school authorities to try to reduce the discrimination experienced by refugee children from both students and teachers.

Who has or does not have access to existing protection mechanisms?

Many respondents felt that refugee children did not have equal access to child protection mechanisms compared to Ugandan children, because both parents and children were discriminated

against. This was said to affect all aspects of the formal child protection system, including health care facilities, LC1 structures, the police, and even schools.

Certain groups of children were marginalised even within the refugee population. The central role played by parents and families in child protection means that children living without their parents, children from minority clans or tribes, and children who have been rejected by their families and communities, had difficulty accessing informal protective networks.

Younger children had difficulty accessing protection mechanisms because they lacked the ability to explain the harms they have experienced. Although little information was obtained about children with disabilities, it is likely that these children were extremely marginalised and unable to access existing mechanisms.

Who has or does not have access to education?

Under Uganda's Universal Primary Education (UPE) system, all children had access to education, but there were costs involved which could exclude those whose families are unable to pay. This applied not only to refugee children, but also to Ugandan children from very poor families. However, refugee children were more vulnerable because their parents struggled to find work due to discrimination, language barriers and lack of connections.

What do NGO actors see as their main roles and responsibilities in regard to community based child protection mechanisms?

The Ugandan Government had primary responsibility for child protection, including the protection of refugee children, but was limited in terms of both resources and capacity. Therefore, NGOs played an important role in supporting child protection activities.

All the refugee-assisting organisations spoken to during this research, including InterAid Uganda, HIAS, and Refugee Law Project (RLP) were involved in advocacy activities, working directly with institutions involved in child protection (e.g. police, schools, LC structures) and with CBCPMs. They also provided direct services to child refugees and their parents.

Refugee-assisting organisations worked closely with CBCPMs, including the church associations in the Congolese community, and the community leadership in the Somali community. Youth groups were present (but not currently active) in many communities, and plans were in place to strengthen these. The CPECs established by InterAid Uganda had great potential as a link between CBCPMs and the more formal child protection mechanisms. They were already working to raise awareness of child protection issues in their communities.

What are the linkages of community mechanisms with the formal elements of the child protection system?

For some aspects of the child protection system for refugees in Kampala, referral pathways were clear. The LC1 would refer to the police, for example, and the police referred to InterAid Uganda and other organisations (e.g. Office of the Prime Minister [OPM]). InterAid Uganda referred to United Nations High Commission for Refugees (UNHCR), to government clinics and hospitals, to UPE schools, and to other organisations, such as JRS. Inter-referrals took place between InterAid Uganda, UNHCR, JRS, HIAS and RLP, in particular, but also with ACTV and Uganda Red Cross/ International Committee of the Red Cross (ICRC). Within the Congolese community, church associations connected refugees to organisations, and in the Somali community the chairman was the 'middle man' between the community and refugee-assisting organisations and the government bodies.

The CPECs were potentially very powerful connectors, although they were still establishing themselves, so were not yet in a position to perform this function effectively. Probation and Social Workers are also had potential, but they did not provide services to refugee children because these

children were perceived to fall within the mandate of UNHCR and the refugee-assisting organisations, rather as within the mandate of the national child protection system.

Currently, there seemed to be little direct connection between refugees and schools. The relationship between Congolese church associations and some organisations (e.g. InterAid Uganda) was strong, but in many aspects of their work the church organisations were operating independently of the formal child protection system and schools.

There was no specific co-ordination system for child protection in Kampala, and a number of key informants working in refugee-assisting organisations saw a need for a child protection working group to facilitate co-ordination, referrals and a coherent service. Amongst the refugees spoken to, there was considerable confusion about the mandates of different organisations. Increased co-ordination between organisations, and the provision of a more coherent service, would go some way towards reducing the frustration refugees feel at not being able to access the services they require.

Facilitating linkages between education and protection: recommendations

It is clear that access to education was key for urban refugees in Kampala. Children out of school were exposed to many more risks than children in school, including sexual assault, child labour, drug use, trafficking, early sexual activity (sometimes resulting in pregnancy), accidents and verbal and physical abuse. Many refugee children in Kampala were out of school, and increasing their access to the formal education system would have a significant impact in terms of child protection.

The main cause of children being unable to access education was that their parents were unable to meet the costs associated with attending school, even those schools included in the UPE system. However, language was also a challenge for refugee children from non-English-speaking countries, and some struggled to adapt to the Ugandan education system, especially if they had not been attending school regularly at home.

Although schools were perceived as overwhelmingly positive environments, and as the main protective factor in children's lives (excluding parents), children who were in school reported being exposed to some harms, specifically discrimination, sexual exploitation and accidents on the journey to and from school. This suggests that action could be taken to make schools safer and more protective places for refugee children.

Although education was greatly valued by the majority of refugees spoken to, the research team heard that this was not always the case, and that some parents kept their children out of school to work, help in the home, or because they believed they would be resettled soon so there was no need for their children to begin school in Uganda. CBCPMs are in a particularly good position to work with parents to address these beliefs, and to identify those children who are marginalised and unable to access education.

The below recommendations are intended for 'refugee-assisting organisations' in the broadest sense. When possible, the recommendations have been addressed to specific entities and organisations; however, there are four large refugee-assisting organisations in Kampala (InterAid Uganda, Refugee Law Project, HIAS and JRS) and many smaller ones. In order to ensure that the recommendations are implemented effectively, there would need to be a process of discussion between all refugee-assisting organisations to assess their strengths, capacities and resources. On the basis of such a discussion, which would also ideally involve the Government of Uganda (and especially the Ministry of Education as well as the Office of the Prime Minister), the collective group of refugee-assisting organisations should decide which organisations could best address each recommendation, and how to do so. This process is essential if co-ordinated, efficient child protection systems are to be established. UNHCR could play a facilitating and convening role in this process.

The recommendations for facilitating linkages between education and protection are the following:

1. Refugee-assisting organisations, including InterAid Uganda, should establish or strengthen livelihoods programmes for parents to enable those who are able to earn enough money to send their children to school. To achieve this recommendation, InterAid Uganda has planned a five-year (2014-2018) Livelihood Strategy to provide support to refugee parents to enable them increase income. Such livelihoods strategies should be based on preparatory market surveys to determine which livelihoods strategies will be most effective.
2. InterAid Uganda, UNHCR, and other refugee-assisting organisations should advocate for more funds from the Government of Uganda and from the international community to assist particularly vulnerable children (identified using existing vulnerability determination criteria) for support. It will be important that the criteria and decision-making processes involved in administering this fund are transparent and clearly communicated.
3. The Ugandan Ministry of Education should require all government schools to be flexible regarding payment plans, which can be agreed in discussion with parents. InterAid Uganda is already working with government schools which are part of the Universal Primary Education system to facilitate such a process, and this approach should continue and be expanded until all government schools have been brought on board and a formal flexible-payment system established.
4. CBCPMs and InterAid Uganda should continue to link refugee children to various organisations and individuals for education support based on their specific individual organisation criteria for selection children for support.² Again, it is important that such decisions are made in a transparent way.
5. The Ugandan Ministry of Education should collaborate with refugee-assisting organisations, including community-based organisations, to explore possibilities for providing ‘foundation classes’ for children either before they join the formal education system, or alongside it. These classes could focus on English language alone or a combination of English language and basic educational skills, depending on whether the child had attended school in their home country. If these classes were linked to the mainstream educational system and formally linked to the curriculum, they could act as a ‘way in’ to formal education, rather than an alternative. Ideally, they would enable older children to join school at the grade they were at in their home countries rather than dropping to a lower level.
6. CBCPMs and refugee-assisting organisations should raise awareness within refugee communities regarding the existence of ECD centres attached to UPE schools, and, in collaboration with UNHCR, establish new ECD centres in areas where they are lacking.
7. Refugee-assisting organisations, including InterAid Uganda, should provide training of teachers in UPE Schools on issues such as diversity, the refugee experience, and how to build cooperation and respect among children of different nationality. As part of this programme, refugee-assisting organisations support schools to develop policies to manage discrimination.
8. Refugee-assisting organisations, including InterAid Uganda, should continue to provide English language classes to facilitate integration of refugees. Flexible, creative options—such as classes conducted in the refugees’ places of work—should be explored to enable parents to learn English around their other commitments.
9. The Uganda Ministry of Education should collaborate with refugee-assisting organisations, including InterAid Uganda, to ensure that refugee parents are supported to participate in

² Existing InterAid Uganda linkages include the media organisation, Banks, Kampala City Authority Bursary Scheme, Education NGOs(Children Fund), Faith Based organisations (e.g. Missionary of the Poor) where about at least 300 refugee children are being sponsored in schools

school decision-making bodies, such as Parents Teachers Associations (PTAs) and School Management Committees (SMCs). PTAs and SMCs could also be involved in enabling schools to better meet the needs of refugee children, in terms of offering advice to the school, and following up on refugee children with problems by facilitating communication between parents and the school authorities.

10. CBCPMs should raise awareness in their communities of the importance of sending all children to school, and challenge attitudes and beliefs which contribute to children not being sent to school through their typical communications channels, such as church and mosque events, community meetings, and other regular gatherings.
11. CBCPMs should identify children likely to be excluded from education (e.g. children not living with their biological parents; child mothers; children with disabilities) and support them to go to school by advocating with parents, caregivers and schools on their behalf, and referring to refugee-assisting organisations where necessary.

Strengthening child protection mechanisms: recommendations

PARENTS

The key community-based child protection mechanism for refugee children in Kampala was parents. Strengthening parents' abilities to support and protect their children would have a significant impact on refugee children's wellbeing.

The recommendations for strengthening parents' ability to protect and care for their children are the following:

1. Refugee-assisting organisations, including InterAid Uganda, should establish or strengthen livelihoods programmes for parents to enable those who are able to earn enough money to send their children to school. To achieve this recommendation, InterAid Uganda has planned a five-year (2014-2018) Livelihood Strategy to provide support to refugee parents to enable them increase income. Such livelihoods strategies should be based on preparatory market surveys to determine which livelihoods strategies will be most effective.
2. Refugee-assisting organisations, including InterAid Uganda, should continue to provide English language classes to facilitate integration of refugees. Flexible, creative options—such as classes conducted in the refugees' places of work—should be explored to enable parents to learn English around their other commitments.
3. The Ugandan Ministry of Education and refugee-assisting organisations should enable Community Based Education Committees (CBECs) and key individuals in communities to support parents who lack the language skills or confidence to engage with government officials or NGO staff regarding child protection issues. Such enabling might take the form of the establishment of a formal focal point system for key individuals who receive training on linking refugees with service providers. These key individuals will vary depending on the community, but could include church leaders, prominent business people, those who are active in community-based organisations, teachers, and others.
4. Refugee-assisting organisations, including InterAid Uganda, should support community-based organisations to strengthen parents' capacity to support and protect their children. This support may include: enabling CBOs to raise awareness on the importance of the parent-child relationship; helping parents to maintain good relationships with their children, despite the pressures they are all under; helping parents to identify strategies to prevent their children being exposed to harms; and giving information on how to respond if a child experiences a particular harm.

REFUGEE COMMUNITY BASED ORGANISATIONS

A large number of faith-based associations and other types of community based organisations (CBOs) existed in the Congolese communities. Fewer organisations existed in the Somali community, but there were community structures, such as the community leader and his committee. These organisations and structures were actively involved in child protection activities. Their strengths were that they were highly integrated into the community, had high levels of acceptance and respect, and were able to respond immediately to any child protection concerns. They had considerable flexibility, and were able to mobilise the resources which exist within their communities. These strengths put them in a good position to educate community members on child protection issues, advocate for refugee children with formal child protection mechanisms, and respond to sensitive and urgent issues affecting children in their communities.

There were also the Child Protection and Education Committees (CPECs) which are voluntary bodies established by InterAid Uganda in collaboration with community leaders. These bodies were newly established, and fell somewhere between CBOs and an NGO child protection mechanism. However, their strengths were similar to those above, so they will be considered in this section. They had an additional strength, in that they provided a link between community-based child protection mechanisms and formal child protection mechanisms.

The recommendations for supporting refugee community-based organisations to better protect children are the following:

1. Refugee-assisting organisations, including InterAid Uganda, should support CPECs and other community-based organisations through technical and—to the extent possible—financial support to:
 - a. Identify and monitor children in their communities who are particularly vulnerable and may find it difficult to report their problems, particularly those who are living without their biological parents. The support required is likely to take the form of training and guidance regarding the signs of a child being particularly vulnerable; how to keep accurate records; and how to respond to the types of situations they are likely to come across, including making appropriate referrals.
 - b. Undertake a series of awareness-raising activities, using multiple approaches (such as messaging during community meeting, the development of visual aids, and the use of mass media), focusing on the issues affecting children in their own communities.
 - c. Advocate with local-level statutory bodies (e.g. the police, LC1s, Probation and Social Work Officers, and other local authorities) to help refugee children and caregivers to access the services they need.
 - d. Continue to provide activities, including English language classes and skills training, for those children who are out of school, particularly younger children.
 - e. Provide emergency accommodation for children in a way that ensures the child's safety and wellbeing, working in close collaboration with Probation and Social Work Officers. This activity may include providing community-based organisations with guidelines regarding the issues they should take into account when providing such accommodation (e.g. girls and boys sleep in separate spaces), the development of which guidelines could be led by one designated refugee-assisting organisation during the aforementioned consultations.
2. CBCPMs should improve monitoring and support by:
 - a. Focusing on whether marginalised or vulnerable children are being systematically identified and provided with the necessary support.

- b. Ensuring that those not associated with a particular church or mosque are not excluded from CBCPMs and that going to the church/ mosque is not a condition of receiving services.
 - c. Providing direct services such as emergency accommodation to children in a way that ensures their safety and welfare.
 - d. Ensuring that children's interests are prioritised when they make decisions concerning children. Where organisations like InterAid Uganda have staff working closely with communities, they will be in a position to monitor the assistance provided by CBCPMs to children, and to provide guidance and support where required.
3. CPECs should:
- a. Receive ongoing training and supervision from refugee-assisting organisations, including InterAid Uganda, to ensure that they are able to perform their function effectively.
 - b. Link into current CBCPMs, rather than positioning themselves as "InterAid Uganda structures," and base their activities on community priorities as identified through structured consultations with community members, including children.
 - c. Communicate messages about their role and scope of work clearly and consistently so as to develop a more visible profile within their communities whilst managing community expectations.

GOVERNMENT STRUCTURES

Government structures, primarily the LC1 and the police, but also (potentially) the Probation and Social Welfare officers and the staff of government health centres, played a crucial role in the protection of refugee children. Unfortunately, the strong message emerging from this research is that these structures were not providing an effective service. For LC1 and police officers, discrimination and prejudicial attitudes appeared to limit their ability to provide adequate protection to refugee children.

The recommendations concerning Ugandan government structures working with refugees are the following:

1. InterAid Uganda should continue organising sensitisation meetings for LC1s, the Police and Probation officers on child protection issues to address discrimination, attitudes and practices. Other refugee-assisting organisations working in other areas should replicate similar sensitisation meetings if they are not already doing so.
2. LC1 offices should strengthen their relationships with refugee communities through activities such as general meetings, the inclusion of refugees in fora on specific issues relevant to that community, and the involvement of refugee groups in designing solutions for community problems.
3. The Office of the Prime Minister, working with UNHCR, should ensure that policies are in place to ensure that LC1 and police officers provide refugees with the services they are entitled to, and the implementation of these policies is monitored.
4. The Office of the Prime Minister, working with UNHCR, should provide oversight of LC1s and police officers in communities where refugees live, ensuring, for example, that these local authorities are consulting refugee communities through regular community meetings. The Office of the Prime Minister should also establish a functioning complaints system via which refugees can voice concerns about local governance at a higher level.

5. The Ugandan Government—including the Office of the Prime Minister and the Ministry of Gender, Labour, and Social Development—should clarify the role of Probation and Social Work officers in relation to refugee children so that these officers are able to provide assistance to refugee children in the same way as national children. This activity may include a review of the job description for Probation and Social Work Officers to ensure that refugee support is included.
6. The OPM should increase its engagement with national child protection coordination bodies such as the Child Protection Working Group to promote the development of an effective coordination and referral system to ensure that refugee children receive the services they require in an efficient way (i.e. it is not necessary for them to visit several different organisations with the same request), and that efforts are not duplicated.

REFUGEE-ASSISTING ORGANISATIONS (NGOS AND UN BODIES)

This study has shown clearly the high level of need amongst refugees living in Kampala, and their dependency on a small number of organisations, particularly InterAid Uganda, Refugee Law Project and HIAS, to meet these needs. The resources of all these organisations were limited, and it was not possible for them to meet the sometimes unrealistic expectations of the refugees who needed assistance. Frontline agencies, such as InterAid Uganda, experienced every day the challenges of managing refugees' expectations, which varied not only from individual to individual, and family to family, but also from day to day, as expectations changed. There seemed to be considerable confusion amongst refugees about the mandates of the various refugee-assisting organisations in Kampala, and their limitations, as well as the criteria for assistance.

To reiterate a point made above, the below recommendations are intended for 'refugee-assisting organisations' in the broadest sense. When possible, the recommendations have been addressed to specific entities and organisations; however, there are four large refugee-assisting organisations in Kampala (InterAid Uganda, Refugee Law Project, HIAS and JRS) and many smaller ones. In order to ensure that the recommendations are implemented effectively, there would need to be a process of discussion between all refugee-assisting organisations to assess their strengths, capacities and resources. On the basis of such a discussion, which would also ideally involve the Government of Uganda (and especially the Ministry of Education as well as the Office of the Prime Minister), the collective group of refugee-assisting organisations should decide which organisations could best address each recommendation, and how to do so. This process is essential if co-ordinated, efficient child protection systems are to be established. UNHCR could play a facilitating and convening role in this process.

Additional recommendations for refugee-assisting organisations include:

1. All refugee-assisting organisations should ensure that advocacy and awareness-raising activities are conducted at all levels, including with government bodies, the general public, teachers, health workers and police, to reduce the discrimination experienced by refugee children.
2. In its areas of operation, InterAid Uganda should promote regular meetings of CPECs with schools and LC1s with the aim of raising awareness among government actors of the protection needs of refugee children and each actor's respective role in the process of protecting and caring for them. Another aim of such meetings is to strengthen these actors' relationships with refugee communities in order to reduce discrimination and improve their service provision to refugee children. Refugee-assisting organisations working in other areas should also promote such meetings.

3. Refugee-assisting organisations, including InterAid Uganda, should prioritise for assistance children living without their biological parents, along with others who may not easily access community based child protection systems (e.g. those from minority clans or tribes; children with disabilities). Such prioritisation may take the form of reviewing criteria for support and adapting as necessary so that children living without their biological parents are more systematically taken account of and supported in their programming activities.
4. Senior management of refugee-assisting organisations, including InterAid Uganda, should provide awareness-raising and training for frontline staff of refugee-assisting organisations to ensure that the latter are receiving the emotional and practical support needed to enable them to provide an effective service to refugees. This recommendation may take the form of regular supervision for individuals and groups; assistance from supervisors with particularly difficult cases; regular breaks from front-line duties; and training in how to manage their own emotions when faced with frustrated and distressed refugees.

LINKAGES BETWEEN CHILD PROTECTION ACTORS IN KAMPALA

To improve connections between child protection actors working at the national level, the recommendations are:

1. All refugee-assisting organisations should ensure that the criteria for receiving assistance are clear, that refugees always receive a response to a request and that the reason for the decision is explained.
2. The OPM, working in collaboration with UNHCR and existing national coordination mechanisms such as the Child Protection Working Group, should ensure that systems are put in place to increase the communication between refugee-assisting organisations and to facilitate co-ordination of activities and services. This would include, at minimum, a regular, minuted, co-ordination meeting.
3. Once co-ordination meetings and systems are established, the lead agencies—including, for the government, the OPM as well as the Ministries of Education and Gender, Labour, and Social Development—should ensure that CBCPMs are included and linked more closely with the formal child protection system. This recommendation would include inviting CBCPMs to participate in regular co-ordination meetings, planning meetings and any training events, as well as community-based staff of refugee-assisting organisations linking specifically with the identified CBCPMs.
4. Refugee-assisting organisations, including InterAid Uganda, should continue to work through community-based organisations on child protection issues rather than implementing activities and programmes directly themselves. The recently-formed CPECs will have a key role to play here, and it would be worth investing resources in developing their capacity to address some child protection issues themselves and to document and refer to the appropriate agency those they are unable to deal with. The model that exists within the Congolese community, whereby the CPECs consist of members of existing community-based organisations which are well known and trusted within the refugee community, ensures that these bodies are stable, supported and sustainable.
5. Refugee-assisting organisations, including UNHCR, should link more closely with organisations working on child protection issues in relation to Ugandan children, including UNICEF and the Probation and Social Welfare officers. Ideally, the Probation and Social Welfare officers will provide the same services to refugee children as they do to Ugandan children. Similarly, UNICEF should work with partner organisations to facilitate access for refugee children to their programmes in addition to the Ugandan children who already benefit by reviewing targeting criteria and programming guidelines to ensure the inclusion of refugee children.

1. INTRODUCTION

In keeping with the global trend towards urbanisation, increasingly large numbers of refugees have chosen to settle in urban centres rather than refugee camps, even when this leaves them without access to support from United Nations High Commissioner for Refugees (UNHCR) (UNHCR, 2009a, 2009b). An estimated 58% of the world's refugees now reside in cities (Krause-Vilmer, 2011).

Over the past 15 years, Uganda has become host to a great number of refugees from across East Africa as a result of its proximity to conflict-affected countries (Bonfiglio, 2011). The number of refugees living in Kampala is unclear but UNHCR registered 71,598 urban refugees as of 31st January 2013. Some arrived decades ago whilst others fled more recently from conflicts in Rwanda, Burundi, DRC, Sudan, Somalia, Ethiopia and Eritrea.

According to UNHCR Statistics, in January 2013, the population of urban refugee children (0-17 years) in Kampala was 25,974. Of these, 5,170 were aged 0-4; 10,825 were aged 5-11; and 9,979 aged 12-17 (UNHCR-Kampala, Uganda, 2013).

Ugandan Government policy emphasises the self-reliance of refugees through the establishment of agricultural settlements, rather than camps. Refugees in settlements in Uganda are given a plot of land to build a home, land to cultivate and, in keeping with increased self-sufficiency, food rations are decreased over time (except for those who are considered most vulnerable and in need of sustained support). Refugees are encouraged to generate income from other livelihood activities and are free to engage in employment both within and outside the settlements. However, increasing numbers of refugees in Uganda are choosing to try to survive in Kampala, rather than stay in the settlements. The 2006 Uganda Refugee Law allows refugees to settle in Kampala or elsewhere, but they must forgo their rights to humanitarian assistance. Some of the reasons refugees continue to choose to live in Kampala are (InterAid Uganda, 2012):

- Availability of social amenities and services;
- In search of better education compared to that in the settlement;
- Presumed better protection, and many with urban backgrounds that could not cope in the settlements;
- Some felt it was easier to access UNHCR protection staff while in Kampala, especially to exploit opportunities for resettlement;
- Frustration of living in settlements where there is virtually no chance of accessing basic needs as promised; and
- Charity from churches, organisations offering opportunities for alternative care arrangements including school and out of school support.

Urban refugees in Kampala face many of the same barriers as the Ugandan poor in accessing services, finding employment and staying safe. However, they also face additional constraints, such as language discrimination, lack of legal documentation and limited access to credit and formal sector education (Krause-Vilmer, 2011). Many refugees live in extreme poverty. When they are unable to pay for their needs, they are evicted, double up in crowded rooms, sleep on the street, eat less frequently and engage in negative economic strategies. These strategies can adversely affect their children, who may be sent to live with a relative or pulled out of school and expected to work.

In keeping with its international obligations, the Ugandan government leads on refugee settlement, physical protection and security. In terms of refugee protection in Uganda, OPM (the Office of the Prime Minister) and UNHCR take a joint lead, working with other humanitarian partners and the refugee community. For UNHCR, the protection of children encompasses 'protecting and advocating against all forms of discrimination; preventing and responding to abuse, neglect, violence and exploitation; ensuring immediate access to appropriate services; and ensuring durable solutions in the child's best interests' (UNHCR, 2012: 8).

An Age Gender Diversity Mainstreaming survey exercise conducted by InterAid Uganda in 2009 found that the priority child protection needs amongst urban refugees in Kampala were abuse and exploitation; lack of access to education; child labour; defilement; delinquent behaviour; and survival sex (InterAid Uganda, 2012). InterAid Uganda has observed that the categories of refugee children particularly at risk of sexual and gender based violence include: unaccompanied and separated children; adolescents; mentally and physically disabled children; working children; child mothers; children born to rape survivors; and boy child survivors (InterAid Uganda, 2012). Without access to basic services and assets, girls and boys may rely on risky activities to survive, including commercial sex work, illegal hawking on unsafe streets, or trading sex for food or shelter (Krause-Vilmer, 2011).

In June 2012, UNHCR published *A Framework for the Protection of Children*, which is based on and advocates for a systems approach to child protection which consists of multi-sector components and ‘includes actions for all duty bearers at all levels – family, community, national and international – to mitigate and respond to the protection risks children are facing’ (Skeel, 2012: 2). Within the systems approach, all functions and actions are interrelated, and all actors contribute to the comprehensive protection of children. UNHCR’s Education Strategy (2012-16) reflects a focus on refugee education as a core component of UNHCR’s protection mandate. It promotes the importance of schools as safe learning environments, emphasises improving access to quality education for refugee children and maximising the protective benefits of participation in school. It advocates for the integration of refugee children into national education systems.

The UNHCR *Framework for the Protection of Children* emphasises the role of families and communities in providing the care and protection that children need. The Protection Framework document includes a commitment to ‘understand, support and build upon existing community mechanisms that protect girls and boys’ (p15). Globally, community-based child protection mechanisms (CBCPMs) are front line efforts to protect children from exploitation, abuse, violence, and neglect and to promote children’s well-being (Eynon & Lilley, 2010; Wessells, 2009). CBCPMs are defined broadly to include all groups or networks at grassroots level that respond to and prevent issues of child protection and vulnerable children. These may include family supports, peer group supports, and community groups such as women’s groups, religious groups, and youth groups, as well as traditional community processes, government mechanisms, and mechanisms initiated by national and international non-governmental organizations (NGOs).

Many countries are currently undertaking mapping of community based child protection mechanisms (CBCPMs) as a critical step in strengthening child protection systems. Previous research conducted on CBCPMs has looked at rural areas (Sierra Leone) and urban slums (Kenya). However, this type of mapping has yet to be undertaken in refugee settings. This study, together with a parallel study conducted in Rwandan refugee camps, is the first study of CBCPMs undertaken in refugee settings. The refugee population in Kampala is unique because, whilst they are entitled to the same services as Ugandan nationals, they experience a range of unique challenges due to their refugee status. They are not entitled to specialist services outside the settlements, so it is likely that they rely heavily on community-based child protection systems.

The purpose of this study is to learn about community-based child protection processes and mechanisms in three urban refugee communities in Kampala, Uganda. In particular, the research seeks to identify what urban refugees see as the main harms or risks to children, what CBCPMs exist and how they are used, what protective factors enable children’s positive coping and resilience, and whether and how the CBCPMs link with elements of the formal, government led aspects of the national child protection system. This study has a special focus on the protective effects of education.

Uganda is a signatory to the 1951 Refugee Convention and 1989 Convention on the Rights of the Child, which ensure the right to education for refugees. Uganda provides universal primary

education (UPE), in which seven years of primary school are free for four children per family. However, government schools in Kampala typically charge fees to cover the costs of water, electricity and teachers' salaries, and students must pay for uniforms, school supplies, PTA funds, textbooks, transportation and meals (UNHCR, 2009a). These costs make it particularly difficult for urban refugee families to send their primary aged children to school (Krause-Vilmar, 2011). Secondary schools are fewer and face the same constraints as primary.

There is evidence that urban refugees suffer from limited access to education opportunities, as a result of financial costs, discrimination, lack of documentation and language barriers (Kashaija, 2009; Pavanello, Elhawary & Pantuliano, 2010). The discrimination faced by urban refugees also impacts on refugee children's ability to access education. Urban refugees are often victims of crime and are not always assisted by the Ugandan police, resulting in families keeping children at home rather than sending them to school (Grossman, Kippel & Zhang, 2013). Language barriers also create a challenge. As a result, more than half the school-age refugee children in Kampala are not in school (Kashaija, 2009). For many, refugee-led nonformal education programmes are the only accessible education activities (Krause-Vilmer, 2010).

By learning about child protection amongst urban refugee communities, the research hopes to contribute to new knowledge that will be useful in strengthening both the child protection system and services provided to refugees in Uganda.

2. METHODOLOGY

The research used a methodology of ‘rapid ethnography’ that focused on child protection and aimed to provide a rich, grounded picture of local beliefs, values, and practices in regards to harms experienced by children, and the community mechanisms for their protection and well-being. Recognising the advantages of a mixed methods approach, the research also collected quantitative data regarding participants’ ranking of various risks and the pathways of response. The tools and general methodology were developed by or based on the Inter-Agency Learning Initiative on Strengthening Community-Based Child Protection Mechanisms and Child Protection Systems.

Site Selection

Although Kampala is home to refugees from many countries, it was necessary for the purposes of this study to focus on just two refugee nationalities. This was because the ethnographic approach involves depth and understanding, so we aimed to learn about the child protection issues and responses in depth in two communities, rather than in less depth in a larger number of communities. The InterAid Uganda members of the research team identified the Congolese and Somali communities as most appropriate for this study. The Congolese are the largest refugee group in Kampala, and there are some similarities between the Congolese, Rwandese and Burundi populations in terms of child protection issues. Two Congolese refugee communities were selected for inclusion in the study: Nsambya Kirombe and Makindye Luvuma. The Somali refugee population is the second largest in Kampala, and one Somali community was included: Kasaato, in Kisenyi.

In the absence of confirmed statistical information on refugee communities in Kampala, these sites were selected by InterAid Uganda’s Outreach officer, in discussion with the research management team. They were identified because they were centres for large Somali and Congolese populations, who were believed to be representative of the wider Somali and Congolese refugee populations in Kampala.

Context and site description

CONGOLESE: Nsambya Kirombe

Nsambya Kirombe is a village in Makindye Division in Kampala District, Uganda. It is a low, wetland area (‘kirombe’ means wetland). Its population is uncertain, it is estimated to be around 7,000. Of these just under half are refugees, most of whom are Congolese, with a few Rwandese and Burundians.

It is a low income area, consisting mainly of informal settlements. People construct their own houses, and theoretically the government can evict them at any time. There are no structured roads in the area. Congolese refugees have been in this location for the last 18 years, and they continue to arrive. The area is home to a mixture of Congolese tribes with the majority coming from Bukavu and Rutchuru.

In Nsambya Kirombe, people build their own houses, mainly using bricks. Most refugees are tenants rather than owners, and rent single rooms, sharing a bathroom and latrine with other tenants. There are water taps, but sometimes tenants have to buy water from the landlord. As an alternative, people collect water from springs in the wetland, although this water is not safe for consumption.

Mostly women take the lead on economic activities in Congolese refugee communities. They hawk bitenge (Congolese cloth), jewellery, watches, sometimes travelling to neighbouring districts of Kampala or even as far as western or northern Uganda. They sell food, such as fish, vegetables, cassava leaves, to fellow Congolese. Women also wash clothes for neighbours or work as househelps, and commonly become involved in survival sex. Men sometimes work as brokers,

helping Congolese businessmen to find stock to take back to Congo. Men also work as tailors, and some as musicians. Young boys work as porters or on construction sites.

Leadership within the refugee community in Nsambya Kirombe is organised in terms of churches. There are many churches, and the leaders of each church consist of the pastor, council of elders, representatives of women, the youth and children. The pastors are highly respected. Many churches are organised into associations. For example, BARA is the Born Again Refugee Association, and is the main association in this area. It was founded by Zion church, the Chairperson of BARA is the Zion pastor, and the headquarters of BARA is in the Zion church building. The BARA leaders are nominated by their churches and hold the role for an indefinite period. Another association in Nsambya Kirombe is the Community of Congolese Churches in Uganda (CCCU).

Since Nsambya Kirombe is a wetland area, and people have low incomes, the health conditions are poor. A private missionary hospital, St Francis Raphael, is nearby, and refugees in Nsambya Kirombe have their own clinics, although some of those working in these clinics work outside their area of competence. For example, some have medical qualifications but are practising surgery, which they are not qualified in. These clinics are not registered or regulated. There are no KCCA clinics in Nsambya Kirombe, the closest are about 3km away.

There are no government-aided schools in Nsambya Kirombe itself, but there are some primary schools within the UPE programme which are accessible. There are also many private schools. St Mbugua secondary school is private, but some refugees send their children there. Katwe-Noor secondary school is private but has a USE programme. Many refugee children from Makindye division attend secondary school at Midfield secondary school, along Entebbe Road, although it is quite far from where they stay.

CONGOLESE: Makindye Luvuma

In Makindye Luvuma, housing is less congested than in Nsambya Kirombe, and people are financially somewhat better off. The estimated population is around 20,000, with refugees making up one-quarter. Many are of the Banyabwisha tribe, and Banande from North Kivu region of DR Congo. The Congolese have been in Luvuma for at least 18 years, and continue to arrive. The Congolese living around this area access Makindye Luvuma for spiritual and social support.

Housing consists of semi-permanent and permanent structures, of a better standard than in Nsambya Kirombe. Refugees generally rent accommodation, and share a bathroom and toilet with other tenants. There are shared water taps, and a few wells/ springs.

Economic activities are the same as in Nsambya Kirombe. Congolese refugees in this area survive mainly either by hawking jewellery or working at building sites around town.

As in Nsambya Kirombe, the churches are very active, and organised into associations. For example, there is the Refugee Solidarity Group (RSG or 'Solidarity'), which is associated with the Community of Evangelistic Pentecostal Churches. The RSG is highly organised, it has a revolving fund, a tailoring workshop (for both training and income generation), a language class, and several self-help projects for the youth and women. There is also Shekinah church in Mubarak zone, which is dominated by Lingala-speaking Congolese.

The nearest KCCA health centre is about 5km away. There are two primary schools for children in this area; the main secondary school is St Mbugua's.

SOMALI: Kasaato (Kisenyi)

Kasaato is located in Kampala Central. The population is around 10,000, and the majority of Somali refugees in Kampala (around 90%) stay in Kisenyi. Most Somalis in Kasaato are refugees rather than Ugandan-Somalis. The Somali refugee population has been living in Kisenyi since 1993, and continues to grow.

Kasaato is overcrowded, with poor housing conditions. Somali refugees in Kasaato live in flats, and self-contained rooms in old buildings. Most accommodation has running water and toilets, although these are often sub-standard. Sanitation is very poor, there is bad drainage and a bad sewage system.

Many Somali refugees have businesses, and women make snacks and sell, or sell clothes and perfume (usually through hawking rather than in shops, although some shops exist). Some men work as tailors. The area where Somali refugees stay has been developed and is now an informal industrial area with small processing plants, people making maize flour, producing local saucepans, selling scrap. There are guesthouses, mosques, shops, restaurants, forex bureaux, retail and wholesale businesses for Somalis. There are also mobile money transfer businesses, tailoring shops, entertainment centres mainly owned by Eritreans and Ethiopians but customers are Somalis. There are also private language centres owned by Somalis.

The Somali community, both refugee and non-refugee, in Kampala is represented by a Chairman, a Vice Chairman and other committee members. There is a community office in Kasaato for the Somali Community, with elders who play a role in solving grievances and act as a link between Somalis, NGOs and the government. There are also clan leaders, who are highly respected, and religious leaders. There are around three mosques in Kasaato; the main one is Tawhid mosque.

KCCA (Kampala Capital City Authority) health centres offer treatment free of charge and refer patients to Mulago government hospital when necessary. There is a KCCA health centre (KCCA health centres offer free services) very close to Kasaato, and Tawhid school is the closest primary school. Others are Nabagereka, Nakivobu Blue, Kyagwe Road primary schools. There is no secondary school in Kasaato, but some refugees send their children to Old Kampala secondary school, and some to Kampala Apostolic.

Research team, organisation and capacity building

The research team included refugee, national and international researchers.

CPC Network research affiliates, consisting of Dr. Lindsay Stark (Principal Investigator), Mark Canavera, Dr. Rebecca Horn and Dr. Mike Wessells, were responsible for developing the ethnographic research design and methodologies. They worked closely with the Executive Director of InterAid Uganda, Scholastica Nasinyama, during the planning phase.

The InterAid Uganda team, consisting of Scholastica Nasinyama (Executive Director); David Bizimana (Monitoring and Evaluation Officer) and Lilia Aporo (Assistant Project Co-ordinator), took primary responsibility for recruitment of the research assistants and logistical preparations for the project (e.g. booking a training venue, purchasing materials).

Ten research assistants were recruited to participate in the training workshop. Following the training, seven participated in the data collection (one dropped out of the training due to family issues; another struggled to master the skills required; a third decided not to participate in the data collection due to his other commitments). Of the ten who were selected for training, four were Somali and six were Congolese. The final team for the data collection consisted of two Somali (one male, one female) and five Congolese (three male, two female).

Once the project began, David Bizimana (Monitoring and Evaluation Officer) took on the role of Research Co-ordinator, which involved overall management of the data collection process, including maintenance of files and database.

Emmanuel Kironde (Programme Associate) acted as Field Co-ordinator throughout the data collection phase. He was responsible for ensuring the daily implementation of the work plan, daily collection of research records, monitoring and coaching the research assistants. Lilia Aporo (Assistant Project Co-ordinator) acted as administrative assistant during the project, managing logistical and human resource issues, such as arranging contracts for research assistants. Scholastica

Nasinyama (Executive Director) continued to provide ongoing support for the project, and decision-making when challenges arose.

Two international researchers from the CPC Network were involved in the training workshop for the research assistants. Dr. Mike Wessells led the first week of the training workshop; Dr. Rebecca Horn also contributed to the first week of training, and took the lead during the second week. She worked closely with the national research team during the data collection phase, backstopping their work and checking the quality of the data. She also took the lead in the analysis phase and drafted the report.

To prepare the research assistants for their work, an 11-day preparation workshop was conducted in Kampala immediately before data collection began in February and March 2013. The workshop used a highly participatory methodology that included vignettes, role plays, discussion of ethical dilemmas, group problem-solving discussions, and field testing of the methods to be used. These activities were guided by an action-reflection methodology wherein group reflection and problem-solving followed each activity. The workshop developed skills for using effectively the tools outlined below, with particular emphasis on how to ask probing questions. Also, the workshop sharpened ethical awareness and ability to manage challenges that frequently arise in the field.

Research tools and questions

The various research tools (see Annex 1) are summarised below (description based on Kostelny, Wessells, Chabeda-Barthe & Ondoro, 2013).

Group Discussions of Risks and Functional Responses: These are 90-minute, researcher facilitated discussions with 8-10 participants who first identified and ranked in importance what participants see as the main harms to children other than poverty and health problems. The main harms were those judged to be 'most serious.' Next, for each of the two child protection issues prioritised by that group, participants outlined the typical pathways and mechanisms of response. These were functional in that they were what people typically used, even if that was not intended by child protection workers. The participants came from a pre-defined sub-group such as teenage girls, teenage boys, women, and men.

In-depth interviews: The research assistants conducted one-to-one interviews of approximately 45 minute duration in the local languages with diverse young people (13-17 years), both in-school and out-of-school, and adults. The interviews aimed to probe the key research questions, yet were conducted in a contextual, flexible manner that took into account the participant's gender, their situation and social position, their interests and their willingness to discuss particular topics. The interviews were open-ended in that they were not strictly scripted, and probing questions were used to follow the interests of the participants.

Key Informant Interviews: Individual, in depth interviews were conducted with key informants such as Local Council officials, religious leaders, and members of Child Protection and Education Committees in order to learn about their views of child protection threats in the communities they worked with; the various mechanisms (e.g., local/ traditional, NGO mechanisms; government mechanisms) that may or may not be present in the locations focused on; and the linkages of community mechanisms with the national child protection system. Like the other tools listed above, these interviews were flexible and open-ended. Guiding the researchers' inquiries, however, were the questions in the box on the following page.

Body Mappings: To engage young children and learn about their perspectives, the research assistants conducted body mappings (typically for 30-45 minutes) with small groups of children 6-10 years of age. In this method, a child lay on a large sheet of paper while other children used crayons to trace an outline of his or her body. Having coloured in the drawn figure and named it, the children were asked questions such as "What do the eyes see that they like?" and "What do the eyes see that

they don't like?" Similar questions were asked regarding ears, mouth, hands, and so on. Care was taken not to probe what the children say since the intent was to avoid exploring the child's own, possibly painful experiences.

KEY RESEARCH QUESTIONS

- How do local people understand:
 - What are girls' and boys' normal activities, roles, and responsibilities?
 - What role is education perceived to play in children's development and protection? Is education important, and, if so, why?
 - What are the main child protection risks or sources of harm to children? Are these the same for in-school and out-of-school children?
 - What processes or mechanisms are used by families or communities to support children who have been affected by various protection threats? Are schools involved in this support process?
 - What processes or mechanisms are used by families or communities to support out-of-school children? What are the outcomes of those mechanisms, and how satisfactory are the outcomes in the eyes of different stakeholders?
- How do child protection risks vary by gender and age? How do they vary by educational enrolment for different age and gender groups of children?
- To whom do girls or boys turn to for help when protection threat X arises? Are schools perceived as a point of entry for protection threats? Why, or why not?
- Who are the natural helpers and what networks do they have? Are these natural helpers and networks linked to the education system?
- What are the indigenous, 'traditional' mechanisms of protection and how are they regarded by different groups? Did they change with the experience of displacement that refugees face? Are these mechanisms linked to the educational system, and if so, how? If not, are there identifiable reasons that they are not?
- Apart from indigenous mechanisms, what groups or structures (e.g., Child Protection Committees or community based child protection mechanisms facilitated by NGOs) exist in urban refugee communities?
- What do communities do to promote school enrolment? Are CBCPMs actively involved in supporting or advocating for children's access to school? Are CBCPMs actively involved in supporting or advocating for safer schools?
- Who has or does not have access to existing protection mechanisms (e.g., do refugees have access to the same mechanisms as their host populations)?
- Who has or does not have access to education (e.g. do refugees have access to the same mechanisms as their host populations)? Are there linkages between protection mechanisms and schools?
- Are there benefits of education to the protection of children? If so, what are they?
- What do NGO actors see as their main roles and responsibilities in regard to community based child protection mechanisms?
- What are the linkages of community mechanisms with the formal elements of the child protection system? How do communities perceive formal mechanisms and structures?

The group discussions were the main source of quantitative data on the harms to children (through the ranking of the top three concerns). It should be noted that the question asked—‘Which of these harms is most serious?’—could have evoked rankings based on perceptions of the frequency of the harm, the magnitude of the harm, or some combination thereof. The question was asked in this way because field tests had indicated that it was an effective means of identifying which harms were of greatest concern to people. In contrast, questions about magnitude and severity often failed to identify the harms that were of greatest concern to local people. For example, a harm such as child sacrifice is high in severity, yet people might not view it as a primary concern (that is, as ‘less serious’ in the local idiom) because it occurs infrequently. Similarly, a harm such as being out of school might be seen as lower in severity than child sacrifice yet might be of greater concern since it occurs frequently or is viewed as a gateway to other harms.

Research ethics

The research recognised the ethical complexities and dilemmas associated with research on children (Alderson & Morrow, 2011; Boyden, 2004; Hart & Tyrer, 2006; Morrow, 2009; Schenk & Williamson, 2005). The researchers were trained on and agreed to abide by the UN Code of Conduct, and the InterAid Uganda rules and regulations for staff.

In normal circumstances, InterAid Uganda staff are required to report any concerns about the welfare of a child to the office, and the case will be followed up. However, it was agreed with the InterAid Uganda Executive Director that this process would be adapted for the research assistants. In life-or-death situations, they would intervene as they felt appropriate, but in all other situations they would make a note of their concerns and hand the information over to InterAid Uganda once the research project ended. InterAid Uganda staff would then be able to follow up on the case without their intervention being linked to the research project.

The refugee communities in Kampala have extensive needs, and rely heavily on the support of InterAid Uganda, which is an implementing partner of UNHCR. Efforts were made to manage the expectations of the research communities in relation to this research. For example, in the period leading up to the beginning of the data collection, the Executive Director of InterAid Uganda explained the nature of the research, and the communities which would be involved, in her morning address to the large numbers of refugees who attend the InterAid Uganda offices each day. This included an explanation of why some communities were included in the research and others were not, and emphasised that the communities and individuals involved would not receive any benefits through their participation. InterAid Uganda outreach officers also communicated the nature and purpose of the research to the communities they were working in.

To avoid raising expectations, the research assistants presented themselves as researchers from the Child Protection in Crisis (CPC) Learning Network, who had partnered with InterAid Uganda for the purpose of this research. This was intended to reduce the expectations of material aid or other benefits that might have arisen if the research assistants presented themselves as InterAid Uganda staff. The research assistants took care to explain the research in a consistent way, to avoid contributing to rumours and confusion about the purpose of the study, and to be very clear that those who participate in the research would not be asked to give their names, or to talk about their own personal experiences and situation. This was important because of concerns that the research would somehow relate to resettlement or that information obtained during the study would be included in files held by InterAid Uganda or UNHCR.

To avoid causing unintended harm, children and adults were asked about the situation generally in their community in relation to child protection, rather than about their own situations or experiences. However, InterAid Uganda counsellors were available as sources of psychosocial support if this became necessary during the data collection.

The challenges of obtaining informed consent in the field have been well documented (Allden et al, 2009; Mackenzie et al, 2009). Given refugees' concerns that the information obtained during the research would impact on their resettlement cases, a decision was made not to obtain written informed consent. Requesting signatures would introduce a formality which would not be conducive to building trust. As an alternative, the research assistant who was responsible for inviting a person(s) to participate in a group discussion or individual interview signed to confirm that she or he had given all the necessary information, and that the person(s) had agreed to participate. This procedure was followed, with care taken to avoid even subtle forms of coercion.

To protect confidentiality, voice recordings were downloaded daily from the voice recorders onto an InterAid Uganda laptop by the field co-ordinator. They were then deleted from the voice recorders, which remained in the possession of the research assistants. The written records were modified to remove names and other individual identifiers.

Data collection and work plan

Interviews and group discussions within the Somali refugee community were conducted in the Somali language. In the Congolese community, French, Kiswahili and Lingala were used. During each interview, the research assistant took notes and recorded the interview on a digital voice recorder, if the participant granted permission. Soon after the interview, the research assistant used the notes and the tape recording to prepare a verbatim transcript of the interview in English. The group discussions were conducted by two researchers, with one serving as facilitator/interviewer and the other as note-taker. Shortly after the group discussion, the two researchers reviewed the notes, filled in key points, and used the tape recording to develop the verbatim transcript. For body mapping activities, the research assistants kept the body maps that the children had drawn, took notes on which items the eyes, the ears, or other body parts liked or disliked, and then prepared a report that included all the responses.

The research assistants were all refugees, some of whom lived in the communities where the research took place. The others lived in nearby communities. They spent five days per week working in the target communities during March and April 2013. The field co-ordinator was also present in the field for the majority of the data collection period, to oversee the quality of the work and provide suggestions for improvement. The field co-ordinator and research assistants forwarded the data to the Research Co-ordinator and the Lead Researcher, who quality checked them daily. In addition, a sample of the voice recordings were listened to by a translator, and compared with the written record to check the accuracy of the translations and the verbatim account. One Somali translator and one Congolese were employed during the data collection phase for this purpose. In addition, a copy typist was recruited to type up the handwritten reports prepared by research assistants.

The five Congolese research assistants spent 12 data collection days in the first community (Nsambya Kirombe) followed by 12 days in the second community (Makindye Luvuma). There were some additional days during this phase for supervision meetings and preparation of transcripts. The two Somali research assistants spent 20 days in Kasaato, with some additional days for preparation of transcripts. The first day in each community was spent getting to know key individuals, and working with these people to explain the research to community members. The next few days focused on group activities (group discussions and body mappings). Individual interviews were introduced later on, once relationships had been established between the research assistants and community members. The activities were structured in a manner than enabled learning about different sub-groups within the communities. For example, group discussions were conducted separately with adult men, boys aged 13-17, adult women, and girls aged 13-17. Table 1 shows for each refugee community the actual number of activities of each kind, with the different groups of participants.

Table 1. Summary by area of main research activities

| Research tool | Gender | Age group | SOMALI Kasaato | CONGOLESE Nsambya Kirombe | CONGOLESE Makindye Luvuma | TOTALS |
|--|--------|--------------|----------------|---------------------------|---------------------------|------------|
| Group discussion: Harms and response pathways | Male | Adult | 3 | 4 | 4 | 11 |
| | | Young people | 3 | 5 | 6 | 14 |
| | Female | Adult | 3 | 6 | 6 | 15 |
| | | Young people | 3 | 4 | 4 | 11 |
| TOTALS | | | 12 | 19 | 20 | 51 |
| In-depth interviews | | | | | | |
| In-depth interviews | Male | Adult | 13 | 21 | 27 | 61 |
| | | Young people | 9 | 13 | 9 | 31 |
| | Female | Adult | 13 | 15 | 22 | 50 |
| | | Young people | 11 | 12 | 10 | 33 |
| TOTALS | | | 46 | 61 | 68 | 175 |
| Body mappings | | | | | | |
| Body mappings | Male | 6-10 | 7 | 6 | 6 | 19 |
| | Female | 6-10 | 7 | 6 | 6 | 19 |
| TOTALS | | | 14 | 12 | 12 | 38 |

A total of 51 group discussions were held (19 in Nsambya Kirombe; 20 in Makindye Luvuma; 12 in Somali community). Of these, one quarter were with adult women, one-quarter with adult men, one-quarter with young women, and one-quarter with young men. Nine of the group discussions with Congolese young people were with out-of-school respondents; four were conducted in schools, and the remainder with a mix of in-school and out-of-school young people. Four group discussions were conducted with in-school Somali young people, and two with out-of-school young people.

A total of 175 in-depth interviews were held, excluding 12 key informant interviews conducted by refugee research assistants (61 in Nsambya Kirombe; 68 in Makindye Luvuma; 46 in Kasaato). Of these, 83 were with women and 92 were with men; this reflects the fact that we had fewer female research assistants in the Congolese team. Interviews were conducted with 64 young people and 111 adults. The intention had been to conduct equal numbers with young people and adults, and this . Of the young people interviewed, the majority (42) were out of school; only eleven were known to be in-school; the educational status of 16 is not known.

Key informant interviews were not related to a particular community; a total of 40 were conducted (28 by InterAid Uganda staff and the consultant working on the project, and 12 by research assistants). Key informants included: members of the Child Protection and Education Committees; representatives of organisations working with refugees in Kampala; Local Council members; community leaders (including religious leaders); teachers and head-teachers; Probation and Social Welfare officers; health workers; and representatives of the police Family and Child Protection Desk.

Challenges and limitations

The team experienced some challenges during the data collection phase which limited the quality of the data, to some extent.

Many of the research assistants struggled to provide transcripts in a timely manner. The delay in receiving transcripts of group discussions and in-depth interviews had an impact on the data in two ways. Firstly, all the research assistants were new to the ethnographic approach, and needed to receive feedback on their work in order to develop their skills further and obtain high-quality data. When transcripts were received late, research assistants received feedback on their interview or group discussion only after they had conducted a number of other interviews/ group discussions,

sometimes making the same error in all of them. Secondly, as transcripts were received, the lead researcher monitored the characteristics of participants, in order to give the research team guidance as to the kind of participants they should target for future interviews. For example, if a disproportionate number of older participants were being interviewed, the lead researcher would ask the research team to focus more on younger participants. However, the delay in receiving transcripts, especially towards the end of the data collection phase, limited the extent to which this was possible. Generally, the challenges in receiving transcripts on time made it difficult for the data collection to be as responsive as it could have been.

The second main challenge was that the team only had two Somali researchers, and both struggled with the skill of in-depth interviewing. They found it difficult to probe and explore issues with respondents. As a result, the data obtained about child protection issues and CBCPMs in the Somali refugee community is quite limited.

A more general limitation of this research methodology was that it was difficult to obtain information about sensitive issues. Although interviews were conducted by refugee-researchers, there was not sufficient time for them to become established in the communities they worked in, or to build trusting relationships with community members. As a result, very limited information was obtained about sensitive issues such as the harms experienced by children with disabilities, or abuse perpetrated against children by family members. Many studies show that family members are the most common perpetrators of sexual abuse against children, but the information in the current study only represents rape and sexual abuse perpetrated by individuals outside of the household.

3. HARMS TO CHILDREN

In discussion groups on risks and functional responses, people were asked to identify the risks to children and to rank order them according to seriousness (i.e., how concerning they were). Table 2 shows the harms identified, and the percentage of discussion groups that ranked each as being among the top three harms.

These categories and category names were intentionally kept very close to what the participants said in both group discussions and in-depth interviews. An exception is the category of ‘early sexual activity’, which includes ‘early sex’, early marriage’ and ‘prostitution³’, which were often used interchangeably by respondents. ‘Early pregnancy’ was also combined with these, since there was so much overlap between the discussion of this issue and early sexual activity, it became difficult to separate them.

Some prioritised harms were excluded from the table below, either because the harm was vaguely defined, even during the discussion itself, (e.g. domestic problem) or because it is not a direct child protection issue (e.g. lack of jobs for parents). The excluded harms are: domestic problem, language barrier, lack of food, lack of job for parents, children’s trauma/ stress, exploitation and lack of leisure, lack of assistance, and lack of identification cards.

It is worth noting that many of the harms identified related in various ways to poverty, which facilitators were trained not to focus on during group discussions. This was in response to studies of CBCPM in other countries, which found that once poverty or health issues were raised, it became challenging to have a discussion about other issues that fall under the umbrella of child protection. Nevertheless, poverty and health cropped up frequently in the discussions.

Table 2. The main harms to children as rated in the group discussions on harms and responses.

| | CONGOLESE (N=39) | | SOMALI (=12) | | TOTAL (N=51) | |
|-----------------------------------|------------------|-------|--------------|-------|--------------|-------|
| | N | % | N | % | N | % |
| Lack of education | 36 | 92.31 | 9 | 75.00 | 45 | 88.24 |
| Discrimination | 19 | 48.72 | 10 | 83.33 | 29 | 56.86 |
| Rape | 12 | 30.77 | 2 | 16.67 | 14 | 27.45 |
| Inadequate/ overcrowded house | 11 | 28.21 | 0 | 0.00 | 11 | 21.57 |
| Early sexual activity | 7 | 17.95 | 1 | 8.33 | 8 | 15.69 |
| Drug abuse | 2 | 5.13 | 5 | 41.67 | 7 | 13.73 |
| Child trafficking | 1 | 2.56 | 3 | 25.00 | 4 | 7.84 |
| Child neglect/ lack of child care | 3 | 7.69 | 0 | 0.00 | 3 | 5.88 |
| Child beating | 2 | 5.13 | 1 | 8.33 | 3 | 5.88 |
| Delinquency/ street groups | 2 | 5.13 | 1 | 8.33 | 3 | 5.88 |
| Stealing | 2 | 5.13 | 0 | 0.00 | 2 | 3.92 |
| Child labour | 1 | 2.56 | 1 | 8.33 | 2 | 3.92 |
| Accidents | 1 | 2.56 | 1 | 8.33 | 2 | 3.92 |
| Child kidnapping | 1 | 2.56 | 0 | 0.00 | 1 | 1.96 |
| Incest | 1 | 2.56 | 0 | 0.00 | 1 | 1.96 |
| Acculturation | 1 | 2.56 | 0 | 0.00 | 1 | 1.96 |
| Insecurity | 1 | 2.56 | 0 | 0.00 | 1 | 1.96 |

³ The term ‘prostitution’ is mainly used in this report, rather than ‘sex work’, because it was the term used by respondents.

| | | | | | | |
|-----------------|---|------|---|------|---|------|
| Lack of parents | 1 | 2.56 | 0 | 0.00 | 1 | 1.96 |
| HIV infection | 0 | 0.00 | 1 | 8.33 | 1 | 1.96 |

The percentages refer to the percentage of all groups (whether conducted with girls, boys, women, or men) that ranked a particular item among the top three harms. Each group had 7-10 participants.

There were very few differences between the two Congolese communities in the harms they prioritised, so the data from these two groups have been combined. Lack of access to formal education was by far the child protection issue that most concerned Congolese refugees, with more than 90% of groups listing it among their top three harms. This is followed by discrimination, rape and inadequate or overcrowded houses (resulting in children being exposed to adult sexual activity). There were no differences between younger and older Congolese respondents in the types of harms they prioritised, but many more female groups (11 of 20 groups) identified rape as one of the top three child protection issues than male groups did (one of 19 groups).

The top two harms prioritised by the Somali refugee community are the same as for the Congolese: discrimination and lack of education. However, the third most important harm for the Somali groups was drug abuse, and the fourth was child trafficking. It is more difficult to identify patterns across gender and age groups because of the smaller number of Somali group discussions, but it is clear that discrimination and lack of education are priorities for both male and female respondents, across the age groups. Rape was prioritised by two of the six women's groups (both younger and older respondents), but not at all by the men's groups. Drug abuse was identified as a higher priority by men's groups, and by younger respondents, and child trafficking was a somewhat higher priority for younger groups, both males and females.

Due to these differences between the two communities, lack of education and discrimination are discussed below for both communities together, followed by a discussion of rape and overcrowded housing which draws only on data from the Congolese communities, and a discussion of drug abuse and child trafficking which draws only on data from the Somali community. Each of these harms is described, along with typical narratives that illustrate the views people held regarding each.

Lack of Access to Formal Education (Congolese and Somali)

Lack of access to the formal education system was a source of distress and concern to the majority of refugees the research team spoke to, both Congolese and Somali. The general view was that the majority of refugee children of school-going age were not in school.

'The biggest thing that harms our children is lack of education, they are not going school most of them' (Somali, female, 15 years).

'Most of them don't go to school. If you lack money for eating, rent and so where are you going to get money for school fees? Here they don't study' (Congolese, male, 35 years).

A variety of causes of this situation were mentioned by respondents:

'The reason why children are not schooling is that some children do not want to school, other children, their parents do not want them to go back to school, and other children lack money to school with' (Congolese, male, 13 years).

Costs of education

However, the most significant barrier, by far, was the cost involved in sending a child to school, and refugees' inability to meet these costs. Although there is a Universal Primary Education (UPE) system in Uganda, which states that primary education should be free for all, in practice there are some costs involved. These are fairly low in UPE schools, but are still beyond the reach of many refugees. Secondary school presents even more of a challenge.

Since refugees who chose to live outside the settlements do so on the understanding that they will not receive any services, they faced a big challenge in earning enough money for food, rent, and to meet the other basic needs of their families (e.g. soap, clothing). Paying school costs in addition to these was beyond many.

'We are moving around [looking for work] so that children can get something to eat. We are not able to send them to school, the little we are getting we are using for paying rent and buying food' (Congolese, female, 32 years).

The research team heard many times, mainly from Congolese respondents, that parents often tried to pay school fees in instalments, but when they became too far behind with their payments their children were sent home from school. This was very shameful for the children, and meant that they had to remain at home until the parent raised enough money to send them back to school. This obviously had a negative effect on the child's performance in school.

'Today you may send a child at school but after days he or she will be chased from school and the child may spend days at home or a month, until the time that the parents will get something to pay' (Congolese, male, 41 years).

There was a belief amongst some that schools discriminated against refugee parents, in that they were more tolerant of Ugandan parents who fell behind with their payments than they were of refugee parents.

Parents do not allow children to attend school

Although the majority of both Congolese and Somali parents were said to value education greatly, and to find it very painful that they were unable to send their children to school, some parents were said to deliberately exclude their children from school.

In some cases, the research team heard that parents believed there was no need to send their children to school, since they would be resettled overseas very soon.

'The parents are more concerned about food and accommodation and neglect the component of education. Parents see no need for education since they feel like they will be resettled soon' (Key informant, CPEC member, Makindye Luvuma).

Some parents were said to keep their children out of school so they could help earn an income for the family, or to take care of the house and younger siblings.

'Parents take their children with them in the market so that they can be given small business, of which a child will start taking a parent's responsibility. And if you tell that parent, 'why aren't you schooling your children?', he or she becomes nasty on you, saying she or he will be helping me over here, while we as children are not willing to start working when we are still children, but going back to school is what we want' (Congolese, male, 13 years).

However, in the majority of cases the research team heard about, the children who were denied access to school were not living with their biological parents. The relatives or step-parents they were depending on did not prioritise sending these children to school.

'When parents separate, the newcomer (new wife) at times refuses or influences the husband not to pay fees for children' (Key informant, LC1 Chairperson).

'If the child stays with the step mother, she tells the child do the work at home and even wash the clothes instead going to school' (Somali, group discussion, age 13-17).

Some parents kept children at home in order to protect them from perceived harms, including road traffic accidents on the way to school, especially if the school was some distance from the home.

Challenges children face in school lead to them dropping out

There were also a number of challenges faced by refugee children attending school, which, in some cases, led to them dropping out. The main challenge related to the difficulties children experienced in fitting into a different school system, which was taught in a language they did not know well.

'Since they are coming from French speaking country, often we have witnessed that in class, these ones they laugh at them just because the way they pronounce words, the way they speak. So they will feel withdrawn, detached from the class still' (Congolese, female, 30 years).

'Children leave school because they don't know the language of the teacher who is teaching them ... if you tell the child 'I will buy for you books and pens. Go to school', when he reaches school he would be like a stone sitting in the classroom. After spending two days there he would drop out of school' (Somali, male, 48 years).

This was said to affect the older students more, since the younger children picked up a new language more quickly, and the teaching was less intense in the lower classes. A common consequence of this was that children were assigned to a class much lower than they would have been in at home, so they were older than most of their fellow-pupils. This led to considerable embarrassment for the refugee students. Some dropped out because they could not face the shame of being in such a low grade at their age, or because they lost motivation at being put in a class far below the level they had been studying at before they were displaced.

'In my primary school, I was at the same desk as girls around 17 years old and me I was 12 years ... sometimes the teacher neglected them because he thinks they are mature people, he doesn't care, and the girls are feeling shame and sit behind in the class' (Somali, female, 16 years).

'There are other children who refuse to go to school because of their age. They say that they are mature they can't go in lower classes' (Congolese, female, 14 years).

An additional challenge for some Somali children was that they had not attended school at home, and neither had their parents. As a result, they did not have a solid base on which to build. In addition, their parents were unable to support them in their learning, by helping them with homework, or questioning them about what they had been doing at school.

'Most of the Somali refugee parents are illiterate ... An uneducated father who can't help the child with the lessons they learnt that day. The child returns from school and goes out to play. Later when she comes home she doesn't revise but eats and goes to sleep. She doesn't know the previous day's school lesson. She fails the exam, the father then says, this school does not give quality education. He tells the children to stay at home and not go to school anymore' (Somali, male, 28 years).

Both Congolese and Somali refugees felt that their children were discriminated against at school. Discrimination seemed to affect the Somali students particularly strongly, partly due to the Ugandan school system not always being sensitive to the religious requirements of the Somali students (e.g. not allowing time to attend Friday prayers; requiring girls to sit next to boys). It should be noted that this was not the case in all schools; the research team heard of some that had created an Islamic prayer space within the school and attended to other needs of Muslim students.

'Religiously, it bothers the girl to have her shoulder next to a boy. She will not like it, she feels shy, and it makes them very uncomfortable ... whether Somali or local they don't like to sit with a boy. Even the parents, if they go to the school and see this would say, no, no my daughter will not come to this school. They see this as a danger towards their children' (Somali, male, 48 years).

The poor conditions in which some refugees live also made it difficult for children to study and perform well in school.

'You cannot study without eating. You cannot study anything. You cannot also walk on the road for three hours in the morning to school, what can you study? You will have got tired, you will be dozing in class and you will not understand what the teacher is teaching' (Congolese, female, 35 years).

The challenges highlighted in this section contribute, in some cases, to children performing poorly at school, or even dropping out.

Children do not want to attend school

Some children were influenced by others to drop out of school. Sometimes this was because the child wanted the opportunity to earn some money through collecting scrap metals and plastic for sale, or because they had little interest in school and preferred to spend their time with friends.

'It can be from bad groups that influence the child not to go to school, they can incite you into stealing and show you how they are enjoying life' (Congolese, group discussion, male, 18-25 years).

In many cases, the main factor contributing to this was the parents' inability to monitor their children, since the parents were out for long hours trying to earn money to sustain their families. Without the supervision of their parents, children sometimes made poor choices.

Certain groups of children excluded

Gender issues were sometimes raised by respondents in discussions of whether refugee children were able to access school. Many said lack of education affected both girls and boys equally, particularly in the Congolese community.

'Lack of education does not look at girls or boys because if a parent has no money he will not take both the girls and boys to school' (Congolese, male, 18 years).

However, a small number of Congolese respondents said that girls were more likely to be kept at home while boys went to school, and many Somali respondents said that this was the case in their community. Some explained that the Somali culture prioritised educating boys, and there was a fear that girls would be 'spoiled' by education, so should be kept at home to learn the household skills they would need as adult women.

'For girls most of the time she is at home and there is a lot of pressure on her from home. There is a tradition in the Somali that if education can be afforded the boy is given first priority. The girl is told to work in the home, clean, cook, wash clothes, don't go to school. Here the girls get disappointed ... that is a culture of the Somali: they believe that the boy will help the parents when he becomes educated but the girl will get married and will no longer belong to the family. She'll help other people. So we have seen a boy is sent to school and the girl remains at home. If the parents can afford, both the boy and the girl are sent to school' (Somali, male, 25 years).

Somali respondents also talked about girls being forced to marry while they were still young, and having to drop out of school as a result. Congolese respondents did not commonly talk about forced marriage, but they did frequently raise the issue of girls' education being affected by early pregnancy, whether through early rape, exploitative sex or consensual sex. In many cases, girls were said to drop out of school once they became pregnant.

'That child who gives birth knows the men, so she stays at home and doesn't go to school, she may get pregnant again.' (Congolese, female, 38 years)

At times, girls would try to return to school once the baby was old enough to be left with someone, but there were challenges associated with this. Some girls had nobody who could take care of the baby while they were at school, but even those who did sometimes found their performance was

affected because they were thinking about the child while they were at school, and/ or they were teased by other students.

'I asked at InterAid Uganda if there is school for young girls and they said yes, but they could not help me because I had a young baby and I had no-one to care for her' (Congolese, female, 20 years).

As already mentioned, a group of children commonly excluded from education was those not living with their biological parents. Children living with step-parents, relatives, foster families, or who were fending for themselves, were said to rarely be able to attend school. This was true in both the Congolese and the Somali communities.

Even where children were living with their biological parents, it was often only possible to send some children in the family to school and leave others at home. This necessity was very distressing for parents, who were forced to choose between their children. Some refused to do so, and all children remained at home.

'Parents cannot choose among children when they are the biological parents of those children, either they are all schooling or they are all not schooling ... You will find a parent who has five, six, eight children and more. All those ones cannot school if a father has no means. You cannot say that as you have no money, let me school this one of, for instance, 18 years old and leave other children. Which kind of parent will you be? If there is no means, all cannot school' (Congolese, male, 37 years).

However, others tried to choose to enable at least some of their children to attend school. Some allowed the younger ones to attend, while the older ones stayed at home to look after the others, or went out to work.

'You can have five children, you will bring only two [to school] and the others will remain home ... You will find that there are children who are 20 years old and 18 years old who went already to school and stopped somewhere because of possibilities. So, you will take the little ones who never went so that they can at least also reach somewhere' (Congolese, female, 32 years).

EFFECTS OF LACK OF EDUCATION

The negative impact of being out of school on a child's emotional wellbeing was widely acknowledged by respondents. They talked about children feeling sad, frustrated, angry, and having low morale. In some cases, this was said to have a significant effect on the child's mental health.

'The child is feeling upset because this child sees every day another child who is going to school. Do you think the child is happy for that? No, he is not happy because he is always thinks he is nothing' (Somali, female, 60 years).

The main concern expressed in relation to children being out of school was that their opportunities in the future would be severely limited, both in terms of professional opportunities, and in their life skills.

'The girl is ignored, she doesn't read and write, which harms her future. She cannot participate in the society for anything, because she is uneducated and they feel bad about that. So she cannot defend herself at all' (Key informant, member of Somali CPEC).

'When a child has education even hunger does not become a big deal, because he knows he will have a good future and he can work and earn money. If he doesn't have education his life becomes a gamble, he can lose his life any time, and with education they will love their life' (Somali, female, 40 years).

In addition to limiting children's opportunities in the future, lack of education was said by respondents from both the Congolese and Somali communities to expose the children to various others risks and harms.

It can harm in so many different ways. They feel that do not get good care from their families, they think bad, they meet groups and they take decisions. Some look for job, while others think to steal and they learn drugs ... If they are boys they start working and it can harm them physically, and some of them become thieves and are sentenced to jail. Also girls may look for work, and as a result they have many problems, rape, child labour among others' (Somali, female, 40 years).

Risks to younger children: lack of supervision

One of the main factors contributing to the negative effects of being out of school was that many parents spent long hours each day trying to earn money, so children were left unsupervised at home. For younger children, this lack of supervision was said to result in them wandering around the area, putting them at risk of accidents, abuse and disease (as they played with dirty objects).

'The parent will try to look after this child, but the child has no occupation and the child continues getting into risks because you parent will not spend the day with that child. A child is not a goat, you can't leave him somewhere on a tree tied with a rope. You will leave the child at home and look for food for him or her. A child will go because he is not studying, has no occupation, then the child will leave and goes roaming around as he feels like' (Congolese, male, 40 years).

Risks to younger children: conflict with neighbours

There was also said to be a high risk of conflict with neighbours as younger children, bored at home, made noise, played with local Ugandan children, and disturbed others living in the locality.

'When the parents go to town to sell jewellery, this being the occupation of most parents here, the children stay at home making noise. The landlord does not feel happy of this. They [the children] start spoiling people's properties in the compound, cutting flowers if any. All that loses Ugandans respect to Congolese. Ugandans start saying: "Congolese are noisy, they misbehave" such things, because most refugee children do not go to school, they stay at home disturbing' (Congolese, male, 16 years).

Risks to older children

However, respondents felt that it was adolescents who were exposed to the most serious risks if they were unable to access education. A combination of lack of parental supervision and the poverty which led to them being unable to attend school was said to lead many adolescents to try to fend for themselves in ways which exposed them to further risks. Some said that the fact that parents had been unable to send the children to school created a lack of respect, and a feeling amongst some out-of-school adolescents that, since their parents had failed them, those parents had no right to try to control their activities.

'Psychologically a child will start thinking that maybe my parents do not like me at all, this is why I am lacking school, and this child will not know that parents lack also something to take him or her back to school, and he or she starts misbehave and follows bad pathways' (Congolese, male, 38 years).

Children's attempts to fend for themselves: child labour, sex work and theft

Once adolescents had decided that their parents were unable to take care of them, respondents said their efforts to take care of themselves through child labour, including sex work, and through criminal means, such as stealing, exposed them to considerable risks.

'When the child is not going school usually they become child labour, and always around everywhere and people use them as servant. They do things that they should not do because they are children. They cannot do heavy things, but people send them work, and the children

do the work because they need the money, even if it is small they need it' (Somali, female, 16 years).

These jobs were not seen as contributing to a child's future in the way that education would; they were unlikely to lead on to better things, and parents found it painful to see their children engaged in such work. Informal work, such as selling boxes, bottles or scrap, was said to be risky because the children could be accused of stealing these things, and beaten or arrested. More formal work, in restaurants and as house-helpers, came with its own risks, such as accidents and exploitation, where employers refused to pay the children who had worked for them. Girls working as house-helpers or in restaurants were also at risk of sexual assault. For Congolese girls more than Somali, sex work was said to be a common way of earning money.

'He can start carrying for people sacks of rice, sacks of beans and other things. He will not be thinking of working in the office. It is very difficult for a child who is not going to school to have direction in his life' (Congolese, female, 18 years).

'Some do prostitution if they are girls. Others go wandering around, and others do hawking "bitenges"⁴ around. They live a vagabond kind of life' (Congolese, male, 22 years).

Congolese boys were more likely to steal as a quick way of earning money.

'When a person is not going to school, he just stays at home, he can get other bad thoughts. He can think of stealing to get money to pay fees or he can think of other bad things. When a child is not studying he goes stealing, remember here in Kampala if they catch a thief, they beat him and if police are not near they can beat him to death' (Congolese, group discussion, male, 18-25 years).

For Somali children, both boys and girls, going abroad ('trafficking') was seen as an option if they had no possibility of going to school.

'Lack of education brings a lot of problems to the Somali children in this community. What they do most when they don't go school, is to think of going and travelling with other children who are going trafficking on the sea' (Somali, female, 15 years).

Risks for adolescent boys: 'Delinquency'

Idleness and lack of parental supervision resulted in some older children wandering around the area, in the same way as younger children did. It was difficult for parents to advise or control children, especially boys, of this age, especially when they were unable to provide for their basic needs.

'When a boy is not going to school he goes to join marijuana smoking groups, he starts going to night clubs. When a parent approaches him, he says, better he dies, that he cannot stay at home twenty four hours without doing anything, without studying. So the child becomes a bandit. We have many examples of such, some boys reach an extent of fighting their own mothers' (Congolese, group discussion, female, 25-40 years).

'Children who don't go to school are up and down, they are like street children' (Congolese, female, 13 years).

The most commonly-mentioned risks of this for older children were that they would meet other unoccupied young people, and adults, who would engage them in activities such as drug use, alcohol use, prostitution and other forms of 'delinquency'.

'They will just move around when they do not know what they are looking for, that's when you see a child leave from morning and no one asks him where is going and where he or she is coming from, and does not have hope that he or she may get lunch home. Where he is going,

⁴ Congolese cloth

he meets the hemp smoker group and started also smoking it. He gets also involved in the group of thief and he started also stealing. If this is a girl, she meets also a group of prostitute and she becomes also a member' (Congolese, male, 45 years).

There was a distinction made by many respondents between the risks adolescent boys and girls were exposed to, although there was some overlap between the two.

Both Congolese and Somali respondents said that out-of-school adolescent boys could not be kept at home, and in the process of wandering around their area, they were likely to meet other out-of-school youth who would engage them in harmful activities. These included drug and alcohol use, but also gambling, and criminal activities including theft and rape.

When children are not schooling or studying, he will be in touch with other friends, they will start taking alcohol or drugs, after that they will start fighting and they may get wounded ... Children are meeting bad groups of people who drink alcohol, smoking drugs which also is a risk to them, and can lead them to lose self-control and cause to them problems' (Congolese, group discussion, male, 35-57 years).

'Most of Congolese boys here are, I don't know how to say it...most of them are hooligans. They call them in Luganda "bayaye" ... we know them as "bavoyoux", which means hooligans; their work is to steal, to rape girls and so many bad things ... It's also under lack of education, if I can explain, because someone who is educated will not have that time to go and steal' (Congolese, group discussion, female, 15-20 years).

'When children don't get education, they are forced to become useless kids who loiter around, drink alcohol or they may befriend children who are bad and start going to gambling places. They also became street kids, they start using drugs' (Somali, group discussion, male, 18-25).

Risks for adolescent girls: early sexual activity

For girls, particularly in the Congolese community, many of the risks of being out of school related to early sex, exploitative sex and sex work. The three types of sexual activity were not clearly distinguished by respondents, who often used the terms interchangeably, and in some cases used the term 'rape' to refer to exploitative sex. The reasons out-of-school girls were said to engage in sexual activity were mainly idleness, interacting with other out-of-school youth, and a desire or need to earn some money. They did not necessarily exchange sex for money directly, but attached themselves to a man who was able to buy for them things they could not otherwise afford.

'Most of them don't go to school because of lack of paying fee from the parents, they move around looking for something to keep them busy and trying to survive. In that process, some girls go and do prostitution because they need money' (Congolese, female, 18 years).

Idleness itself at this age was said to be dangerous, since adolescents would engage in sexual activities more readily if they had no other occupation.

'This is the problem. They are just there, moving, moving around, visiting people around, they don't have any occupation. No school, no job and, you know, these are adolescents, 14, 15 years old. Children start to get spoiled, with undesirable pregnancies, early marriages ... You know, they are adolescents, you will find that young girls start following young boys because no occupation' (Congolese, female, 17 years).

A common consequence of this behaviour was said to be pregnancy, which brought more problems for the girl and her family, as they had to find money for medical costs, and to take care of another child.

Although the research team heard more about early sexual activity within the Congolese community, it was also mentioned by a few Somali respondents. However, more commonly in the

Somali community, respondents talked about marriages being arranged for out-of-school girls by their parents, although these were said to be rarely successful.

'When the girls are not going to school in our tradition, when the girls are the age of 15-17, the parents say 'what are you doing home? go and get married '... when the young girl get married there is no responsibility in that new couple because this young girl has no education and she is still young and she has no idea what marriage is , and she has not enough experience. That is why those young girls get divorced immediately, when she have one or two kids, and she becomes single mother with that age of 15 or 17' (Somali, female, 17 years).

Rape

Both younger and older girls who were out of school and unsupervised by their parents were said to be at increased risk of rape.

'The first risk is the fact of spending long at home without going to school or without being occupied on doing something, because some of these parents are looking for food and other things. So the children are left or forsaken on themselves. At that moment, the children are exposed to be raped.' (Congolese, male, 50 years)

'According to the refugee life here the father goes to look for work and the mother goes to sell jewellery. They leave children at home. The environment we are living in is not secure. A girl stays at home with older boys. Girls of 13 or 14 years who are growing the breasts are ... exposed to rape, they can send her for airtime when parents aren't there because she has already known the language and from there they rape her.' (Congolese, group discussion, male, 15-17 years)

Discrimination (Congolese and Somali)

'In this community the risks we as children face are many. Notably first you can't play with others, they discriminate you that you are Congolese, you are not Ugandans. When you go to school they discriminate you, saying that you are Congolese and you do not know the language, and you are isolated. The third, when you go fetch water you sometimes find Ugandan children older than us who pour your water down and tell us to re-fetch again. When you take a walk and if putting on sandals people will just tell you to put the sandals off just because they do not like you, whenever they discover that you are a Congolese they do bad things to you. About the game first, they tell you that you can't play with them, that you do not know their game, you are not the same, you are the beggar, that's what they tell us. For this issue of going to school, you can go to school and discriminate you, 'what should we talk about to you who do not know the language? And yourself you are a refugee, you fled from your country because of the war to beg from people in our country, and it's now us helping you', that's the issue we get at school. At the water well it's more challenging issues, you can go there fetching water and they beat you and you won't do anything because you do not know how to tell them or to tell other people to help you. They beat you by telling you that you are a refugee, you do not know anything, you've fled from your country to become a beggar here. The fourth is whenever you want to take a walk, people tells you that you're a refugee yet wearing nice clothes and shoes. They tell you to remove the shoes and go. We are being minimised really, that is not good the way we live here' (Congolese, male, 15 years).

There was a belief amongst many Congolese and Somali respondents, both young and adult, that the discrimination experienced in Kampala was one of the main harms for children.

'We know that we live with the citizens of this country and they do not like us, they have hatred, hatred towards our children' (Congolese, group discussion, male, 55-57).

Younger children

The main way younger children were harmed by discrimination was said to be through Ugandan children refusing to play with them, or Ugandan parents refusing to allow their children to play with refugee children. This was mentioned more commonly by Congolese respondents than by Somali, perhaps because Congolese refugees live in more mixed communities.

'When the parents see their children playing with these new children who moved in their area, they just call theirs, come from those ones. If there were ten children playing, every parent withdraws his and yours remains alone in there, whom then to play with? Nobody to play with' (Congolese, male, 17 years).

When refugee children did have opportunities to play with Ugandan children, respondents said that verbal abuse was common, and young children tended to be accused of causing any problems that occurred. This could lead to conflict between the parents. These problems also affected older children, so will be discussed separately.

The water tap was a common point of conflict, and younger children experienced discrimination there. Again, this mainly applied to Congolese children, rather than Somali. The research team heard that at times children were sent to fetch water but were abused by Ugandans at the tap, and not allowed to get their water. In some cases, they got water but it was taken from them and poured away. We have no way of knowing whether this also happens to Ugandan children, but the perception of many of the Congolese respondents was that the abuse took place because they were refugees.

'When you send your child to go and fetch water, they push him there and say 'go away, let me first fetch' because they are nationals. The child also not feel happy, he would wish to respond. When he responds, they start beating him. The child comes home without water and crying 'they pushed and chased me away because they wanted to fetch, I never wanted'. You as a parent you just tell him 'sit down and cool down, let them fetch and after they have fetched then you can then fetch'' (Congolese, group discussion, female, 45-60 years).

Accusations

Congolese respondents very commonly said that whenever a problem occurred in their neighbourhood, or there was a fight between children, a Congolese refugee child would be accused of having caused the problem.

'Congolese are being taken like disordered people, people who are being called people who lie, people are being called thieves, everything bad is being assigned to Congolese. If a toilet gets dirty, it's Congolese who is responsible, throwing dirtiness in the canals, it's Congolese who are responsible, even if children fight from anywhere it's always Congolese children responsible of all that, the Congolese child will be guilty when it was not his or her fault' (Congolese, group discussion, female, 45-60).

The research team was also told of more serious cases, where Congolese children were accused of stealing or other criminal acts, despite a lack of evidence.

Verbal abuse, physical abuse and threats

Verbal abuse (including threats) and physical abuse were the manifestations of discrimination that were mentioned most commonly. They affected Congolese and Somali refugees equally. It is difficult to distinguish between verbal abuse, physical abuse and threats, because they frequently occurred in the same incident, so all will be discussed together.

For Congolese refugees, the verbal abuse tended to be related to their nationality, and saying that they were unwelcome in Uganda. In extreme cases, this took the form of threats that when President Museveni is no longer around, the Congolese would not be tolerated in Uganda.

'Our children face discrimination from the host communities and they verbally insult them when they go to fetch water. They usually tell them that they should go back to their countries since Ugandans are tired of them. This has kept our children in constant fear and they believe at any time someone wants to hurt them because of their nationality and the fact they are refugees' (Key informant, Congolese CPEC member).

'When we are walking on the way and speaking our language, Ugandans start abusing us, 'you, Muzaire, wait you will see what will happen to you after Museveni leaves power. We will kill all of you' ... Children are even afraid of coming out of the house. We run away from war, we came here and we fight another war' (Congolese, female, 30 years).

For Somali children, the vast majority of verbal abuse related to Al-Shabaab, and accusations that a Somali child belonged to Al-Shabaab.

'One of the things that affects children is when they are walking in the streets, they're told Al-Shabaab. This makes them feel unhappy and they wish they could go back to their country' (Somali, group discussion, male, 12-17).

'When the child is working anything can happen to him ... they are working for Ugandans, they torture him and saying 'do the work, you are Al-Shabaab, stupid Somalis' ... sometimes those people they are working for refuse to give the small money they earn for day work, and tell the child 'go back Mogadishu, you Al-Shabaab' ... they are the local people, where the child thinks he can work and get something, but a lot of harms happened the child from that work. They call them 'Al-Shabaab', and 'go back to your country, you refugees'' (Somali, female, 50 years).

Adolescent girls experienced additional harassment related to wearing the hijab, and beliefs about the female genital cutting practised by Somalis.

'Not only insulting, they even can beat you up and try to move your clothes like hijab and saying you are Al-Shabaab' (Somali, female, 16 years).

'Young or adult, they said Somalis girls are FGM, they don't have feeling. They are like meat. They show you a meat, say that their thing is like meat. Even they abuse them, saying you are Al-Shabaab, and Al-Shabaab is what we fled from our country' (Somali, female, 16 years).

On occasions, verbal abuse became physical abuse, for both Congolese and Somali children.

'Our children are beaten ... Ugandans beat them up. They always tell them that here is not their place, that they don't have to play around as if they are in their country' (Congolese, female, 46 years).

'We cannot send girls to shop or the market, especially the age of 12-14, they come back home when they are crying or sometimes beaten up ... Boys are bothering them and even insulting them, they called the girls Al-Shabaab, and the girls sometimes fight back and things go bad' (Somali, female, 35 years).

Discrimination at School

Most of the forms of discrimination discussed above were said to happen in the school context, and to be a significant source of distress for Congolese and Somali students. Verbal abuse was common, although physical abuse less so.

However, there were specific types of discrimination which were said to occur particularly in schools. Some respondents gave accounts of teachers who were prejudiced against refugees, and who allowed their prejudice to influence the way they treated the students in the classroom.

'When I was in my class S6, and the teacher entered the class, he asked me 'who are you?' Then I told him am Somali, and he said 'oh, I have never seen a Somali girl in senior six, why are you wasting your time and your money? You are going to get married tomorrow and there is

no benefit with this education, or you will go back your country which is not peaceful'. And even other teachers in my class tell Ugandan students that they [must] learn well, because [otherwise] foreign people will take your places, foreign people are becoming many in Uganda and tomorrow you will see they will take everywhere and start working your country and you, you will work in farms. At this point, as children, you feel discouraged, the teachers don't love you, and sometimes you say to yourself 'I wish I was in my country' (Somali, female, 16 years).

The research team heard from both Somali and Congolese students that teachers did not attend equally to refugee and Ugandan children, and that they disciplined them differently.

'It is impossible that a Ugandan teacher will care about Congolese while Ugandans are there, it will be very difficult to care about refugees rather than caring about his or her fellow Ugandans, who will one day help him or her in life' (Congolese, male, 16 years).

'In schools still children are beaten when they do wrong and it's common in every school. This applies to Ugandan and refugee children both but for the refugee children in addition to beating they are told some words, 'you are Somali, you destroyed your country' (Key informant, Somali CPEC chairman).

Some key informants noted that teachers do not always understand the behaviour of refugee children, both due to cultural differences and the behavioural changes of some refugee children who have lived through distressing experiences. For example, Somali children were sometimes said to be perceived as particularly aggressive, which may be partly because of the children's experiences of war, and partly because of a way of interacting which is acceptable in the Somali culture but which is perceived as aggressive in the Ugandan culture. These misunderstandings can contribute to teachers perceiving refugee children negatively.

'When a teacher does not understand a refugee child he may see the child as very stubborn and chase him from school. Some refugee children have got problems, psychological problems or their mental state isn't good due to the war areas they came from. So they are told to leave our school, go away or don't come back to us. No one asks about the background of the child, his experience or whether he is from a safe environment or not. How is his psychological state, does he need counselling, what can be done about him, does he need advice? No one pays attention to these factors' (Key informant, Somali CPEC chairman).

Some respondents felt that the achievements of refugee children were not recognised or encouraged, and in some cases were even minimised. There was a belief amongst some that teachers were unwilling to allow non-Ugandans to hold the top positions in the class.

'When they had exams they separated Congolese students from Ugandans and they gave them different questions. And Ugandans got first divisions, yet there is a Congolese child who has always been number one. The discrimination level has gone high. They know that Congolese children get good marks, they do not like them' (Congolese, group discussion, male, 15-20 years).

'They discriminate, and even if the child is clever they don't feel that they get their marks. And if they perform well, they do not encourage them. You know, children always need encouragement' (Somali, female, 40 years).

For Somalis, their culture was not always respected, and students were not permitted to pray, or girls were asked to remove the hijab.

'I faced a lot of problems [at school]. Even when I was praying, when it was the time I'm supposed to pray, they used to refuse me to go out and pray, and even they told me to remove my hijab. And I did because I had no choice and I was young and I love studying, and if I refuse I can lose all my admission of student' (Somali, female, 16 years).

Differences between Congolese and Somali refugees' experiences of discrimination

Although discrimination was highlighted as a significant child protection risk by both Congolese and Somali respondents, the nature of the discrimination was somewhat different. In schools, both groups reported similar experiences of verbal abuse and being neglected by teachers. However, Congolese respondents talked about the discrimination they faced in their home areas, with rubbish being thrown into their compounds; conflicts at the water tap; neighbours refusing to allow their children to play with refugee children; Congolese children being accused of causing problems, and so on. The Somali respondents' experience seemed to be more in relation to verbal abuse outside the immediate neighbourhood, particularly abuse related to Al-Shabaab.

Rape (Congolese)

Rape was identified as a significant issue affecting Congolese refugees. However, it should be acknowledged that various issues related to sexual activity (of girls) were concerns for Congolese respondents, including prostitution, early sex, exploitative sex, as well as rape, and the distinction between them was not always clear. This is illustrated by the following quotation:

'They rape them, sometime you fail to pay the school fees for them, and they stay home and someone will come and try to lie to them that he will pay for their school fees and provide for their needs, and seeing that she has no way of going to school or getting what she wants, and the parents can't provide, she happens to accept' (Congolese, group discussion, female, 25-55).

Although the respondent labels this type of incident 'rape', the description sounds more like sexual exploitation. It is important to bear in mind these fuzzy boundaries.

In general, rape was a risk associated solely with girls. Some respondents acknowledged that boys were also raped, but, again, this was sometimes described more in terms of sexual exploitation.

'[Boys are raped by] their fellow men and also women. There are those who are raped by the men and there are those who are raped by the ladies. Here in Uganda, there are called 'Sugar Mammies', you find an old lady paying a boy and tell him, 'you see, let us do this, I will pay you some money'' (Congolese, male, 17 years)

However, rape was primarily associated with girls, and was seen as a risk that all girls were potentially exposed to.

'Really a boy will not be raped. Boy children always grow within the community with other people, unless they have their behaviour which can push them to get punished. At least for boys they don't have too much risk compare to the girls. The girls are the risks bearers, anybody can rape' (Key informant, Ugandan doctor working with refugees).

There was no consensus regarding the common ages at which girls were raped. It was acknowledged that girls were at risk of rape from a very young age, around 4-5 years. There was a feeling amongst some respondent that the risks increased once a girl reached around 12-13 years.

Circumstances in which rape occurs

The research team heard many examples of different situations in which Congolese refugee girls were raped in Kampala. A key informant explained that Congolese refugees tended to live in areas of the city where rents were low, and these areas also had high levels of congestion and crime. As a result, girls were at risk of rape when sent on errands in the neighbourhood, fetching water, looking for wild food or even walking to school. The risks increased when girls were out in the neighbourhood after dark.

'Recently there is a girl who got a job of hair dressing in a saloon. As she was coming from the saloon she met with three men. The men grabbed her by force, she shouted, and then people came for help. Those men ran away. People met her down, then she got the grace of leaving. Had those people not come, they would have raped her forcefully. It was just in the neighbourhood here' (Key informant, Senior Pastor in Congolese church).

Out-of-school children who needed to work in order to contribute to the family income were particularly at risk of rape. Employers sometimes raped children, or 'gave' children to customers.

'There are those bosses who give the girls to the customers. They say, 'this Congolese, she is very nice'. They talk aside, exchange money. Evening time after work they take you. You wonder what is happening; you get raped in such a way' (Congolese, male, 16 years).

'Young girls looking for income to survive by engaging in work as house maids are exposed to sexual encounters by the household head or other male residents, who would persuade or forcefully have sex' (Congolese)

Girls who hawked jewellery or 'bitenge' cloth were very vulnerable, since they could easily be called to go somewhere with a man on the pretence that he wanted to buy something from her.

'The parent gets some little capital and gives to her daughters to go selling some jewellery around. Where she goes hawking Ugandans call her, she thinks that they are good customers. Instead of buying they attack her, rape her by force and grab the money from her' (Key informant, pregnancy and counselling service).

Perceived causes of rape

Being out of school and having no occupation during the day, combined with lack of supervision as parents are out trying to earn money, was said to expose girls to rape. They were vulnerable at home since did not have the protection of their parents, and when they went out wandering around the area, this also makes them easily targeted by men in the locality.

'When a child is not studying she goes roaming in the compound, she does not know what to do. It happens that they get raped. When she is there roaming, a man gets her and rapes her. I have brought that because there is a woman who left her daughter of 10 year old at home, and she went for selling in town. When children were playing, there came a drunkard man who grabbed that one girl, took her in an unfinished house and attempted to rape her. Good enough there were some ladies in the neighbourhood who came to help when he had already put her down and was already undressing her. They took the man to the LC1, he was almost arrested. All that happened because of lack of going to school, if the child was at school, that could not happen to her' (Congolese, group discussion, female, 45-60 years).

The cause of this lack of supervision, and being out of school, was poverty; parents left the children at home alone because they needed to go out and look for money to feed the family. Poverty was also said to be a more direct cause of rape, in that girls from poor families could easily be lured to meet a man with a promise that he would pay school fees, or he would give them a present. On occasions, once the girl went to meet the man (or boy), he would rape her.

'Sometimes they spend like two days without eating, when a boy meets her on the road he will be like 'give me your phone number'. The girl will not know why she will just give the phone number. When it comes to night he calls her 'come, I am in this place, come I give you money'. Given the life they are living, she slept hungry: she will be like 'let me go there at his place'. When she reaches there, sometimes she is raped by force. She had not known that that is what she was called for' (Congolese, group discussion, male, 25-45).

One of the effects of poverty was that Congolese refugees slept in overcrowded conditions, often with parents and children in a single room. This exposure was said to contribute to rape within families. Respondents also talked about unaccompanied children sleeping in the church, boys and girls together, and on occasions girls would be raped in this setting.

'We may have many children, boys and girls and we are forced to make them sleep on the same one bed. That girl may be 12 years old and the boy may be 14 years old. When the girl sleeps naked, the boy can wake up and rape her. All this is because of lack of shelter. We do not have the means to get bigger houses' (Congolese, group discussion, female, 25-40).

School-going girls were also said to be at risk of rape on their journey to and from school, but less so than out-of-school girls because they spent less time unsupervised or in public places.

Perpetrators

There were mixed opinions amongst our respondents about who was responsible for the high level of rape of Congolese girls. Some believed that both Congolese and Ugandan men were responsible; others said that it was primarily Ugandan, and that for these men, rape was an extension of the verbal and physical abuse directed at Congolese refugees, already discussed.

'According to what I have heard, it is not our brothers, Congolese refugees, but the natives are the ones who want to ruin and spoil the lives of refugees ... because we are not in our country so they don't want us to live here in their country. That is the reason why they want to spoil our lives' (Congolese, female, 16 years).

A key informant working with a youth pregnancy service said that family members and family friends were also perpetrators of rape. Few respondents referred to this, but this is likely to be a subject that is not commonly discussed, and not easily shared with a researcher. The key informant said that when girls were left alone with fathers, brothers or cousins they were sometimes raped. Children living with foster families were said to be particularly vulnerable. She also said that some of the girls accessing the youth pregnancy service reported that frequent and trusted visitors to the family home, including priests and pastors, were also responsible for rape.

'Sexual abuse of girls often occurs within a foster family. The boys of the family abuse her, impregnate her, and she has no support. These things happen a lot, especially in urban areas' (Key informant, Refugee-assisting organisation).

Respondents talked more commonly about neighbours, people living in the same locality as the child, who may be trusted to some extent. Neighbours may ask a child to run a certain errand for them, or offer them a sweet or a soda, and on this pretext would bring the child into his home, where he would rape her.

'I've a friend of mine who has a daughter of 14 years, a Ugandan neighbour used to send her to buy doughnut for him and managed to have sex with her' (Congolese, female, 38 years).

Teachers were also said to be perpetrators of rape on occasions.

'There are also risks of rape, children are being raped even at school. Sometimes you hear that a teacher has raped a child, or a big person has raped a child' (Congolese, male, 22 years).

Effects of rape

The most significant, and life-changing, effects of rape were said to be pregnancy and infection with diseases. If a girl became pregnant as a result of rape, the impact on her life, and that of her family, was said to be magnified several times. Even if she did not become pregnant or infected, however, the emotional effects of rape were recognised by respondents, as were the social effects for the girl if her experience became known.

'First she will be traumatised especially if the girl was a virgin. The first time she is doing sex is through rape by force. Also that person could be having HIV/AIDS, she can contract it too. Also she can become pregnant and also stop going to school. Also most of the time they feel embarrassed. They avoid going out. They feel embarrassed when they are with friends even parents will be embarrassed' (Congolese, female, 18 years).

Perhaps for these reasons, respondents said that girls who were raped often tried to hide what had happened to them, and it only became known when it emerged that she was pregnant, or she became sick. Shame, and the fear of her parents' reactions, were significant barriers to girls reporting rape.

'The child gets ashamed. If she talks about it, others will be laughing at her. The children are being raped and keep quiet. I have seen such five cases where by the child suffers from stomach pain, then later she tells what had happened: "they made it by force" (Congolese, male, 38 years).

'These children always take long to inform their parents that they are pregnant and some drop out of school and also run away from home for fear of being blamed by their parents' (Key informant, Congolese CPEC member).

Overcrowded and Inadequate Housing (Congolese)

An issue raised by many Congolese respondents, primarily adults, was the harm done to children by staying in overcrowded single rooms with their parents and siblings. This was the case for many Congolese in Kampala, who had little income and could not afford to rent more than one room for the family.

One consequence of this was that if there was not enough room for all the children, or if the landlord refused to allow more than a certain number of children to stay in the room with the parents, then other children were accommodated with neighbours and friends. This exposed the children who were living apart from their parents to the risk of neglect and abuse.

'When you want to shift and you have four children, the landlord will tell you to only have two for example, and you will have to distribute the children to friends and relatives, and you start to bring one by one' (Congolese, group discussion, female, 25-55 years).

However, the greatest risk associated with overcrowding was said to be that children are exposed to things that are unsuitable for them, or which would have been private in their home country.

'Children of 11 years old and below, the first harm I've so far noticed is the lack of enough accommodation, in these small houses where we live with our children, surely their moral education is getting spoiled. Children are discovering things which are not appropriate to their age ... for example a child is not supposed to watch her mother putting on clothes, sometimes her mother can be putting on clothes and suddenly the child comes in and sees the nudity of her mother, of her father or even of his or her grandparents' (Congolese, female, 55 years).

In particular, in a single room there was a strong possibility that children might hear or see the sexual activity of their parents, even when the parents' bed was separated from the children by a curtain. This could bring fear and confusion amongst younger children, and there was a strong concern expressed by respondents that it could lead to early sexual activity.

'The father with the mother are here and the children are here, in between there is a curtain ... boys and girls, sleep this side and the parents sleep the other side. There is no way an ear can be closed, you can close the eyes but cannot close the ears. When you husband requests 'turn my side, please turn my side', the child also will hear, and will wonder 'what are they doing there?'" (Congolese, group discussion, female, 45-60 years).

There was a fear that young children could copy with others what they thought their parents were doing at night. This distressed parents considerably. Amongst older children, who were sexually aware, there was a belief that overhearing their parents' sexual activity could awaken sexual feelings in the adolescents, who then acted on these feelings.

'One day my friend made a mistake, she was making love with the husband at night when a boy of three years was seeing and they did not know, and the following day at nursery the boy went to practice it with a young girl of the same age, and after asking him, he said that he saw his parents doing it' (Congolese, group discussion, female, 25-55 years).

'Parents and children living in one single room house causes them to grow up in bad condition in which he or she will learn very quickly how to do love, children are getting involved in sexual wandering' (Congolese, male, 45 years).

Respondents also expressed a concern that children who saw their parents undressed, and overheard their sexual activity, would lose respect for their parents. This made it difficult to guide them as they got older, and made it more likely that adolescents would become involved in harmful behaviours.

'Some parents sleep in the same room with children who are already grown up and this can affect children's mind. Young girls age 17 years old or 18 years old sleeping in the same room with the parents can be affected. They will be listening to the problems between parents, it can affect them ... That child who is sleeping in the same room with the parents, will not respect her mother again. Because she will be listening to everything between them' (Congolese, group discussion, female, 25-55).

Some adolescents were said to leave home because of the overcrowding, in some cases establishing sexual relationships in order to be able to leave the parental home. This decision came with its own risks for the children involved.

'You will see a 17 year old boy staying in a small house with his parents, brothers and sisters. They are really squeezed in the house. At night when they are sleeping the boy will be uncomfortable to be squeezed with his sisters in the same bed, so the boy of 17 years can prefer leaving the parents house and go and stay with this 40 or 50 year old woman, as long he can get something to eat and where to sleep somewhere comfortable. Girls also because of this situation are leaving the parents' house and go and stay with a Ugandan, even though he is a bandit. She will do it because of difficulties' (Congolese, female, 32 years).

Drug Abuse (Somali)

Somali respondents were very concerned about children in their community getting involved in drug use, particularly chewing khat.

'One of the harms is to use drugs like khat and cigarette in corners. When I leave school in the evening I see children sitting around chewing khat' (Somali, group discussion, male, 12-17).

This mainly affected adolescent boys, although some respondents said that girls were sometimes involved as well.

Causes of drug use

Drug use seemed, for many respondents, to be an indication of a more general delinquency, where young people were no longer under the control of their parents, and became involved in various negative behaviours. The perceived causes were generally related to poverty, particularly parents' inability to send a child to school. When a child was out of school, they were said to be exposed to many risks, through befriending other out-of-school youth, working, and through having no occupation.

'When children don't get education, they are forced to become useless kids who loiter around, drink alcohol or they may befriend children who are bad and start going to gambling places. They also became street kids, they start using drugs' (Somali, group discussion, male, 18-25 years).

Children without parents, who were staying with relatives, were seen to be particularly vulnerable to this risk, as well as children of very poor parents who were unable to meet their children's needs.

'The children of Somali communities, some of them use the drugs, those who are not going to school or their parents are not around. And when you go to Kinsenyi you can see young

children who are eating khat because maybe their family are poor or dead' (Somali, group discussion, female, 18-50 years).

Parents who were unable or unwilling to control their children were held primarily responsible for drug use amongst young people. Once children were out of the house and spending their time in public places, respondents said that they were exposed to others using drugs, both adults and young people, and became involved out of curiosity and a desire to imitate these people.

Two respondents said that some children used drugs as a form of self-medication, to cope with their distressing experiences both in Somalia and in Uganda.

'There was a friend of mine in the village who learned to sniff glue in Somalia. These boys when they come here they started using more drugs. Another cause is that some boys here killed people back in Somalia. When they come to the refugee camp in Uganda the spirits haunt them; they use whatever they want' (Somali, male, 16 years).

Effects of drug use

Drug use was seen as a cluster of harmful behaviours, which could involve criminal behaviour.

'There are some children who do not learn, who are on the streets and don't care or get involved in drugs. So the conditions force them to steal or become thieves ... these children, the parent do not give anything, so they steal after chewing khat' (Somali, group discussion, male, 13-17 years).

Children who were attending school may drop out after becoming involved in drugs, or parents may force the child to leave the home. Both consequences significantly increased the child's risk of encountering further harms.

'What happens is when a child is using drugs the father may tell him to stop and the boy says, 'no, I cannot stop'. Then the father can ask 'why can't you stop? This is a learned habit. If you will not stop, you'll move out of my house'. There are such cases of children who are chased by their parents, telling them 'leave me alone, we don't belong together'. And if the child hits the road, he'll deteriorate ... He will sleep on the streets. He may become thief and become worse drug abuser' (Somali, group discussion, male, 13-17 years).

Child Trafficking (Somali)

Only Somali respondents talked about trafficking as a risk for children in their community; it was not mentioned at all by Congolese respondents. The research team was told that it was common for teenage children, aged around 13 and above, both boys and girls, to pay traffickers to take them abroad. The ultimate plan was to reach Europe, but the route they took was said to be through Sudan and Libya, then onto Europe.

The children collected money to pay to the traffickers, and, in some cases, parents themselves provided the money to enable their children to go because they believed they would have more opportunities abroad.

'Parents may be back in Somalia while the girl is staying with an Aunt or Uncle. Then the parents contact the girl who is in school, telling her that since she has become old enough they would bless her and send her money to leave that place and enter Europe from where possible' (Somali, male, 28 years).

'Some mothers give the children the transport money, they are going to travel on the sea, and say to child 'dead or alive'' (Somali, female, 17 years).

Cause of trafficking

In all cases, the reason children attempted to travel abroad was because they believed they would have a better life than was possible for them in Kampala. The typical child who paid traffickers to take him or her abroad was said to be a child who lacked support in Kampala, either because they were living without their parents, or because their parents were very poor.

'Somali children in this community travel a lot to the sea and are facing a lot of risks and harms over there ... they travel on the sea because some of the Somali children here don't have their parents and they lack money, so other children tell him or her 'let's go and look for better life than we have now', that is why they are going' (Somali, group discussion, female, 13-17 years).

Children living without their parents were sometimes mistreated, overworked, and saw going overseas as a better option, despite the risks involved. Being out of school was said to be a key factor in children's decisions to try to travel to Europe. Without education, they felt they had no opportunities, so their only option was to try to establish themselves in a country where they would have opportunities. Travelling overseas was, for some, a last resort. When children felt they had exhausted all other options, then trafficking was something they would consider.

'Child trafficking is one of the biggest harms which happens to Somali refugee children in Kampala. Because when the child's life is miserable and he lives a poor life, and they don't get any help from NGOs of refugees, they try to look for a better life and they go for travel on the sea and put themselves in danger and a lot of harm' (Somali, female, 16 years).

Effects

Respondents expressed strongly the dangers involved in children trying to travel overseas with traffickers. The research team heard several times that 'most of these children die' on the way, and others were jailed.

'Some died in the process, others entered their destination countries, others jailed in prisons up to now and other not known their whereabouts up to date. So I think child trafficking is a serious problem affecting our Somali youth and children' (Somali, group discussion, male, 18-25 years).

They could die due to an accident at sea (e.g. the boat capsizing) or through the boat losing its way and those aboard dying of hunger. They could be arrested by police in one of the countries *en route*, as illegal immigrants. For girls, there was an additional risk of rape on the way, which respondents said was common as the girls had nobody to protect them. Some girls were forcibly married by traffickers.

'In child trafficking girls are raped by strangers, because they are in long trip from Kampala to Italy and she doesn't have anyone who can defend her. She is alone any man can rape her' (Somali, female, 20 years).

4. RESPONSE PATHWAYS

Group discussions, primarily, but also in-depth interviews, were used to explore the common responses to the main harms experienced by children. In this section, we will describe the pathways identified for the three priority harms:

1. Lack of education
2. Discrimination
3. Rape

During in-depth interviews, the research team also explored the ways in which parents and communities tried to prevent these harms occurring to their children.

Responses To Children Being Out Of School

PREVENTIVE FACTORS

Since the primary cause of children being out of school was financial, the main way of preventing this harm was said to be the parents working to earn money to pay the school costs. It should be noted, however, that this strategy was said to expose children to further risks, as they were left unsupervised at home while their parents were out trying to earn some income.

'The mother sells clothes or shopping to people, specially she goes house to house and gives people as loan, then she comes the end of the month and get the money from those people ... others sell tea, that is how they manage to [send the children to school]' (Somali, female, 17 years).

The schools themselves were also said to try to prevent children missing out on education. Some schools were flexible regarding fees, and either charged lower fees to refugees, or allowed them to pay in instalments.

'School fees have been reduced by 10,000 Ugandan shillings for refugees. Even payment is instalments. From day one, we feed them lunch and at 10am give tea for the young ones. We feed all school children whether paid or not they have paid fees' (Key informant, head teacher).

'You can be at school without paying fees once your parent has come and explained to them he is bringing money on such a date. They always give us time, those days that the parent requested. If the parents have not requested then they can send you home, but they always cooperate in a way that children can stay at school for a given period' (Congolese, male, 18 years).

When a child missed school, teachers often followed up with the parents, in an attempt to prevent that child from dropping out of school completely.

'We have a register for children and when the child doesn't come to school, the teacher asks other children, such as a neighbour of the child, why that child has not come to the school. If it is a refugee child, we call the chairperson to call the parents' (Key informant, teacher).

RESPONSE PATHWAYS

When a child was out of school and wanted to return, respondents said that they usually approached their mother, since she spent more time with them than the father. The mother would then consult with the father, except where the parents are separated or the husband has died. In most cases, of course, the parents were already concerned about the child being out of school.

The first option, for both Congolese and Somali parents, was to try to earn money to pay the costs of sending the child to school. In most cases, the only options available were small-scale business (e.g. selling food, hawking jewellery or cloth) or casual labour (e.g. on construction sites), which provided

unreliable income and did not pay well. In some cases, Congolese mothers were said to engage in prostitution to pay school fees. As already mentioned, when children were left at home while parents are out for long hours earning money, they were exposed to a variety of risks.

'Mother thinks first how can she send school for child, whether she works, or she look for help for other people, but first the mother try to work, and look for any work like washing clothes, selling tomatoes etc' (Somali, group discussion, female, 18-25 years).

'The papas go hawking necklaces and bitenges in town. They are given the bitenge on credit so as they can go selling and later pay back. If they get some profit on top, that is what they bring and help us pay school fees' (Congolese, male, 17 years).

Through these income-generating activities, it was sometimes possible for parents to raise enough money to pay the costs of one child returning to school, although in many cases they struggled to achieve even this. Most parents had many children, and sending just one child to school created conflict in the family and a feeling of resentment towards the parents from the children who remain at home.

'Parents are very poor and you may find parents who have not been able to pay the rent for the last three months. They don't have time to listen to school fees matters. When children ask them about it they tell them that they are even not able to pay for rent' (Congolese, female, 14 years).

'It becomes a real challenge when you have four kids and you only manage to get the money to support one child. At that time if you go ahead and pay for that one child the other will complain that you don't love them because they are eager to study too but because you can't manage to send all of them to school that creates conflict between the children and in the house' (Congolese, group discussion, female, 28-45 years).

When parents were not able to earn enough to send their children to school, there were a number of options they explored.

Often, they approached neighbours, friends and relatives to explain their problem. For children living without their parents, this was usually the first option they tried. Although requesting help from friends and relatives happened in both Congolese and Somali communities, it was mentioned more often by Somali respondents. Somalis sometimes received remittances from relatives abroad, which helped to send children to school, or they might be helped by relatives in Kampala who receive money from abroad. The research team also heard this from one Congolese respondent, but it was not common. It was more common for friends and relatives to assist Congolese children directly, if they were working.

'Let me talk of friends, because we ran away and we don't have relatives here. The longer you stay with friends the more you become like relatives. You can tell him your problem of education to the children and if he is working he can take a responsibility for one child' (Congolese, group discussion, male, 16-29 years).

'Mostly the parents are refugee and poor but since they see the importance of what the child is demanding they go to relatives and tell their problem. The relatives who receive help from families abroad provide assistance to the parent' (Somali, group discussion, male, 18-25 years).

Several Somali respondents said that although relatives and clan members might assist on one occasion, it would not happen a second time; in fact there would be shame in asking for help twice. Where friends or relatives were unable to assist directly, they might give advice about organisations the parents could contact, or schools which offer reduced fees for refugees.

'Communities do not do that much to help others, because they might not be able to help. All communities are refugees and don't have power or money to provide help and if this happens, it is happens once it doesn't happen every day' (Somali, group discussion, female, 18-50 years).

'The Somali people who are here in Kampala, all of them are refugees and if someone helps you once they cannot help you again, because they are like you, so people don't help each other that much. There is community, but they cannot be able to pay fees either, all the people are in need in this community' (Somali, female, 27 years).

An alternative to approaching friends and relatives was approaching a community organisation or association. These were often faith-based. Again, children without parents might approach these directly. The Somali respondents spoken to said that any help their community offered to send children back to school was mainly family-based or clan-based, and that in general people were very busy with their own activities and did not organise to assist others in the community. However, a key informant (head teacher of a primary school) said that refugee children were supported by Somali associations and Tawhid Mosque (a very large mosque in Kisenyi) to access education.

More community-based organisations and associations existed in the Congolese community, the majority centred around the churches. The Congolese churches were very active in organising their members and providing assistance, where possible, to those in need. It was pointed out, however, that these churches were also made up of refugees, and all were struggling financially, so the assistance they were able to offer was limited.

'The community is also made of refugees. What can a refugee help a fellow refugee? He is crying of his needs, how can he come to your help? Even if he helps one day, he cannot help you for a month' (Congolese, male, 17 years).

'For our [church] association, we don't have money in order to support them but they try to encourage the parents' (Congolese, male, 17 years).

Despite these challenges, the research team heard that Congolese churches were very active in seeking ways to assist children to go back to school, sometimes through finding sponsors, sometimes by organising contributions, or by the pastor helping directly with school costs, even if just for one term.

'It happens sometime that a pastor tells you that 'take back the children to school, I am going to pay for this term', and maybe for the next term you may find when the necklaces have also maybe got sold and you've saved some money, and you also pay alone the second term' (Congolese, group discussion, female, 24-55 years).

'The only person I know who is trying to assist children is Mr [name] the pastor. He is the one who always look for sponsorship for children' (Congolese, male, 20 years).

'Sometimes the community ask people to give contributions in order to help children who are not going in school where they don't charge a lot of money' (Congolese, female, 14 years).

A pastor in a Congolese church community told us that their church had a sponsorship programme to help with school fees; another said they called for contributions in the church when they had particularly needy cases, which they did not use to pay the children's school fees, but they gave to the mother so she could start a small business. However, other pastors said that the money they were able to raise was enough to help widows and orphans with the costs of food and rent, but not enough to pay school fees.

Although the Congolese church organisations were very active, and used the resources available to assist community members in need, the fact was that their resources were very limited and they were only able to provide minimal help in terms of taking children back to school. Community savings and loans groups in the Congolese community helped to raise money for women to start businesses, but these commonly did not provide enough money to pay school fees.

A small number of Congolese respondents said that some Ugandan church organisations sponsored refugee children through school, and that those who were aware of these organisations might be assisted.

'There are also some organisations that help, especially Ugandan Church associations do help find private sponsorship for children. If one is lucky, one can get a sponsor who can pay for him school fees' (Congolese, male, 16 years).

The most common response the team heard about, other than parents trying to find work to pay for schools, was parents approaching InterAid Uganda for assistance. Respondents mentioned other organisations as well (UNHCR, Jesuit Refugee Service, Refugee Law Project), but InterAid Uganda was the most common when people were looking for help with school fees.

The person the refugee parents engaged with at InterAid Uganda was 'the counsellor'. The experience or belief of the vast majority of refugees spoken to was that the counsellor would tell them to wait and that they will let them know, but they never hear from the counsellor again.

'You can go there, they tell you to come back the next day, the next day when you go back they tell you to come back again, and days go by, at the end of it all they will never assist you' (Congolese, group discussion, male, 13-17 years).

Most said they believed that part of the role of InterAid Uganda was to provide help for refugee children to access education, but they did not see the evidence of that.

'At the assembly in the morning⁵ they say that they pay school fees for some children but we have never seen children being taken to school even those who are lame. For us who have taken children there, they are never assisted then they are sent back. We wonder whether they have special people they assist or not' (Congolese, group discussion, male, 16-20 years).

Those who received a response from a counsellor said they were usually told that parents must take responsibility for their children in terms of education, so should either find work or go to the settlements with their families. Those who said that InterAid Uganda did sometimes offer assistance complained that they only offered partial assistance, and that parents had to contribute the rest; and that InterAid Uganda would only assist one or two children, and parents had to pay the costs of the others themselves. The help offered by InterAid Uganda was also said to be temporary, and would not enable children to complete their schooling. InterAid Uganda was said to help the majority by providing a list of government schools which were part of the UPE programme. However, some schools were very far from where the refugees stayed, and parents did not feel comfortable sending their children there.

'When you look at the age of the children and the distance where that school is, you cannot send a child of 10 year old there lest he faces risks on the road' (Congolese, male, 45 years).

The research team heard differing views from respondents about the assistance offered by InterAid Uganda in terms of access to education. As already stated, the majority felt that InterAid Uganda did not assist, they just gave advice, and that advice did not help parents to take their children to school. Others said that InterAid Uganda did assist, in a limited way, especially children without parents. Some said that if refugees followed the correct procedures, InterAid Uganda did assist with school costs. It was clear that refugees did not understand InterAid Uganda's decision-making procedure; they seemed to see it as 'luck' that determined whether someone is assisted or not.

'It depends on luck. I may say that they help and they don't help, some people are assisted others are not. They can assist you and take you to school' (Congolese, group discussion, female 18-55).

Some refugees said they did not approach InterAid Uganda at all in relation to access to education, because they heard from others that nobody received any help with school fees there. The rumours and confusion within the refugee community resulted in some who may have met the criteria not

⁵ Each morning, a member of InterAid Uganda staff gives a general address to the refugees who have come that day. During this address they pass on information, raise awareness or address current issues of concern.

accessing InterAid Uganda's services.

Once parents discussed their situation with an InterAid Uganda counsellor, and had received advice, some approached schools directly and tried to discuss with the head-teacher or other school authority. There seemed to be a great deal of variation between schools in how they responded to this type of approach. Most people said that schools were flexible, and would allow refugees to pay the fees in instalments, following discussion and a formal agreement. Parents would pay according to the timeframe agreed, and children could return to school. If parents failed to follow the payment plan, the children would be sent out of school. However, other schools required a certain amount of money (sometimes the whole amount) to be paid at the time of registration, which made it difficult for refugee children to join.

If there was no possibility of the child going back to school in the near future, parents said they would call the children and explain to them why they are not going to school; that it was not because their parents do not care about them, it was because there was not enough money. They tried to encourage the child not to lose hope.

'The parent counsels him/her by telling him or her 'please be patient you will go back to school'' (Congolese, group discussion, female 18-55).

In this situation, the child himself or herself might find work, or be set up in a small business by their parents or relatives, so they could earn money to pay their own school fees. In most cases, this was intended to be a temporary arrangement, and the child would return to school after some time, maybe one year, once they had earned some money. However, the strategy exposed children to the risk of sexual assault and exploitation. For adolescent girls, they might engage in prostitution to pay school fees, but once she began this activity she was unlikely to return to school, according to most respondents. Children living without their parents were particularly likely to try to earn their own money for school fees.

Many organisations provided English language classes for refugee children. These were offered by both NGOs (particularly Jesuit Refugee Service [JRS]) and by community based organisations. In some cases, these classes were seen as preparation for school, so children could learn enough English to cope in an English-speaking school. In other cases, the aim was to provide activities and some knowledge for children who were not able to attend formal school.

'If it does not get the ordinary schools, the community refers children in language training centres like what we have here in our church so that at least they can learn English instead of missing out everything' (Congolese, female, 14 years).

There are Islamic schools which children go to. Although it is not free, but children are gathered there and taught Islamic studies and religion. The schools are managed and taught by the religious community' (Somali, male, 21 years).

For older children (13 and above) skills training was also offered, both by church organisations and NGOs. These skills were mainly vocational, and included hairdressing ('saloon'), computers, tailoring, catering. In addition to keeping the young people who were out of school busy during the daytime, it also enabled them to earn some income through working. This was believed to prevent girls from becoming involved in prostitution.

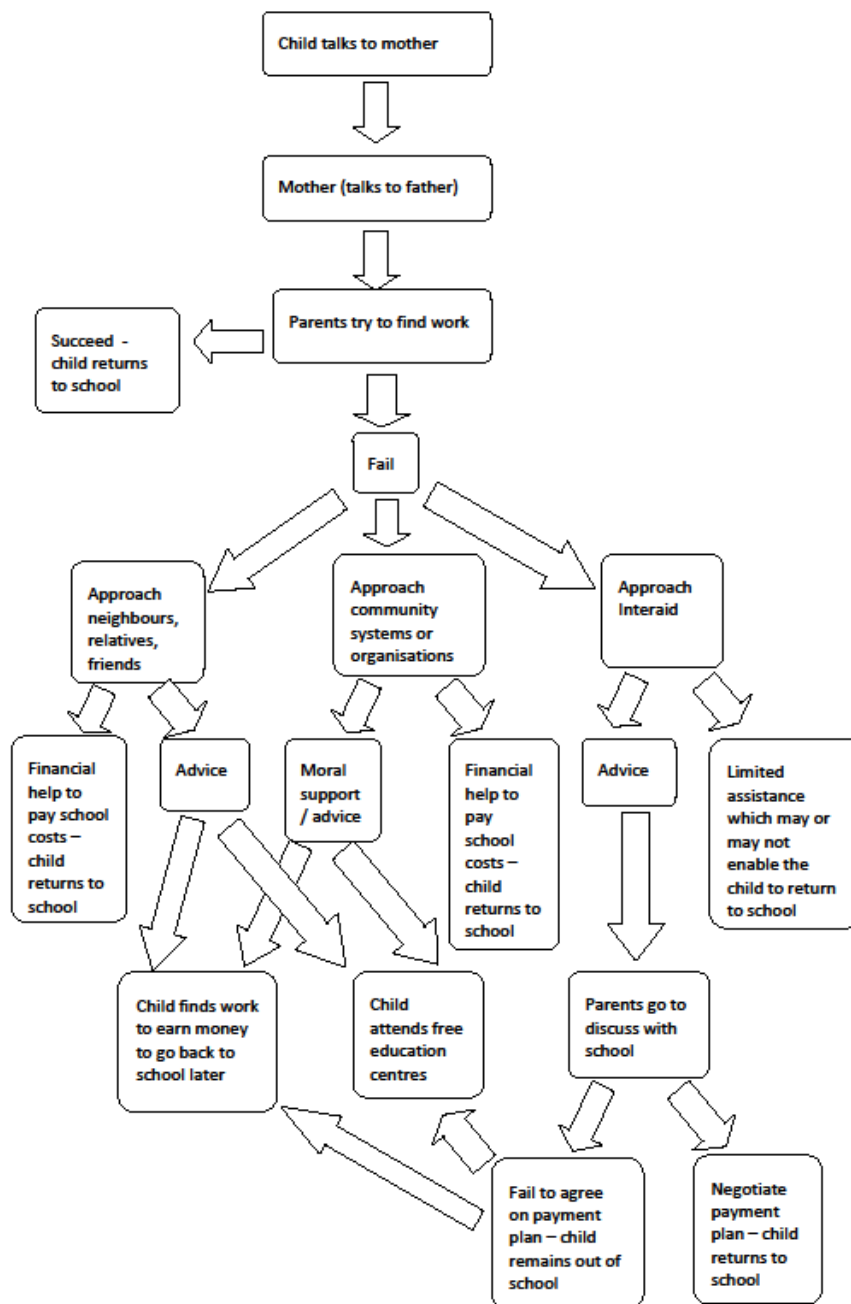
Involvement in these classes and activities was perceived as better than doing nothing, but a poor alternative to a formal education. Some children did not value free education, or they complained that the standard was low, so they dropped out. Although these centres were providing a very valuable service, the classes were often just for a short period (e.g. Solidarity English classes were just for two hours) so children were still exposed to many of the risks associated with being out of school. Also, crucially, many of these centres (especially vocational training) only catered for children aged 13-14 and upwards; there were very few alternatives to school for younger children.

'Children are eager to study in these universal education primary and secondary because this English course is just for two hours every day and afterwards they go back home but they can't sit there for long time, they get tired and have to move around and that is how they learn the bad behaviour' (Congolese, female, 17 years).

In the Congolese community particularly, respondents said that once parents have tried everything and have still failed to send their children back to school, they turned to their faith, and to prayer.

'There is nothing I can tell them apart from praying God. I tell them to sustain the situation, if one day we get school fees that is fine and if I don't get that is as well fine, life goes on' (Congolese, group discussion, female, 25-40 years).

Figure 1. Functional response pathway: child out of school



Responses To Children Experiencing Discrimination

PREVENTIVE FACTORS

The most common strategy used by parents to try to prevent their child being discriminated against by Ugandans, was to avoid Ugandans as much as possible. This involved sending children to fetch water after everybody else has finished, keeping younger children locked in the house, and advising older ones to stay at home, although it was difficult to control the movements of children once they reached age 12 and above.

'For our children to play, we are now locking them in our houses. They are playing from the houses they cannot play with others' (Congolese, group discussion, female, 45-60 years).

'Sometimes mother tells the child to stay home, not going to school and even the shops, and the mother goes out by herself' (Somali, group discussion, female, 18-50 years).

Some parents tried to protect children from abuse on the way to and from school by accompanying them. They also tried to prevent discrimination by advising their children to behave in certain ways which were likely to be more acceptable to Ugandans, and not to provoke anybody.

'We first tell the child to be polite when he is with Ugandans and when there is a misunderstanding between them he has to draw back and leave them. He should not fight back when there is a fight, because if he fights them they will arrest me and the child will be in trouble' (Congolese, male, 46 years).

Learning English was said to be an effective preventative strategy, since once a child knows what is being said to him or her, and can respond, they are more able to defend themselves verbally.

RESPONSE PATHWAYS

Parents were the primary 'helpers' in cases of discrimination. When children experienced abuse, physical assault, or other forms of discrimination, they commonly reported to their parents. Those who were living without parents were particularly helpless in these cases.

'There are some children who NGOs pay, and they live alone in Kampala, if anything happens to these children they don't have anyone to report to, if someone abuses them, if a boda⁶ hits them, if they are discriminated at school, they don't have anyone to help them' (Somali, group discussion, female, 18-25 years).

Whilst parents were very distressed at the discrimination experienced by their children, they often felt powerless to influence the situation. The most common response from parents was to try to comfort their child, and encourage them to cope with the situation (e.g. by avoiding it).

'What is there is just to counsel your child. You tell him 'even if they discriminate you, do not hate them, just try to collaborate with them so that we can see if that discrimination can get finished'. So, a child will also comfort herself because sometimes children are used to comfort themselves. So tomorrow you can see the person who discriminated her sitting with her. But there will still be someone else who will discriminate her ... you just advise and tell her: 'if they discriminate you, that should not discourage you, because you see here we are in a foreign country, we are refugees, so it is obvious that we are discriminated, but let us love them'' (Congolese, group discussion, female, 14-18 years).

'If I am discriminated I go and tell that my mother and my mother tells me, oh my poor girl, what can I do about it? You need to endure it' (Congolese, group discussion, female, 14-28 years).

⁶ Motorbike taxi

Some options were discussed, but were not generally felt to be effective. For example, parents could talk to trusted neighbours, and ask them to speak to the family which was abusing the refugee child. However, it was felt that this could create more hostility against the refugee family. Some parents would go to confront the people who abused the child, but this was said to rarely be effective, and usually led to further problems.

'Other parent cannot bear it. If a child reports to him what happens, he doesn't think, he goes and fights with those people who discriminated against his or her child. After that fight ... her relatives will call the police and they will take us to the police post but because I am a refugee they will judge me culprit' (Congolese, group discussion, female, 14-28 years).

If the discrimination was serious or continuous, the team heard that parents might report to the Local Council representative⁷ (LC1) or the police. However, they said they rarely received a satisfactory result, mainly because the police and LC1s were Ugandans and were also prejudiced against refugees. They said that when they went to report cases of abuse or assault against their children, they were often accused of having caused the problem themselves, or of lying in order to create an 'insecurity case' (which was believed to enhance the possibility that they would be resettled abroad).

'We go to the chairman[LC1] and talk, to the police and talk and even to the offices and talk but they will tell you that you are looking for insecurity' (Congolese, group discussion, female, 35-60 years).

Respondents said that both the LC1 and the police required money before they would handle cases, and this was a barrier for most refugees. However, prejudice against refugees was said to be the greatest obstacle to receiving assistance from officials in cases of discrimination.

'Once a [Congolese refugee] child was beaten, she ran to the mother who decided to go and see the Chairman. When she arrived there, he said 'what do you want me to do? You refugees, you are the ones who are finishing our food' (Congolese, group discussion, female, 13-17 years).

'The police can arrest the person or people who did this calling of Al-Shabaab. But sometimes when you report this kind of discrimination, the police may just reply to you 'you're indeed the one who is Al-Shabaab'' (Somali, group discussion, male, 13-17 years).

This situation was exacerbated by refugee parents (and children) being unable to explain the situation clearly because of the language barrier. This was a significant challenge in responding to discrimination; it prevented parents from arguing their case with the LC1 and the police.

Although the research team heard of no cases which had been dealt with satisfactorily by the LC1, some respondents did say that the LC1 would sometimes call a meeting of people in his area, to talk to them about discrimination and how to live together peacefully.

A fear was expressed by some refugee children, and by some adults, that if the case was reported to the police, there could be more serious repercussions for the child. They feared that those who abused the refugee child may become angry at being reported, and would try to attack the child again and beat him or her even more seriously, as a punishment for reporting.

'If you complain about the people who hurt your child to the LC, we know LC is not doing anything, so we are afraid that if we report the issue, and those people heard, they will find my child outside and they will kill him again. This is not our country' (Somali, group discussion, female, 18-50 years).

⁷ A Local Council (LC) is a form of locally elected government within the districts of Uganda. There are five levels of Local Councils. The lowest level is the Local Council I (LC1), which is responsible for a village or, in the case of towns or cities, a neighbourhood.

'You will say to yourself that you are in a foreign country and ... if you report again you may lose your life. In order to protect yourself then you say, 'I have given up'' (Congolese, male, 32 years).

The team heard several times from Somali respondents that they rarely reported abuse or assaults to the Ugandan authorities because they feared repercussions.

The team heard that sometimes parents reported cases of discrimination against their children to the InterAid Uganda counsellor. Some said they did not receive support from the InterAid Uganda counsellors in this situation, since the counsellors were also Ugandans.

'I am a Congolese and she is a Ugandan and where we are going to is totally for Ugandans, who will they support? Obviously the Ugandan. I will come out a loser' (Congolese, group discussion, female, 18-20 years).

From others, the team heard that the counsellor would advise the parents to stop their children from going to certain places or staying out late, and to ensure that they live peacefully with Ugandans, to avoid further problems.

'The only help they get is the advice on how to behave and how to move so as not to fall into that trouble with people, with the LC1 and with Police. But they do not meet with the people who discriminate against us, they do not do anything to prevent them from discriminating us' (Congolese, male, 16 years).

Respondents said they had not heard of any action taken by Somali or Congolese community leaders, or community organisations, to address the issue of discrimination, despite the severe impact it was having on the wellbeing of their children. The refugee leaders handled conflicts which occurred within the Somali community, or the Congolese community, but did not get involved in cases involving Ugandans. The only action taken by community leaders and organisations was to offer advice to those who have experienced discrimination.

'I have never seen a place where Somali community, religious leaders and families come together and talk about discrimination, or any harms which affect our children's safety and life' (Somali, group discussion, female, 18-50 years).

However, the Somali vice-chairman told us that he often dealt with cases of discrimination, usually by reconciling the two parties. A member of the Somali Child Protection and Education Committee also told us that they meet with school management and teachers to discuss the issue of discrimination in schools, and to try to resolve individual cases.

The only type of discrimination refugees felt it was possible to effectively respond to was that which took place in schools. In these cases, parents would usually talk to the head teacher, who may or may not take action. In some cases, the head teacher might call a meeting of the whole school, and warn them about the consequences of discrimination. The school management might talk to the children who are discriminating against refugee children, and in some cases beat them or expel them. They might also call the parents of those children, and warn them that their child will be expelled if the situation continues. If discrimination continued, the parent might withdraw the child, either to send them to another school or to keep them at home. In other cases, the child himself or herself might refuse to continue attending that school, and drop out. Parents tried to prevent this by advising the child and helping them to develop the strength to cope with the discrimination.

'You'll just console them, we encourage them to always report the matter to their teachers but they tell us that even their teachers don't do anything about that. We tell them to endure the situation because it will not last forever. There is nothing we can do about it but we hope that one day God will help us to be in our own country again' (Congolese, female, 38 years).

It was acknowledged by most that outside of the school setting, there was very little they could do to effectively respond to discrimination against refugee children, since it was widespread and, to

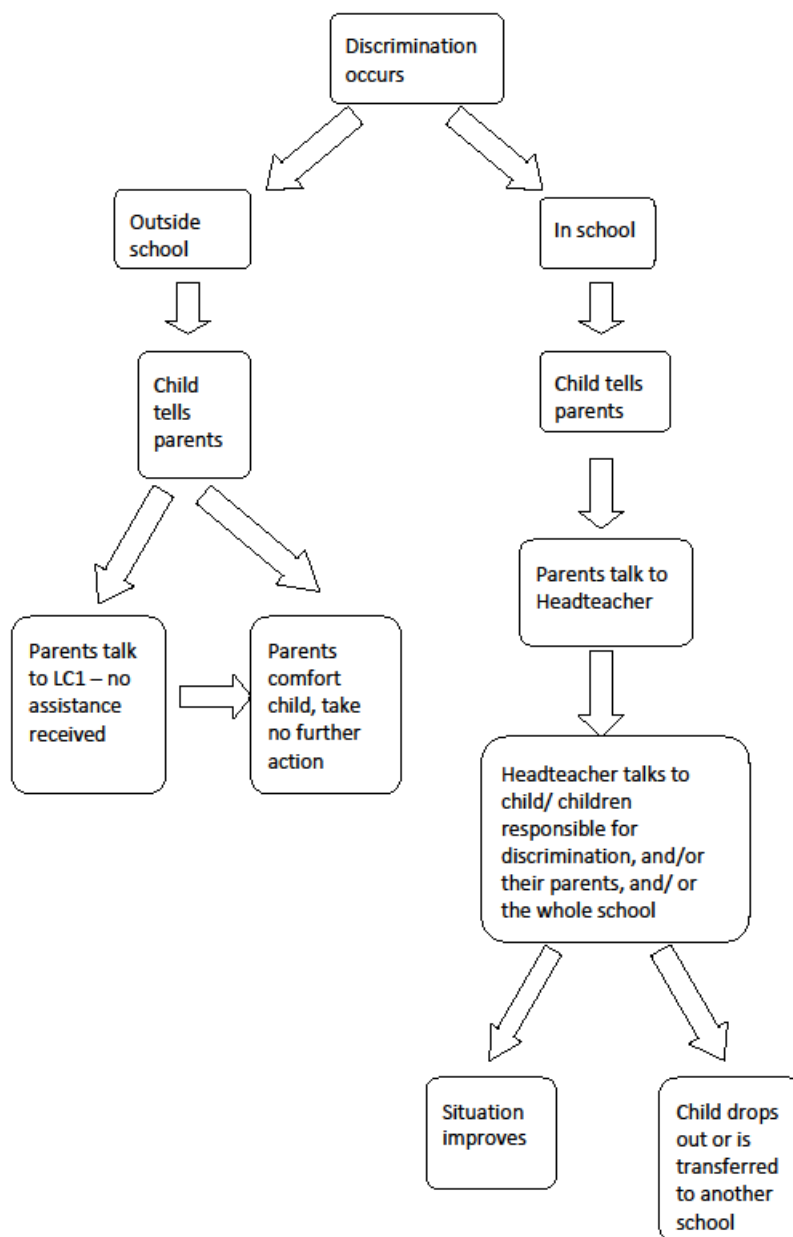
some extent, structural.

'To whom are you going to plead? It is everywhere. For at hospital or even to those who are supposed to take care of us. For example, you go to the police station to accuse someone because he did a bad thing to you, and you will see that they do things like that. You have all the reason, or you are right about your case, but I don't have whom to plead it. We are foreigners, it is God is not our will in order to be here, but what can we do, we are just foreigners' (Congolese, male, 39 years).

The best option for many parents was to keep quiet, and try to prevent further abuse using the strategies already described (e.g. locking child in the house).

'Quiet is the best answer because if you report no-one will help you' (Congolese, group discussion, male, 13-17 years).

Figure 2. Functional response pathway: discrimination



Responses To Children Being Raped

PREVENTIVE FACTORS

There was no discussion of the ways in which parents tried to prevent their children being raped by family members, probably because this was too sensitive an issue to discuss with researchers. The main ways parents tried to prevent their children from being raped by neighbours or strangers was by restricting their movements, and by ensuring they were escorted when they are out.

Somali respondents said that girls were protected by keeping them in the home, and only allowing them out when escorted by brothers or older family members. In the Congolese community, girls were allowed more freedom but respondents said they tried to protect them by not sending them out on errands after dark, and advising them not to move around the area. Parents tried to stay with their younger children, but this was difficult when parents needed to go out to earn an income, so younger children were sometimes left unsupervised at home.

Parents tried to advise their children, to raise awareness of the dangers. For example, the research team heard that some parents taught their children not to trust strangers, and not to accept gifts from people they do not know. Some organisations, such as Refugee Law Project (RLP), ran programmes to raise awareness about sexual violence, and how children can protect themselves.

Respondents commonly said that the most effective prevention method was to try to keep children in school, since it was often when they were moving around looking for food, or working, that they were exposed to the risk of rape.

'Advice helps a little bit. But the best prevention is school' (Congolese, male, 30 years).

The journey to and from school was said to be risky, so it was necessary to escort children to and from school. If they were in school, and escorted between home and school, this was said to minimise the chances of them being raped.

'That problem can't be avoided especially in going or coming back from school, those who study very far from their homes can't escape if people have planned to rape them on their way coming back home. But on my side, because I am aware of this kidnapping and raping, I personally accompany my children to school and pick them from there' (Congolese, female, 38 years).

However, it was acknowledged by many respondents that rape was difficult to prevent. Potential perpetrators were often not known, and if somebody was determined to rape a certain child, they would find a way to do it.

'There is no way you can tell a child not to go to buy food in the market or to go to fetch water. We are only trying to keep them at home but when it comes to sending her, you have to send her. It doesn't mean that you want to expose her but the people who are targeting her are not known. We do not have the ability to protect them. We are only trying to keep them at home and advising them but it is not enough' (Congolese, male, 16 years).

RESPONSE PATHWAYS

Although both boys and girls were reported to be raped, when discussing responses, the focus was only on female rape. For this reason, the child experiencing rape will be referred to as 'she' throughout this section.

When a girl was raped, respondents said that some 'keep quiet' and do not tell anyone; some tell their mother; and a small number might tell their teacher instead of their mother, although this was not common. If a child was not living with her parents, she might go directly to the LC.

'When a child is being raped, she normally keeps quiet. But among children one can tell you the truth, and this one can be taken to the hospital. Another one cannot tell for fear of being killed' (Congolese, group discussion, female, 18-55).

When a girl 'keeps quiet' about the rape

Respondents said that many girls keep quiet, due to shame and fears that her parents will punish her. The rape is discovered if the girl has become pregnant and the physical changes are noticed; or if she tries to abort, and has complications; or if she develops some sickness because of the rape.

Once the rape is discovered, usually by the mother, the child is taken to hospital for treatment, although it may be too late for her to receive the treatment she really needs. There is also a lack of evidence by that stage, so it is hard to report to the police. Despite this, the mother may decide to report the case to the LC1, in which case the process continues as described below.

When a child tells her mother she has been raped

In the majority of cases, the first priority was to take the child to hospital for treatment. There was a high level of awareness amongst Congolese respondents that it is necessary to attend hospital within 72 hours of the rape to receive post-exposure prophylaxis treatment for HIV. In some cases, the mother may take the child directly to the police, who then take her to hospital.

Following the emergency medical treatment, there were differences between the response pathways described by Congolese and Somali respondents, so they will be described separately.

Congolese

The response depends partly on whether the perpetrator is known or not. If he was known, sometimes the parent tried to talk to him, and sometimes they 'dealt with him' themselves.

'Before they arrest him I have really to deal with him ... that is fighting him. Because it pains so much till death' (Congolese, group discussion, female, 25-40 years).

One Congolese respondent said that, at times, the girl was given in marriage to the perpetrator, but this seemed to be unusual in this community, and only occurred when the perpetrator was also young.

'It is a serious matter because that girl loses her chances of getting married by any other man. Some men don't marry a woman who was raped at their young age. Both parents agree that the boy will marry that girl when they grow up' (Congolese, female, 14 years).

If the perpetrator was a relative, the parents felt that they were in a difficult position, and often would not report to the police.

'If the person who raped her is her relative, it is another case. If I arrest him, it again turns to me because I will be the person again to make sure he gets out of prison. And if I do not arrest him, child will be disturbing me about that person or reminding me of what he did to her yet I love him. She will keep asking me and this creates pain. It puts me in a state of dilemma, I fail to arrest him and to punish him' (Congolese, group discussion, female, 25-40 years).

Even where the perpetrator was a fellow refugee there may be reluctance to involve the authorities, since there would be significant consequences for the family of the perpetrator and there is pressure from the refugee community as a whole to resolve the matter informally.

'You cannot go and take your fellow refugee to the police station before calling a meeting, you can call a meeting of which you will have to invite other fellow refugees and brothers. You sit all together and try to solve that matter. Now they will tell you that if you take that boy to the police station he will be taken to prison where he will spend more than 20 to 30 years, and even it may be a life jail. And they'll again tell you that from there you will be spoiling his parents' case files. And you also as a human being, you again feel pity, of which even you will

think that even that daughter of mine did not even scream, she deserved it and you will just leave the matter' (Congolese, male, 50 years).

In the majority of cases, however respondents said that the perpetrator was not known to the child or her family. This may be the case, or it may be that this was an easier situation to discuss with a researcher than a situation in which a relative or friend rapes a child.

The 'official procedure' in these cases was for the mother to report to the LC1, who would give her a letter, then she goes to the police. The police investigate, and take mother and child to hospital. After the police, the mother and child report to InterAid Uganda. Respondents said that the LC1, as the first point of contact, should handle the issue, and should refer the case to the police. If the perpetrator was known, the LC1 may call the families together to discuss, and agree that the perpetrator's family would meet medical costs, especially if the girl is pregnant as a result of the rape.

'Normally, we start with the chairman before we go to the police. Everything which happens to you must be reported first to the Chairman. He is the first person to reach to ... At least the chairman can talk; he can decide so that they arrest the person, the chairman is the one who can decide to bring the matter to the police so everything will start with the chairman. Any help will come through him' (Congolese, female, 17 years).

When the case was reported to the police, the responsibility of identifying the perpetrator lay with the person reporting the crime. If the person was unknown, then the only way they would be arrested was if the child saw that person again, and went to the police to report where the perpetrator could be found. However, according to respondents, in most cases the perpetrator was not found.

'Police will tell you to look for that person and it is not easy for us to do so because most of the time, they run away to their home town. It is not easy for us to reach their hometown. The story will end there' (Congolese, female, 18 years).

Some respondents said that lawyers from Refugee Law Project and InterAid Uganda could help the family to follow up the case at the police, until the perpetrator is arrested. However, the research team heard that even if they arrested the perpetrator, the punishment was very minimal, and if the perpetrator could pay, he was released.

'After arresting the person, he pays money and they release him. They do not follow up. Here police don't mind if they are paid money' (Congolese, group discussion, female, 15-35 years).

According to respondents, some Congolese families whose children were raped did not report to the police at all, because they felt the police discriminated against them and would not prosecute a Ugandan perpetrator.

When they did not receive satisfaction from the LC1 or the police, Congolese refugees may complain to InterAid Uganda. Others went to InterAid Uganda as a first port of call, and others reported the case to InterAid Uganda after going to the LC1 and police. At InterAid Uganda, they discussed their case with a counsellor. Respondents said that InterAid Uganda primarily helped with medical care for girls who had been raped, by transporting her to a government hospital (Mulago) in the InterAid Uganda ambulance, and providing the medicine prescribed to the girl if it is available.

However, most Congolese respondents said that 'nothing happens' or they receive 'no help' when they report to InterAid Uganda.

'We do report to InterAid Uganda and they are really aware of that. They will just write in your file and it will be end' (Congolese, female, 30 years).

Congolese respondents said they also reported cases of child rape to RLP and African Centre for the Treatment and Rehabilitation of Torture Victims (ACTV), but said that the only help available for refugee girls who had been raped in Kampala was assistance accessing medical care.

'What I know, they ask them whether they got some illness and if they advise them to go to hospital, that is all they do for them either InterAid Uganda, Refugee Law Project and JRS all the same ... just to take them to hospital' (Congolese, female, 14 years).

Discrimination was said to be a barrier at every stage of responding to a situation in which a refugee child has been raped; from attending the hospital, through to reporting to the police.

'In the hospital, they will find that those who committed the crime are Ugandans, you will see the doctor coming to you and tell that he did not see anything' (Congolese, group discussion, female, 45-60 years).

'We normally go to the police, if found guilty they arrest him because you were still there, but after 2 to 3 days, they release the person. You are a refugee you do not know what happens. And they tell you that 'we know you already, we know that you are looking for insecurity letters so that you can go abroad' (Congolese, group discussion, female, 24-55).

A further barrier to reporting for many Congolese respondents was a fear of repercussions from the family of the perpetrator.

'When you report a person, a Ugandan, he can destroy you. He can do something bad to you. This is why when things happen we prefer keeping quiet, we go to the hospital, we go to the offices, come back, we help our children who are depressed and we stayed home together' (Congolese, group discussion, female, 25-55 years).

The following extract illustrates the type of situation that refugees fear, and that prevented them from reporting rape.

'That one who was raped they run to the chairman, he also sends them to the police, they managed to arrest that boy. The girl used to buy things from the boy's shop and he managed to get her in, locked her in and raped her. The police took that boy to jail in Luzira prison. Meanwhile that boy was in jail his family members came to attack the girl's home and tried to destroy it and threatened to kill them if they don't withdraw that case and free their child. As refugees we are powerless and there is nothing we can say. That woman did everything possible so that the boy gets released from Luzira prison in order to save her life as well as for her daughter and family. When the boy was released, they came back and threatened them that if they dare try to follow up that case again they will not mind whether the house is for a Ugandan, they will take off the roof and remove the doors from the house. That woman was very scared and they could not follow up the case so that her daughter receives justice' (Congolese, female, 46 years).

Due to these barriers, Congolese refugees may try to resolve the problem informally, without reporting to the LC or the police or any authorities. These cases become known to health professionals, but not to other official bodies. In general, there was a belief that no help is available for refugee children who experience rape, and all that could be done was to ensure that the child received medical treatment, and for the parents to advise the child, support her and encourage her to cope with the situation.

'The chairman gives a referral letter to take to police, the police takes your statement and then the police investigates about your case. But the reality is that they stick your statement there without any further investigation. So for the following days, you'll have to do rounds at police without any solution, you'll get tired and give up the matter. As you fail to get the assistance from the police, then you decide to go and try at InterAid Uganda to see if they can assist you. Reaching there, the counsellor tells you that he or she does not have time for you. She gives

you an appointment for another day. When that arrives, you go there with your appointment, and he or she asks you, 'can I help you?' You have that wound inside, and after listening to you, he or she tells you there is no assistance for you' (Congolese, group discussion, female, 25-45 years).

Since refugees said that organisations such as InterAid Uganda and Refugee Law Project provided help with medical care, and legal assistance, it was surprising that there was such a consensus that refugee children who were raped received 'no help'. Even when the perpetrator was arrested and jailed, some respondents did not see this as a satisfactory outcome in itself, since they did not directly benefit.

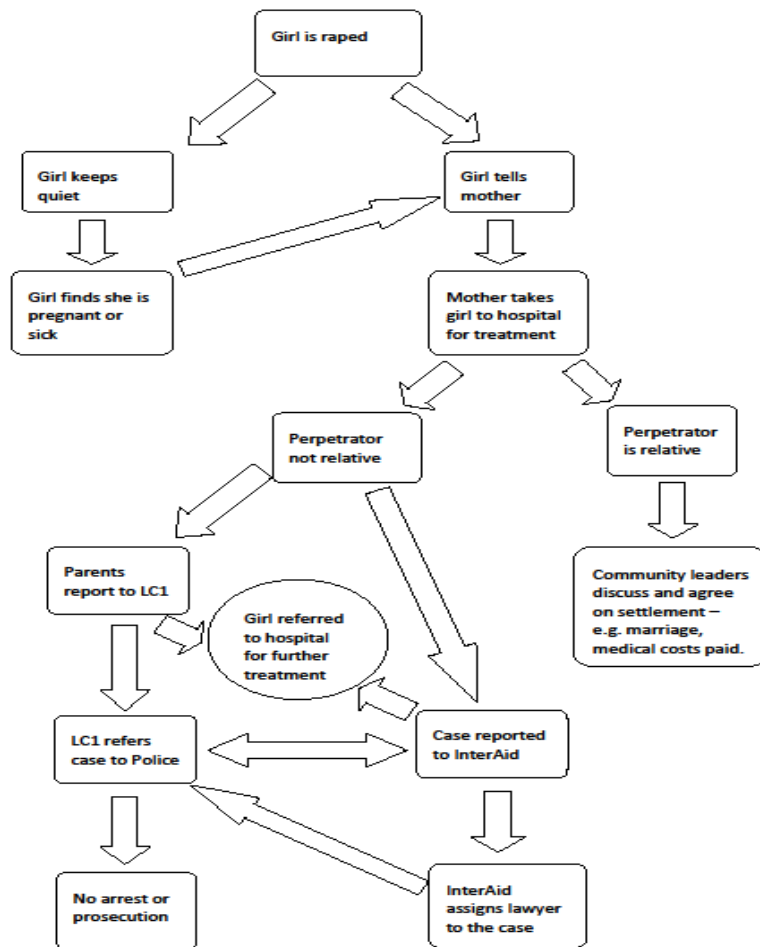
'R6: they only search for the rapist and arrest him; that is all what police does.

R4: they don't help in anything else' (Congolese, group discussion, female, 15-35 years).

In general, respondents did not state clearly what they felt would be a satisfactory outcome in a case of rape, but there was an implication that their dissatisfaction with the responses of organisations was due to the lack of material assistance. This was only stated explicitly by one respondent:

'The counsellor can help her by presenting her case to the office and get some financial help. They send her to school, or give everything she needs, or also they can follow up her refugee file for further assistance [resettlement]' (Congolese, female, 15 years).

Figure 3. Functional response pathway for Congolese refugees: rape



Somali

The response to rape within the Somali refugee community was somewhat different, and depended on whether the perpetrator was someone from within the Somali community or outside. The response to the rape of a child centred primarily around preserving the reputation of the girl and her family, and minimising shame.

In some cases, the research team was told that when a mother was told about the rape of her daughter, she 'keeps quiet', to protect the reputation of the girl. There was a fear that if it is known that the girl is not a virgin, nobody will marry her. However, this strategy was believed to bring problems in the future.

'If the mother hides that the girl was raped, it become a problem to the girl's future. Sooner or later the girl will get married, and the mother should tell the person who is going to marry her daughter the truth, that the girl was raped, because one day they will find out and they will divorce' (Somali, group discussion, female, 13-17).

Although some Somali respondents said that a rape may be reported to the police, if the perpetrator was Somali, it was more likely to be dealt with by community leaders and the families involved.

'The custom may order that in the case of the girl who has been raped, the incident could be compensated if one member of the girl's clan has previously raped someone from the rapist's clan. The custom is based on clan is able to solve different issues. And if they report to Police it makes it worse because Police just collect bribery and not solve anything. It's better for the elders to handle the issue' (Somali, male, 23 years).

The religious leaders may bring the two families together, and the perpetrator's family gives some financial compensation to the girl's family. In other cases, they decide that the girl and the perpetrator would marry. The girl's family were usually happy with this arrangement, since they believed that nobody else would marry a girl who was raped.

'Sometimes when the man is found, and the mother of the girl does not want her daughter to be neglected, she asks him to marry her, because people will know the situation and no one will marry her in the future' (Somali, group discussion, female, 13-17 years).

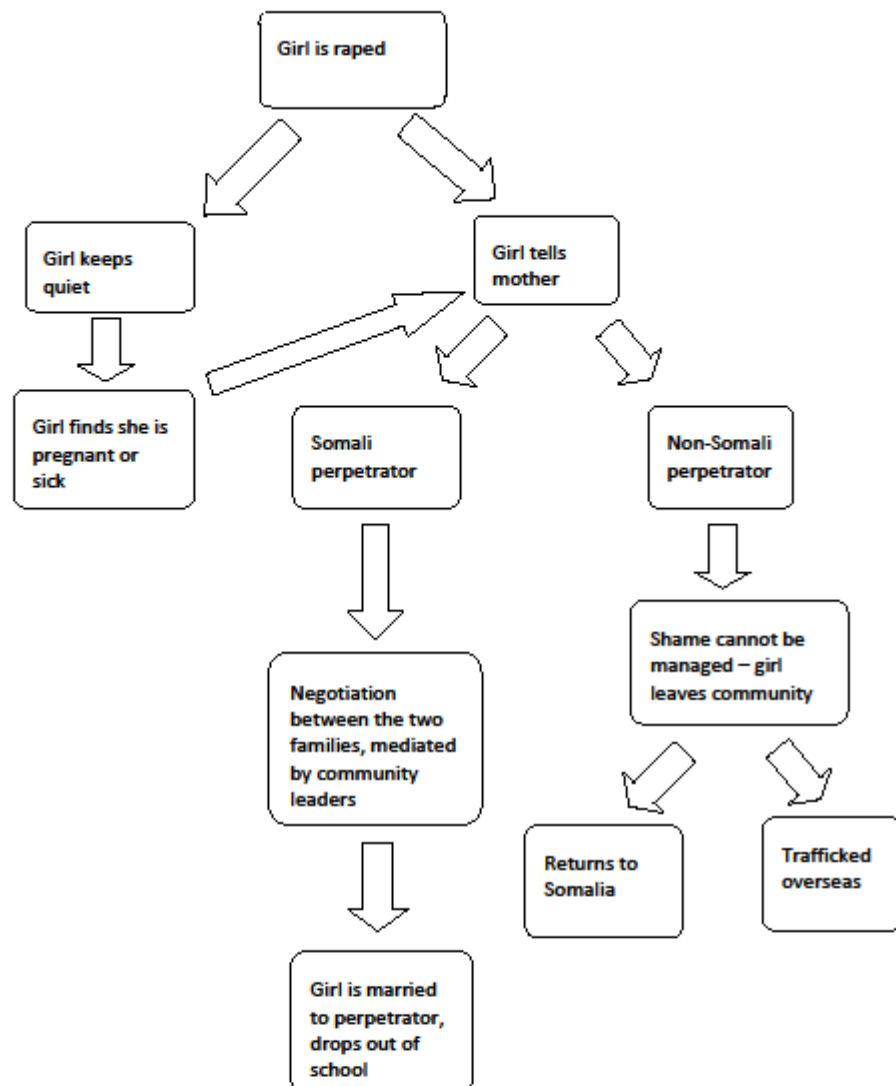
However, the girl herself was less likely to be happy.

'The girl is also happy because her shame was covered, and somehow she is not happy because the guy she married is the one who raped her' (Somali, group discussion, female, 13-17 years).

If the perpetrator was not a member of the Somali community, the community had no way of resolving the situation in a way that was perceived to be satisfactory. In this situation, or if girls working as house-girls or in restaurants were raped by their employers, they may decide to leave the country because it was impossible to recover from the shame of being raped if they stayed in Kampala.

'This causes the young girls to go and travel because if she raped she doesn't have future. She can be arrested in Libya or drown in the sea' (Somali, female, 40 years).

Figure 4. Functional response pathway for Somali refugees: rape



5. CHILDREN WHO ARE EXCLUDED OR MARGINALISED

'There are children who fled alone, they got separated with their parents during the war and for others their parents died. These children are suffering too much. For example our case, we came only two. Imagine the parents were taking care of everything for you, from clothes to food, and suddenly you find yourself here in Kampala all alone. You suffer a lot, you don't have your parents, today you are in this family and tomorrow they throw you out, you even try to work as a house girl in that family, but they tell you that they are fed up with you; you go in the next family and they do the same thing to you. You try in Ugandan families, in Rwandese families, in Congolese families and from there the child is getting different moral education. The child was supposed to get one and only moral education from his or her parents, but because of staying in different families and different people children are traumatised, and you find them having very many bad behaviours because they were not raised up by their parents and they become wanderers in so many families' (Congolese, female, 17 years).

Children living without their parents

The central role played by parents in child protection meant that children living without parents were particularly vulnerable. This is partly because they were exposed to harm as they tried to fend for themselves (sleeping on the streets, trying to earn money), partly because those staying with foster parents or step-parents were more likely to be mistreated than those staying with their biological parents, and partly because they did not have the protection that parents offer and it was more difficult for them to access services.

In many situations, the love and guidance offered by parents enabled a child to cope with a difficult situation which cannot be changed at that time (e.g. being out of school). Children living without their parents did not have this love and guidance, and respondents said that this can lead to poor decisions, which expose the child to harm.

'There are some children who are not staying with their parents, thousands who are not in their home country. They are refugees in everywhere. So, they live with relatives but the relatives don't care them much or say these kids will be of help to you in the future. As a result, these children become drug users and chew khat. These Somali children learn to use drugs before they have reached 15 years of age. They're not with their parents, or with someone very concerned about them' (Somali, group discussion, male, 13-17 years).

Those who were living with relatives or step-parents were sometimes over-worked at home, treated like a servant, beaten and not allowed to go to school. As a result, these children, along with those who are living independently, were likely to try to fend for themselves by methods which expose them to further harms (e.g. prostitution, trafficking, stealing). Even those who were able to find employment were exposed to exploitation, since their employers knew they had nobody to protect them.

'Most of the girls here in Kampala work for men, those men live together and hire one girl who cooks food for them and clean the house and even washes the clothes. So the harm we face is we are living with men, sometimes they touch your body, sometimes they tell you they like you and I know it is lie, they just want to take advantage since you are a young girl, and you are working for them and staying home alone with them, and don't have someone who protects and defends you from them' (Somali, female, 15 years).

Children without adult protection were extremely vulnerable, since it was difficult for them to access official authorities and services without assistance, and they were often excluded from family and community networks.

'Children fled from DR Congo without parents and found themselves in Uganda fleeing war and also has no capacities, he or she cannot think where to go, and even does not know how to express himself or herself. This one, even if you tell him or her to go to InterAid Uganda, go to OPM, he or she does not know what to do and what to say, how to defend himself or herself' (Congolese, male, 25 years).

'This child is very scared from those people he or she lives with, they threaten them, the children cannot say anything. And if you ask the child something he cannot tell you anything, because he is scared what might happen to him later, because he doesn't have his parents, and if you say something you will only embarrassing yourself' (Somali, female, 35 years).

Younger and older children

Younger and older children were vulnerable in different ways. Younger children were usually kept within the home environment, so were unable to report any harmful experiences taking place there. They may lack the ability to explain harms that have taken place outside the home.

'Problems affect more severely younger children. They are unable to talk, defend or express themselves clearly. Even when they're the victim they cannot clearly express that they have been wronged' (Key informant, Somali CPEC member).

Older children were exposed to a wider range of harms, as already explained, and key informants said that there is a lack of protective services for refugee children aged 12-18.

Children with disabilities

The research team obtained very little information on children with disabilities, but the little we heard indicated that these children were likely to be excluded from child protection mechanisms. There have been cases of children with disabilities being left at the gates of InterAid Uganda by their parents; the quote below describes the risks experienced by such children.

'Children with disabilities in Congolese society are seen as a bad omen, curses, they think they'll bring bad luck. Their families lock them in the houses, don't register them for resettlement. Community members know, but don't know where to go to report these cases. The woman can be blamed when children are born with a disability. The support mechanisms are not currently there for disabled children' (Key Informant, Refugee-assisting organisation).

Children who have been rejected by their families and communities

Some types of behaviour were said to lead to children being rejected by their families and communities. This particularly applied to older children who became involved in delinquency (drug use, stealing) and prostitution. Since the main child protection mechanisms were community-based, children rejected by their communities would have difficulty in reporting any harms they experienced.

6. VIEWS OF YOUNG CHILDREN

In the body mappings, children of all ages identified a wide range of things their drawn 'child', either liked or disliked.

Amongst the Congolese children who participated, both boys and girls liked eating good food, seeing and hearing church activities, particularly preaching and singing. Girls liked being clean, plaiting or dressing their hair, and making people happy. Boys also liked helping their parents, or working, and they liked intelligence or knowledge. Both girls and boys liked seeing their schools and their teachers, and their hands liked writing.

Somali children also liked their parents and friends, and particularly liked being clean, being in clean places, and the smell of perfume or incense. They liked to see, hear or hold the Qur'an, and boys liked to see and walk to the mosque, and to hear prayers and see people praying. Both boys and girls liked good food and drink, and going to school. Girls liked to see and hear their friends.

In contrast, the Congolese drawn 'child' disliked dirty places and dirty things, including 'rotten' and 'dirty' food, stepping on faeces or other types of dirt, including rubbish. They did not like hearing abuses, insults and being shouted at, and hearing people fighting or quarrelling. Both boys and girls disliked Satan, being beaten, knocked or hit, and carrying heavy things. They also reported not liking receiving bad news, and boys said they did not like hearing people being beaten, houses burning, or gunshots. Both boys and girls did not like walking long distances.

Somali children did not like seeing a naked person, and girls did not like shaking the hand of a man. Both boys and girls disliked dirty places and things, including seeing, smelling or touching faeces and urine. They did not like gossip, insults, or shouting. Girls did not like injuring their hands or feet, through accidentally cutting or burning, and boys did not like to be hit on the head with objects such as a stone or against a wall. Both girls and boys did not like to hear gunfire, to see people shot, stabbed or killed, or to hear that people are dead. The eyes of the girls' drawn 'child' did not like to cry, and the ears did not like to hear that people are dead.

The children's responses reflected their poor living conditions in Kampala (in their frequent references to dirt, rubbish and faeces), their experience of conflict in their home countries, and their current experience of violence, including being beaten or hit with objects.

Table 3 below captures some of the more frequent responses by gender and nationality for some of the body parts in the body mapping activity.

Table 3. Things Children Do Not Like: Children's Body Mapping Activity

| Body Part | Girls | | Boys | |
|--------------|--|--|--|--|
| | Congolese | Somali | Congolese | Somali |
| Eyes | <ul style="list-style-type: none"> - Sun - domestic/ wild animals - being knocked or hit - dust/ dirt in eyes | <ul style="list-style-type: none"> - naked person - tears/ crying - dirty places - fighting | <ul style="list-style-type: none"> - faeces - sunshine - Satan/ demon - Fighting - Dust - dead body - abusing people | <ul style="list-style-type: none"> - someone shot/ stabbed/ killed - faeces/ urine - wild animals - jinni/ ghost - naked person |
| Ears | <ul style="list-style-type: none"> - loud noise - quarrelling/ insults - fighters - shouting - bad news, like person died - massacre/ war - parents fighting - Satan | <ul style="list-style-type: none"> - Gunfire - Fighting - Shouting - Insulting - Crying - that people are dead | <ul style="list-style-type: none"> - bad news like mummy dead - noise - hearing thieves - fighting/ quarrels - abuse - guns/ bullets - hear person being beaten/ tortured - house burning/ destroyed | <ul style="list-style-type: none"> - noise - insult/ threat - songs - gossip - gunshot |
| Heart | <ul style="list-style-type: none"> - to be sick/ in pain - fighting - dirt - Satan - quarrelling/ abusive words - noise - being afraid | <ul style="list-style-type: none"> - heartache - hurting - hell - people who hate me | <ul style="list-style-type: none"> - being beaten - bullet/ war - dirt - fighting - poison - rotten food - scared - worry | <ul style="list-style-type: none"> - being beaten - sickness - heat - alcohol/ cigarette |
| Hands | <ul style="list-style-type: none"> - touching dirt - touching fire - to get wounds/ pain - to fight - to beat someone - to steal | <ul style="list-style-type: none"> - shaking a man's hand - being cut/ pain - dirty things - washing clothes/ cleaning house | <ul style="list-style-type: none"> - dirty things - heavy things - being cut/ pain - fighting - being beaten - to be broken - holding guns | <ul style="list-style-type: none"> - touch unclean - broken/ injured hand - fight - dirty things |
| Feet | <ul style="list-style-type: none"> - stepping on dirt - having wounds - to get sick - to go to bad place like witches - going barefoot | <ul style="list-style-type: none"> - going barefoot - walking far - breaking/ injuring - tired - walking dirty places | <ul style="list-style-type: none"> - being cut/ injured - stepping on faeces - walk long distance - going barefoot - being beaten - fighting/ kicking people | <ul style="list-style-type: none"> - injury - step in dirt - to kick someone |

7. CHILD PROTECTION MECHANISMS IN THE URBAN REFUGEE SETTING

In addition to exploring the main harms affecting refugee children in Kampala, and the typical responses to the main harms, the team also discussed (mainly during in-depth interviews and key informant interviews) the various child protection mechanisms in place for refugee children in Kampala. These included both formal and non-formal mechanisms.

The primary helpers for children, in both Congolese and Somali communities, were their parents. For every type of harm discussed, respondents said that children would go first to their parents. A consequence of this was that those children without parents were at particular risk, since they were lacking the primary source of protection.

Parents

The key child protection actors for both Somali and Congolese children were parents. They were the first people children and young people said they would go to if they had a problem, or had been harmed in some way. The mother was usually said to be the first person the child would talk to, although in some cases they would go to the father.

'The first person they talk to is their parents, especially the mother. Any problem that occurs, the mother is told first because she is more kind than the father. In our religion it is told this, who has the first right between father and mother? When our prophet was asked this, he said the mother. Then the second person he respected, the mother, then third time, the mother, the fourth time he said the father. If children tell the mother their problem she feels sorry and will try to help them with the problem. If she can't help she will consult with the father' (Somali, male, 28 years).

In one or two cases, respondents said that the mother would even protect the child from the father, particularly where the daughter had become pregnant, or a child was using drugs or stealing.

'[A girl who is pregnant] first tells the mother because she knows that father is always tough. So they first go to the mother ... because if she goes direct to the father, he might step on her stomach' (Congolese, group discussion, male, 13-18 years).

Parents did what they could to prevent their children from being exposed to harms, for example, by accompanying their children to school and bring them home again at the end of the day. However, some of the prevention strategies, such as keeping their child at home, created their own problems. For example, keeping a teenager at home could create resentment, and the research team heard that sometimes parents locked younger children in the house, not even allowing them to go to school.

As is clear from the section of this report describing response pathways, parents usually took responsibility for trying to resolve any problem affecting their children, or respond to the harm that has been done to their child. Parents intervened directly in many cases, for example approaching the school if a child had experienced discrimination there, or been beaten; or going to the LC1 or police if their child was raped; or approaching NGOs such as InterAid Uganda for assistance.

In many cases, the parents said that they failed to get a satisfactory response. Often, all parents were able to do was to comfort and console their child, and to advise them. The provision of this love, care and advice was said to be a key factor in mediating the effects of the harmful experience. Many of the problems affecting children, such as discrimination and being out of school, were beyond the capacity of the parents to address. In these cases, it was said to be advice, and a good relationship between parent and child, which would stop the child from becoming involved in risky activities.

'[When child tells you that he is going to become a soldier, what do you do as a parent?] What should you do? You just turn into a counsellor, and you start counselling him by telling him to be patient, that we are in the country which is not ours, we fled from suffering, and you try to tell him the truth, and here we have not got any help yet, but have patience please, maybe by God's strength things may change at any time' (Congolese, group discussion, female, 24-55 years).

'The parent has to come closer to her [daughter after a sexual assault], counselling her, advising her and telling her what to do in case it happened again. The parent should make sure she loves her more and stay closer to her' (Congolese, group discussion, female, 25-40).

The quality of the relationship between the child and the parents was said by some to be central to whether the parent was able to effectively protect the child. In some cases, respondents said, children were not open with their parents, or the parents were very harsh, and these children were less likely to receive the protection or support they needed. This was mainly because children did not feel able to tell their parents about something they had experienced, or which was concerning them, so the problem was not effectively responded to.

'Some girls are open to the parents but others no. So it is good when the girl is open to the parents. A teacher can start relationship with girls so she must tell parents' (Congolese, female, 32 years).

'Many parents don't know how to handle such cases [where a girl becomes pregnant], they are very angry and children fear to open up to their parents because they fear what their parents can do to them. The child is in a situation where she can't even tell her mother about that pregnancy, that's why she may go and take some medicine to abort and others flee from home and miss for like three months and run in a certain village and people will say that she run with a certain man yet it was because she got pregnant and she was trying to abort it' (Congolese, female, 55 years).

The research team heard that the positive influence of parents in children's lives was reduced in Kampala, because when children saw that their parents were unable to provide for their needs, they blamed their parents and lost respect for them. This made it more difficult for parents to protect their children through offering guidance and control. In some cases, the parents depended on the income their children brought home, so had no authority over them.

'The family give advice and the mother doesn't give up because [her daughter] is her blood. She will continue with advice, but because of lack of means from parents, the girl will not listen to the advice. She will listen to those men who at least are giving her some money' (Congolese, female, 17 years).

The circumstances in which refugee families were living meant that it was sometimes difficult for parents to avoid exposing their children to the risk of harms. For example, parents often had to spend long hours away from home trying to earn money to pay for rent and food, leaving their out-of-school children unsupervised at home. In some cases, parents more directly caused harm to their children. For example, parents sometimes threw their children out of the house, or encouraged their children to engage in risky income-generating activities, such as prostitution, in order to support the family.

'Because they are poor, the parents use them ... At times the mother is sick and can't afford treatment, they use those minor children, mostly girls. They give them for marriage to men so as to survive, or they take her to sell, that is making her do sexual intercourse in exchange for money' (Congolese, male, 17 years).

'I know one person who sends his child to go and collect empty bottles. If a child comes back with some money, they use it for their supper, if this child does not collect, they do not eat that

night ... if a child goes there and collects someone's bottles he can even be beaten, but still the next day they will send him again, the life is pushing the parent to do so' (Congolese, male, 45 years).

Some parents, respondents said, were so disturbed by their problems that they were not able to effectively protect their children.

'It's very rare to see a parent in this community who cares about his/her children, because also parents are there with their problems of which they need to find immediate solution' (Congolese, male, 16 years).

However, in the overwhelming majority of cases, both young and adult respondents emphasised the central role played by parents in both preventing and responding to child protection issues, and the distress experienced by parents who were unable to protect their children effectively.

Community Systems: Congolese

The community child protection systems in the Congolese community focused mainly around the churches, which were highly structured and very organised. This does not mean, however, that the informal system of family, friends and neighbours was not relevant; in fact it played a crucial role in obtaining advice and guidance, as well as practical and financial support.

Friends and relatives

The advice given by friends, relatives and neighbours was said to be both moral support, and information about organisations which might be able to assist. When respondents talked about the community offering advice in relation to child protection concerns, however, they often used the term 'just advice', implying that this was seen to be insufficient by some.

'These are old refugees who normally tell us about the NGOs in place that help refugees, they can even tell you that it's where we always go when we are in trouble, and they enumerate those NGOs for you' (Congolese, group discussion, female, 24-55).

'[The community] gathers [children] together and gives them advice. It shows them that it is an unplanned situation because parents never thought that one day they will be refugees, it suddenly happened because of war, so the community advises them to behave well and get used to the life their parents can offer them, there is no need to follow the shortcut ways to get money because they can get spoiled and can't reach far; being a refugee is temporary, may be you can go back in your country when it is stabilised or become Ugandan by naturalisation. God can bless you no matter where you are. The community always gives them the advice and consolation that it is never too late to study and some children are positively changing slowly' (Congolese, female, 17 years).

Sometimes children talked to friends or neighbours about their problems, and also received advice, but there were concerns expressed by respondents that in some cases the advice the child received might not be good, depending on who they talked to.

'There are friends who give good advices and those who give bad advices. If she meets good friends, she will be okay but in case she meets bad ones she will destroy her life' (Congolese, group discussion, female, 25-55).

In some cases, neighbours and relatives advocated for a child with their parents, in an attempt to prevent or respond to a harmful situation. For example, where parents beat a child, a neighbour, friend or relative may speak to the parents on behalf of the child, and persuade them to stop beating; or if a child was thrown out of the home by the parents, a similar type of advocacy might take place.

Neighbours seemed to play a particularly important role in relation to children living apart from their parents. Respondents said that very often these children would approach trusted neighbours if they experienced a problem.

Relatives sometimes provided financial assistance, for example to enable a child to continue with their education. Relatives, but also friends and neighbours, provided practical help in situations such as a child getting lost or helped out temporarily with shelter either for some of the children in a family, or for the whole family.

'I have already seen that there was a woman who had two children, one did a wrong thing and she beat him up. After beating him up, she told him to wash the kitchen utensils and that child refused. That woman was very angry and she told the child to find himself where to eat the supper and where to sleep. That child begged her for forgiveness but she refused and made that child to sleep outside, but the neighbour offered him a shelter' (Congolese, female, 17 years).

Churches

The churches were central to community based child protection in the Congolese refugee community, and many churches were organised into associations which provided practical support to refugees.

'The church and BARA association⁸ are in charge of refugee issues. We created BARA as a wing that is in charge of church member refugees. Whoever refugee we receive or church member refugee who has an issue, the issue should be brought to the church administration and we see how to help. If they need anything, they should bring the report to the church. If a child is sick and the parents are unable to get transport to take him to Mulago Hospital⁹, the association goes to InterAid Uganda, they give them the car and then they come to pick the child to take him to the hospital. Or they take him to KCC to get treatments. This association is in charge of all that' (Key informant, Senior pastor of Congolese church).

Several respondents referred to the church as 'like family', and for children living without their parents, in particular, the churches provided a crucial safety net in terms of practical support.

'When you don't have parents but you are in a family like everyone here, what encourages me is when I enter in church. Because it is a church which gives you another family where you live. The family from the church or other people who can take care of you' (Congolese, group discussion, male, 15-17).

'Pastors refer children to foster care families ... if you are very young they refer you to a family and they try to trace your relatives, and they also take you to police for registration' (Congolese, group discussion, male, 14-17).

The churches offered the traditional 'spiritual' activities of teaching and prayer, which some respondents said were helpful in themselves, especially for children at risk of becoming involved in harmful activities which went against the teaching of the church (e.g. stealing, prostitution).

[How do you protect the boys in your community?] 'There is a youth group. They always meet. And they are more centred on the teachings of Jesus Christ. If they listen to the Gospel, they change. We hear them saying 'I am no longer a person of the world, I have been saved'. They change and we see them changing because we see their way of living changing. If they used to smoke, we see them stop smoking, if he used to come late at 10pm, we see them coming earlier. They always hold their Bibles. This gives the parents hope and the love that would have broken rebuilds once again' (Congolese, male, 46 years).

⁸ Born Again Refugee Association

⁹ The government hospital in Kampala, which offers free services

[What do families do to help an 11 year boy who is in drugs?] Families will help him with advice, and also will bring him to church so that they pray for him. Especially us Congolese, we do believe in prayer, we will bring him to church so that all the evil spirits comes out from him. Parents will be also praying for him and the child himself must confess and open his heart so that God can take place in him' (Congolese, female, 55 years).

In addition to spiritual teaching, churches also offered advice and guidance to children and young people who were experiencing challenges, and were believed to be in danger of becoming involved in harmful activities. Opinions varied about the effectiveness of such advice.

'They call [children who are involved in drug and alcohol use] and start giving them advice and counselling and tell them to stop such behaviour ... some pretend that they stop but not really' (Congolese, female, 14 years).

Churches – practical support

They also offered activities to keep children busy when they were not able to go to school. However, in addition, many churches had organised systems of practical support to prevent children being exposed to risks. In particular, they offered shelter (either in the church or with church families) for children at risk of sleeping on the streets, and they offered financial assistance to families who were unable to cope. The financial assistance can be seen as a child protection response, since it prevented children being exposed to the risks associated with child labour and, in some cases, enabled children to continue attending school.

'We often go to the church, because we cannot sleep hungry when the church is available. When you don't attend Sunday service, the church member will automatically know that there is a problem, they will come and check on you at home. If you have a problem they can give you some small money for eating' (Congolese, group discussion, female, 15-35).

'What we do for orphans and widows is that we created a Sunday offertory for orphans and widows when we realised we had no capacity. At the end of the month we look at what we have got, we call them and distribute to them little money to each to go and buy clothes or soap or beans. If we realise much money, we buy them clothes. That is how we keep those orphans and widows. The money that we get cannot pay for them school fees, and we do not have any external funding to take them to school. We organise from within to see how we can assist from our offertories' (Key informant, Senior pastor of Congolese church).

In addition to direct financial assistance, many church organisations had established savings and loans groups, particularly for women, to help them to set up small businesses and other income-generating activities.

'We do some rotating savings; we make groups of rotating savings. If we spot someone who has no means, we include her in the group. They start contributing 20,000 Ugandan shillings each every month, which makes a total of 200,000 shillings. This money is first given to the person who came and has not enough means, so as she can start a small business and get a small house where to stay. For those who have improved, they contribute 20,000 shillings every week' (Key informant, Senior pastor of Congolese church).

Provision of shelter, especially for children living without parents, was very common and was especially valued. However, it was recognised that the church was performing this function only because nobody else was, and was not able to provide the proper care and supervision for children sleeping in the church. The research team heard of cases where girls were raped by boys, as both sexes slept in the same church hall.

'We sleep in at the church because we have nowhere to sleep. Instead of becoming street children I better sleep in the church' (Congolese, male, 20 years).

Churches – activities

Many church organisations provided English language classes for Congolese refugee children (e.g. Solidarity, JSS, PADEAP, Bondeko Centre, Yarid).

'We had the offices like JRS, InterAid Uganda and Law project, those ones who started to help people to study English. But in the communities there are churches, and that is where people are studying nowadays' (Congolese, male, 16 years).

For older children (13 and above) skills training was also offered by church organisations. These skills were mainly vocational, and included hairdressing ('saloon'), computers, tailoring, catering. In addition to keeping the young people who were out of school busy during the daytime, it also enabled them to earn some income through working. This was believed to prevent girls from becoming involved in prostitution.

'The community is helping your children by training them to get some skills like football, tailoring and computer. They tell them that instead of wandering here and there, to go and learn what will help them' (Congolese, female, 46 years).

'I came here to Yarid to study, I don't pay any single coin and I'm not going to pay, because they are still caring about me ... I've come to learn computer and I could not think that in this situation of a refugee, me a refugee child, could get this opportunity to learn a computer but through them I have learnt' (Congolese, male, 16 years).

Churches - advocacy

Church associations also became involved in advocating for members who required representation (e.g. when a child has been arrested), or sometimes advocating for a child with his or her parents (e.g. when the child has been thrown out of the home), or mediating between families when there was a problem with the children.

'In case they put refugee in prison we are in our community (BARA community). The community will inform other refugees and we collect money together and help him to come out of prison ... they normally discuss with the police until they release them' (Congolese, female, 18 years).

'When a child is beaten, the parent reports to the church. We make sure we go to see the person who beat him. We listen to them to find out what the child stole, and if he stole why had they not looked for his parents instead of beating him? ... We always make sure they reconcile, we tell them to forgive each other because we do not want to go to court. We tell them that when people are living together, it is not good to go accusing each other. Thus we reconcile them' (Key informant, Senior pastor of Congolese church).

[When a child is being overworked at home] we talk to the parent, to show him that the child is not supposed to do heavy work. Sometimes a child of around twelve years old is sent to fetch water and wash the parents' clothes. We tell the parents that a child is supposed to be brought up properly, he is not supposed to do work for adults, instead adults are supposed to work for children' (Key informant, pastor of Congolese church).

The church would also connect children and families who needed additional support to the appropriate organisations, and often accompanied the person to make sure they saw the correct person and explained their issue clearly.

'When a child has been abandoned, we look for other organisations that can help him if we do not have the capacity' (Key informant, pastor of Congolese church).

'Whenever the new refugee comes, if he or she comes here at the church ... he or she will come to know that there is an association that cares about refugees ... If they maybe have come with children, we have a book in which they do write the name of the children ... there are some people who guide him or her how to join the ongoing children's programme ... then he or she will be told that there are free schools here for refugees, in which children can learn the

languages and so on. That's when he or she can enrol his or her children to these training schools, either here, at JRS or other training schools. That's how things are supposed to be, this is someone guided by the association' (Key informants, Congolese CPEC members).

Weaknesses of CBCPMs in Congolese community

Whilst it was clear that the churches in the Congolese community were providing a valuable service, and making every effort in difficult circumstances to assist children, we must also acknowledge that they had not been able to reach everyone, and were working within significant constraints. A number of respondents said that the community was doing 'nothing' to assist children who were out of school, or getting involved in behaviours such as stealing and prostitution. This was mainly because the community was unable to provide the financial assistance believed to be required to address these issues.

'I have never seen any protection for orphans, because the community always shows you that they have not yet got any funding or any assistance that can make them help the orphan' (Congolese, male, 16 years).

'The community, I really do not know whether they intervene in any refugee's problem, I've never heard on how the community can help refugees, really I have never heard about that' (Congolese, male, 17 years).

Although many Congolese refugees were involved with the churches and the church organisations, those who were not were excluded from the assistance the community might be able to offer them. A number of respondents said that they were not aware of the services available for children in their community.

'The refugee community, I have spent long time without going there. They also used to talk about [child labour] so much, and mostly to see how they can help children. But when I use to go to the meeting, they used to show us that they had not yet got any funds to see how they can help children, and I do not know where the office is now' (Congolese, male, 16 years).

Community Systems: Somali

Community child protection mechanisms within the Somali community consisted less of associations and more of a system of relatives and clan members. The research team heard consistently that there were no local organisations within the Somali community, but the family and religious networks are strong.

'There is no NGO in the community. People have intra-community mobilisation which enables them to share information and keep track on their children's activities. When friends and neighbours meet in the community they ask other things like 'why did you let your children in the streets?', 'your children don't come to the mosque, they don't pray, aren't you aware of your children's whereabouts?', 'What is wrong with your children? Are they free children?' There is no NGO, people educate among themselves on the things which affect their children' (Somali, male, 48 years).

Relatives

Relatives might contribute financially (although this was said to be limited), or help to resolve conflicts or difficulties involving children which occur within the family.

'[In cases of conflict within the family] The child will go to relatives. When the family fights separation comes and children, because of hatred, they will abandon the place. When the child goes to the relatives, they will try to come to the family, try to bring them together solve the problem for the sake of the children' (Somali, group discussion, male, 18-52).

It should be noted, however, that relatives were also seen as the cause of child protection issues in some cases. This was usually the case where a child had lost his or her parents, and was placed with relatives who mistreated or neglected the child. Where relatives were unable to solve the issue, they referred to community leaders.

Community leaders

The Somali chairman and vice-chairman were not refugees, but dealt with all issues affecting Somalis in Kampala. Respondents said that the issues they tended to deal with were mainly fights, insults and discrimination. In general, the Somali community preferred to manage disputes and problems internally, and were reluctant to report to the official Ugandan authorities, such as the police.

'If Somalis fight among themselves it is wrong for them to go to police for solution. They have to find reconciliation by themselves. They have to sit down to seek for arbitration' (Somali, male, 14 years).

'Somalis have tradition and they manage their issues internally ... in every village there is an elder person who is responsible to what happens in that village. If a problem occurs they'll ask, where is the elder? If the elder cannot handle the given issue then who are the leaders of the community so the Somali community leaders will have to solve the issue. If the issue is too complicated then it goes to the police and government direction' (Key informant, Somali CPEC member).

Religious leaders

The religious leaders and religious structures played a key role in community leadership, and in responding to child protection issues. The religious leaders both prevented and responded to child protection issues through the teaching they gave in the mosque. Children who attended the mosque, prayed regularly and listened to the teaching of the religious leaders were said to be protected from becoming involved in harmful activities. Religious leaders also became involved in mediating disputes and in rape cases, although their focus was to minimise the shame associated with the situation and avoid conflict between the two families involved, which did not necessarily result in the child's best interests being served.

'[In the case of rape] if they tell the imam of the Mosque he may mediate the two families and tell them what is good. If the family which committed the rape accepts, it is fine, but if they reject he may try to help them his own way. He will collect money from the worshippers at the mosque ... he shares the problem to the people who performing the prayer, he collects some money and gives that family to cure their daughter. If the girl gets pregnant and the guilty man is found they give him the girl to marry legally. But the marriage is not good for the girl and it brings problems' (Somali, female, 13 years).

The religious institutions were said to be able to offer financial assistance to families whose children had been in accidents or were otherwise physically harmed, to enable them to pay for the treatment their children needed.

'The religious groups are good people. For example if a child has been hurt and is in hospital, the religious groups collect contribution to help cover the child's medical bills' (Somali, male, 14 years).

Community members

The research team heard from some respondents that in the Somali community, people have a cultural and religious obligation to help others.

'The Somalis' religion is different from others. Those who are Muslims help one another. If someone has got a problem his neighbour for example will not sit and watch the others problem; they will endeavour to do something with their neighbours' lives. The Somalis help

each other as far as they can. If one neighbour doesn't have food the other gives them' (Somali, male, 48 years).

This could include contributing money to assist a child in need, advocating for a child with NGOs, police or employers, or meeting to discuss issues which are affecting a child in the community.

'A small child who is subjected to too much work, exceeding work where he is not paid according to his input, the community can do something if they discover this problem ... the Somali usually help in such a case. They can look for a better work for him in another place and remove him from sensitive acts. They may also go to the employer and advise and caution him he should not treat children that way and ask him to change' (Somali, male, 25 years).

'Most of the Somalis are busy on their other affairs but when a problem occurs they come together and give a hand. They can contribute something to cover the problem or they can seek help from other groups' (Somali, male, 25 years).

However, it was noted by some that the help offered, especially financial assistance, was limited. A significant proportion of the people spoken to said that the community did not help at all in cases relating to children's welfare, partly because everybody was busy taking care of their own families needs, and partly because all refugees were struggling to survive so were unable to help others.

'Communities do not do that much to help others, because they might not be able to help, all communities are refugees and don't have power or money to provide help and if this happens, it happens once, it doesn't happen every day' (Somali, group discussion, female, 18-50 years).

'I have never seen a place where Somalis community, religious leaders and families come together and talk about discrimination or anything which affects our children's safety and life' (Somali, group discussion, female, 18-50 years).

Weaknesses in CBCPMs in the Somali community

It was acknowledged by many that there were certain children who were unable to access the help offered by the community, especially children who had been rejected by their families, who had no families, or were from minority clans.

'If something happens to you like rape, what they say is 'where is her family? Who cares about a girl who is alone and moving around with nobody?' That is why they don't help us, they don't care. Somali people, if you are alone and you don't have parents and your tribe is the smallest one, people will look down and you are nobody but trash. You expect them to help you but instead they will insult you' (Somali, female, 15 years).

The community support system was acknowledged to have weaknesses even for those it supported. Whilst it was very strong when it came to dealing with problems within the Somali community, it was unable to deal with problems where the perpetrator was a Ugandan. In these situations, the system fell down, and since the Somali community was reluctant to engage with statutory services such as the police, it meant that children abused by a Ugandan were not protected by their community.

'If something happened between the Somali people ... the community report to the religious leaders and they might intervene in the situation and handle it. But if the issue is out of the community they don't intervene mostly ... The reason is we are different culture and we don't know their culture of this local people, we think that what will happen next if you do something to your child? Even you when you go out of your house or send your child to school, people are scared behind and the person afraid behind cannot take any action to help his or her child if something happened to them. And in the communities, elders or religious leaders handle the issues between the communities because people know each other and respect clan leaders, but these people [Ugandans] we don't know them' (Somali, group discussion, female, 18-50 years).

Some respondents said that the Somali community leadership was reactive when it came to dealing with child protection issues, and did not try to prevent problems occurring.

'There is no organised Somali community in Kampala and there is no educating of the members. Every mother is inside the room she entered the day she came to Kampala. There are no people who walk among the refugee community to educate them' (Somali, male, 48 years).

Government Child Protection Systems

The government child protection mechanisms discussed were the Office of the Prime Minister, the Local Council officers, and the Police. Although no respondent mentioned Probation and Social Workers, their role is also discussed here.

OFFICE OF THE PRIME MINISTER (OPM)

All new refugees in Kampala are required to report to OPM for registration. However they are not entitled to any further support outside the settlements, except in a life-or-death situation.

Some respondents, both Congolese and Somali, said that they would sometimes approach OPM for help with problems (e.g. a lost or kidnapped child) but would usually be referred to InterAid Uganda. There was considerable confusion amongst refugees about the role of OPM.

LOCAL COUNCIL (LC1)

A Local Council (LC) is a form of locally elected government within the districts of Uganda. There are five levels of Local Councils. The lowest level is the Local Council I (LC1), which is responsible for a village or, in the case of towns or cities, a neighbourhood. Each Local Council has a certain number of identical positions, such as Chairman, Vice-Chairman, including a vice-chairperson responsible for children's welfare.

In general, Congolese refugees went to the LC1 only when community systems had failed or when they wanted to report to the police. This was usually in rape cases, or early pregnancy, where the parent wanted the perpetrator brought to account. Somalis very rarely used the formal government systems to respond to child protection issues, as already discussed, so had little contact with the LC1. Most of the Somali respondents had no experience of, or opinion about, their LC.

A complainant must report to the LC1 before reporting to the police; the LC1 will give the complainant a referral letter to take to the police. The LC1 (sometimes referred to as the 'chairman') is effectively, therefore, the gatekeeper to the criminal justice system. In some cases, this system worked effectively, but in others respondents said that the LC1 refused to forward their case to the police.

'[In the case of rape] you take the matter to the chairman, when he only hears that you're Congolese, he'll be the first person to block that matter, he does not want to follow it up and in that case there is no way you can even go to report to police, so the story wears off there' (Congolese, group discussion, female, 25-45).

In cases of early pregnancy, the LC1 would typically mediate between the two families to try to find a solution that both would be satisfied with (e.g. the boy's family pays the medical bills associated with the pregnancy). Respondents said that even in rape cases, the LC1 would sometimes try to mediate, rather than reporting to the police, especially where the perpetrator was a Ugandan.

'[When a child has been raped] we report to the LC1. The LC1 calls the perpetrator's family but when they are Ugandans they try to convince and end the matter there by giving some money. ... Usually, the chairman tries to make sure it ends there, because if he sends the case to police he fears the case will go further ... he just calls the two families. The other family requests to end the matter there by giving some little money and he accepts. That is all' (Congolese, male, 30 years).

The team heard about some LC1s who involved themselves in the general welfare of people living in their area, and dealt with issues fairly, without discrimination. Some would call meetings of people in their area to warn against discrimination and intolerance. However, the team also heard numerous examples of LC1 officers who were prejudiced against refugees, and refused to assist them.

'The parents go to report [sexual harassment of their daughters] to the LCs, chairman but he doesn't care, he says that refugees always look for insecurity' (Congolese, female, 14 years)

The team heard similar reports from key informants in NGOs working with refugees in Kampala.

'The LC and police have bad attitudes to refugees. They see them as immigrants, not belonging, they think they have money. They won't support refugees over Ugandans. For example, if a refugee child is defiled, the family need money first for the LC, then for the police, and often they will be told 'why are you making a Ugandan to get arrested? This is my fellow countryman, what do you expect me to do?' They don't listen to refugees, they have the attitude that refugees are ill-mannered' (Key informant, Refugee-assisting organisation).

Some of these attitudes were also evident in our discussions with LC representatives for this research.

'You also know how these people behave, their rude and inhuman character, especially the Sudanese, disorients our people here and propels them to at times ignore rendering services to them' (Key informant, LC).

Other respondents believed the problem was not discrimination as such, but corruption, in that a Congolese who could pay money would be assisted, in the same way as a Ugandan who could pay money would be assisted. The fact that very few Congolese were in a position to pay for services meant that they rarely received a satisfactory result. Some said that Ugandans were better able to make the system work for them, because they were able to communicate in the local language, and there was a common nationality between them and the LC1.

'Whenever your child is being raped, you normally go to the LC1 and report the matter, and the LC1 tells you that he or she is going to investigate, go home and wait till the investigation is done. And now while you are waiting for the result of their investigation, you will realise that time is moving fast, and the matter can get expired if time goes. Now what happens is that you will wait until the matter expires, and you won't get any feedback regarding that, and the file gets closed just like that. This means that whenever this happens, these people from here talk to their fellow brother and solve the matter both together, while you a complainer was not there. That's why I am telling you that we are being taken like nothing, we have nothing to tell, it means that we have no word in this country' (Congolese, male, 32 years).

Many respondents said it was pointless to report to LC1 officers, since they would not pursue your case and generally, neither Congolese nor Somali refugees felt that their children were protected by the LC1.

'We know the LC is not doing anything, so we are afraid that if we report the issue and those people heard, they will find my child outside and they will kill him' (Somali, group discussion, female, 18-50).

POLICE

Many of the issues discussed in relation to the LC1 also applied to the police. Again, the Somali community tended not to involve the police in their issues. The Congolese were more ready to report cases to the police, especially where a child had been raped or kidnapped. The police would take children who had been raped to the hospital for treatment, and would investigate the claims. They would also refer the child and her parents or caregivers to InterAid Uganda or other

organisations for further assistance. The research team heard good accounts of this referral system, and the police seemed to play an important role in connecting refugees to other agencies.

'When you are raped, you may get pregnant, and when you get pregnant you go to police, police sends you to OPM. OPM helps you and refers you to InterAid Uganda' (Congolese, group discussion, female, 14-18 years).

However, there was less satisfaction with the response of the police to the offence itself. Several respondents gave accounts of refugees reporting a case affecting their child to the police, but not seeing any action being taken. In cases of lost children, the police were said by some to assist, although they usually required payment from the parents when the child was found. In other types of cases, the research team heard that the police would mediate between families, or warn the perpetrator, and that this was sometimes satisfactory to the injured party. In cases which required an arrest, the outcome tended to be less satisfactory. In many cases, the perpetrator was not found, and when he was, he was often jailed for a very short time, or not at all, because he was able to bribe the police.

'There is a problem here in Kampala you will never win a case in Uganda. They can arrest the boy and you will see that after 2 months he will be out walking freely' (Congolese, female, 17 years).

As with the LC1s, the research team heard accounts of discrimination and prejudice against refugees. In some cases, this was direct prejudice against refugees.

'There is no assistance they get from the police because there are those who go to report that they were raped and the police send them ... with discouraging words that 'you Congolese always tell lies, you go out there and get yourselves raped in order to go and lie so that they can take you to Europe'' (Congolese, female, 38 years).

In other cases, it was that the police supported their fellow Ugandans whenever a case involved both a Ugandan and a refugee. Ugandans were also said to have the advantage of speaking the same language as the police, and having connections which could help them. For all these reasons, many respondents said that they were unlikely to receive any positive outcome from reporting a case to the police.

'I think that those police are failing to work on those cases because they are also Ugandans, and the suspect is also a Ugandan, now to cover that shame they opt to keep quiet till you will get tired, that's what happens and it is really challenging' (Congolese, male, 34 years).

'[When a child was raped] we were going to the police but now, we are tired because even the police is protecting Ugandans, us we don't have value' (Congolese, female, 17 years).

Corruption was an issue raised by some respondents, who said that unless they were in a position to give the police some money, they would not receive any assistance. Refugees without papers to verify their refugee status felt particularly vulnerable. In criminal cases, a police report is necessary for the case to progress, or for refugees to get legal assistance from elsewhere, so a lack of money to 'pay for' the police report could prevent them from accessing other services.

'The police will ask you for money and as long as you don't have that police report and you try to go in our offices, for example at InterAid Uganda, you explain verbally but they also tell you that they can't assist you without that police report. So now we are blocked somewhere because to get that police report they ask for money and there is no real assistance you can get. You just sit down, you don't know where to run to' (Congolese, group discussion, female, 28-45 years).

Respondents views of the police were not entirely negative; some recognised that there is variation within the organisation and some officers could be very helpful to refugees, and others felt that in terms of the general security of refugees, the police had done a good job.

'Some of police work is good and some of their work is bad. So you find that even among police officers there are some that are wrong. There are some police officers who cannot serve you for free. And sometimes when they find that your case is very strong and can put his Ugandan fellow in big trouble then they make sure it ends at police without going further. That is what is happening. If you report to a good police officer, he can serve you well and if you report to a bad police officer then he will not satisfy you. It depends on their heart' (Congolese, male, 16 years).

Overall, the police were not perceived to be helpful in terms of responding directly to child protection issues, but were more effective in referring refugees to other organisations who would be able to assist with non-legal issues.

PROBATION AND SOCIAL WELFARE OFFICERS

These officers, who work under local government in districts, are responsible for issues relating to children's welfare. They work for the protection of children, and coordinate and advocate with local leaders, police, service providers and NGOs. They offer advice and mediation, and forward cases to the Magistrate's Court where necessary. None of the Congolese or Somali refugees spoken to mentioned these offices, or said that they were among those offices approached regarding child protection issues. The research team heard from one key informant that although the Probation and Social Welfare Officers were established following the 2006 Children's Act, which theoretically applies to both refugee and national children, in practice a lot of their funding comes from UNICEF, which specifies that it is for nationals only, so these Officers do not provide services to refugee children. When they come across refugee children in need of assistance, they refer to refugee-assisting organisations such as InterAid Uganda and HIAS.

Non-Governmental Organisations

A wide variety of non-governmental organisations (NGOs) were mentioned by respondents as being involved in child protection for refugees in Kampala. These include the African Centre for the Treatment and Rehabilitation of Torture Victims (ACTV); Hebrew Immigration Advisory Service (HIAS); InterAid Uganda; Jesuit Refugee Service (JRS); Refugee Law Project (RLP); Soccer without Borders; and United Nations High Commissioner for Refugees (UNHCR). These organisations provide a wide variety of services, but those which were discussed most in relation to child protection issues were InterAid Uganda, the Refugee Law Project and UNHCR. Therefore, the role of these three organisations in the child protection system for urban refugees in Kampala will be discussed below.

It should be noted that there was considerable confusion amongst refugees between the different organisations; sometimes when they talked about the services offered by a particular organisation, it became clear that they were actually referring to a different one.

INTERAID UGANDA

Although respondents tended to list a whole range of offices they approached for help in child protection cases (e.g. InterAid Uganda, HIAS, JRS, Refugee Law Project, OPM), when they were asked which one people typically approached, they almost always said InterAid Uganda. InterAid Uganda was seen by refugees in Kampala as the key agency offering assistance. They were usually referred when they registered with the police on arrival in Kampala, or by other refugees who had been in the city longer and were familiar with the various sources of help.

InterAid Uganda provides both direct and indirect services in the field of child protection. Indirect services include advocacy and lobbying with government bodies; participation in various child protection forums established by the National Council for Children; material support to schools to make them safer environments; advocacy with schools to obtain agreements that refugees can negotiate flexible payment plans; and raising awareness of child protection and education issues with parents. Direct services include working with Uganda Red Cross and International Committee

of the Red Cross to undertake family tracing for separated and unaccompanied children, as well as finding foster families for such children and monitoring their welfare; providing livelihood support to parents to enable them to earn money to send their children to school; ensuring that child protection cases reported to the police are attended to; and undertaking best interests assessments in cases where children are at risk, then participating in a best interest determination process with UNHCR.

Assistance accessing medical care

InterAid Uganda provides medical assistance to refugee children, including when they are raped or beaten. This service was well-known and well-used by refugees. It was greatly appreciated by most, although it was sometimes seen as insufficient, especially in rape cases.

Even myself, when it rains on me out there as I am looking for the scraps, and I get fever, I go to InterAid Uganda. They make for me some papers, I take them to the hospital, the hospital gives me some tablets and then I go back to InterAid Uganda. InterAid Uganda pays. I use the tablets and they do help me' (Congolese, male, 16 years).

'There are clients you see and you are discharging them, but they can't manage to afford the hospital bill. But they tell you, 'give me the medical form, I go to InterAid Uganda so that they give me the treatment' and then you give them the medical form, they go and get their treatment at InterAid Uganda. I think it is really effective and it is really helping the refugees' (Key informant, Ugandan doctor working with Congolese refugees).

'A 14 year girl was taking a bath and a 25 year old Ugandan boy entered inside the bathroom and raped her. By bad luck this young girl became pregnant ... We took the issue at InterAid Uganda, they told her to go and give birth at Mulago [government hospital] and she did not receive another help. This is what to be a refugee' (Congolese, female, 18 years).

Assistance accessing formal education

As described elsewhere in this report, the priority child protection concern for urban refugees in Kampala is a lack of access to formal education. InterAid Uganda was perceived to be one of the few organisations able to assist refugee children to gain access to schools. Counsellors direct refugees to schools within the UPE programme, where refugees can pay the costs in instalments. InterAid Uganda also pays part of the costs in some cases, and parents must pay the balance. Whilst some parents were happy with this assistance, what most respondents said they wanted was for InterAid Uganda to fund their children's education totally, and when this was not possible, they were disappointed and disillusioned.

'They tell you "bring only one" when you have six children. Imagine they only take one to school. And sometimes very far away school. You have to take the child from Nsambya to Katwe. They pay only one term, the second term will never be paid, then you wonder whether that is assistance or not. You better leave them at home' (Congolese, group discussion, female, 45-60 years).

'Some parents go to NGO like InterAid Uganda to explain that they cannot afford to take their children to school. InterAid Uganda has connection with government schools so they direct the parents to go to those schools where the children can learn freely. If the family has four or five children, two children can benefit from this. This is assistance is available but many parents do not have the awareness' (Somali, group discussion, male, 18-52 years).

InterAid Uganda support for refugee education is not primarily focused on individual cases but on support for schools. Respondents (other than the key informants) were not generally aware of the other work InterAid Uganda does to protect children through the educational system. For example, teachers appreciated the workshops given by InterAid Uganda on positive discipline, and the material support to schools (e.g. text books, water tank).

Assistance in dealing with the criminal justice system

Some respondents had been helped by InterAid Uganda lawyers when they had reported cases of assault or rape of refugee children to the police. They said these lawyers helped to follow up the cases, but they had rarely seen any positive outcome.

'[When a child is raped] lawyer will come in the area where the incident took place, will inquire from neighbours and the chairman. If it requires going to the police station where you reported, the lawyer goes there ... they then find out how to protect the child according to the child's circumstances ... We follow all those steps but at the end they keep quiet ... there is no more follow up' (Congolese, group discussion, female, 45-60 years).

Those who had received help from InterAid Uganda lawyers when a refugee child had been arrested were more satisfied.

'Most of the time, you will see that the lawyer will succeed to bring the child out of prison' (Congolese, female, 27 years).

Financial assistance

The majority of refugees wanted financial assistance from InterAid Uganda, and were frustrated and disappointed when they did not receive it. Some respondents talked about receiving limited financial assistance, for example to help with rent payments. These people were very satisfied, despite the fact that the help was limited, because it gave them an opportunity to try to get back on track.

'They normally go at InterAid Uganda and beg them to assist them because they were expelled from the house by the landlord. So InterAid Uganda assist them with money to pay for the next three months, but that does not continue because there are so many refugees who are in the same need of money for rent ... [The parents] pay for the rent and live the normal life with their children, and meanwhile they look for any job so that next time they'll pay the rent any time and avoid to go through the same situation of spending the night outside' (Congolese, female, 15 years).

InterAid Uganda sometimes gave financial assistance to help refugees to start businesses in order to send their children to school, although funding constraints limited the extent to which they were able to offer this assistance.

Counselling and advice

The main way in which refugees said they were assisted by InterAid Uganda in cases affecting children was through receiving counselling and advice. Some found this helpful, especially when it involved practical guidance, and directing them to other organisations that might be able to assist.

'Even a piece of advice is great assistance, the counselling how to deal with the situation is also an assistance, that is according to what I know' (Congolese, female, 16 years).

'It helps to direct because when a person reaches in a place where he doesn't know anybody, InterAid Uganda is the one standing there, and tells him that they look for a house like this, and give him information in respect of places' (Congolese, male, 26 years).

However, in other cases the counselling was seen as less helpful, especially when refugees had been in Kampala for a while, had already tried all the obvious options, and were coming to InterAid Uganda as a last resort. In these cases, the counsellor was left with few alternatives; when it was not possible to provide the financial assistance the refugee really wants, the only other option was to suggest they move to one of the settlements in order to receive services. Refugees became particularly frustrated when they received advice on how to protect their children which was either not possible (e.g. find a job) or obvious (e.g. try to stay on good terms with your neighbours; do not allow your children to walk around the neighbourhood late at night).

'When a parent normally reaches that extent of going to counsellors it means that he or she has tried different alternative but unfortunately failed ... When going back with the counselling being given to you, you normally do not get satisfied' (Congolese, group discussion, female, 24-55).

'When we go there they only give us a counsellor to only counsel us when you have insecurity problems. That is all, but nothing else. How can you preach me words without food or any other thing else?' (Congolese, male, 20 years).

'He or she will either tell you to go and look for a way to send your child back to school or to go to the camp' (Congolese, group discussion, female, 35-60 years).

Counselling for refugee children was seen more positively, particularly the children's group activities and the counselling for children who were engaging in harmful activities (e.g. drug use, prostitution).

'InterAid Uganda really helps us with counselling children. InterAid Uganda through the children's counsellor helps the teenagers, this counsellor shows them the true force of what they are going through, she shows them the right and wrong effects of their actions and when children come back they are very enthusiastic about what they learned at InterAid Uganda' (Congolese, female, 38 years).

Lack of access and lack of satisfactory response

Perhaps the main area of frustration in relation to InterAid Uganda was what respondents perceived as being ignored by counsellors, or their issues not being taken seriously.

The research team heard many times that some counsellors did not give appointments, or kept postponing appointments, did not answer the phone when the refugee called them, or told the refugee to 'wait' but never got in touch with a response. Some refugees felt that their concerns were listened to, and recorded in their files, but at the end of the process there was no actual outcome or benefit.

'I have never heard a 'no' from the office. They always say wait. And according to what we know if they say wait, that means 'no'. If they are to respond, they tell you "we shall see" and at least they do something. But if they only say 'wait' then there is nothing' (Congolese, group discussion, male, 17-20 years).

'She is paid for her work because of us. She is supposed to counsel you on what you can do or show interest of finding out ways of helping you. But she just lets you down, she does not come closer to you ... our counsellors do not know the meaning of the word counsellor. I think counsellor is "conseiller" in French. That is an advisor, when I come with my problems to her, I expect her to advise me. I consider her to be superior to me. But when I come and she starts rebuking me, or tells me that she has no time, and then we wonder how that person can be our counsellor' (Congolese, group discussion, female, 25-40).

There was a sense amongst many respondents of total reliance on InterAid Uganda for everything, and frustration because they felt doors were closing in front of them and they were powerless to do anything about it.

'We do not know another pathway to use; they normally show us counsellors, and it's up to him or her to show you other pathways to use, but unfortunately they normally don't do it, he or she will just chase you by giving you back your papers as he or she escorts you till outside the gate' (Congolese, group discussion, female, 24-55).

In many cases, it was impossible for the counsellors to meet the needs of the refugees who came to them; expectations were too high, and resources were limited. We would expect there to be a level of frustration amongst refugees because of this, and it is due mainly, not to the policies or practices of InterAid Uganda, but the policy of the Ugandan Government and UNHCR is that refugees should

only receive services in the settlements. Counsellors sometimes were forced to explain to refugees that refugees in Kampala are expected to take care of themselves and their children, to be self-reliant; that InterAid Uganda does not have funding to pay for the costs of children's education; and that certain services are only available in the settlements. These were very hard messages for refugees to hear, but the InterAid Uganda counsellors had no choice but to convey this information.

The InterAid Uganda counsellors, as front-line workers, were under intense pressure every day from refugees, who came in large numbers to the office with a wide range of very pressing needs. Their work was difficult, and it may be that some of them did not cope well with the pressure. The research team heard some accounts of refugees being abused by counsellors and accused of lying.

'Counsellors are also human beings. If you meet with the good one you can succeed but if you meet the bad one you leave there with your hands broken' (Congolese, female, 52 years).

'We do not get helped even if you talk to counsellor, he or she with his or her bad heart tells you that "I'm not the one who produced these children for you and cannot take care of them at your place." Now if it was you that have been told that, what can you do?' (Congolese, group discussion, female, 35-60 years)

Sometime you go and explain your problem to the counsellor, he will answer you, 'am I the one who told your mother to give birth to you?' I know that my mother had problem because of what she faces in Congo, do you think that I will come back to the same office again? You will see that many times you invite refugee children we will not be coming, because it will just be things which will annoy us, you will look down upon us' (Congolese, group discussion, female, 13-17 years).

'Sometimes you go there with such an issue [rape of a child], instead of them to relieve you they bark at you. I remember a case of one person who got such a problem. When he explained to counsellor, the latter told him to go back because that was not a case to tell him at that time. The counsellor told him 'if you have come with your insecurity, that means you want to go to a third country, and if you are looking to a third country I cannot help you, get a lawyer to help you'. We get annoyed because, imagine when you are in trouble, you go to someone to help you but he does not help you, yet that is the place we are supposed to get help' (Congolese, male, 46 years).

Some refugees no longer approached InterAid Uganda for help because of these issues.

'We usually go to InterAid Uganda. But to get the audience to see the officers is hard. They tell us to come back the next week and when we go there again, postpone to another week. And then you fail to get the time to go back there because you have to look for what children can eat. So we leave it' (Congolese, male, 30 years).

'Normally we do not go back there, because it's kind of repeating one thing several times and when it becomes like that you will just realise that there is something wrong or there is a gap somewhere ... if you go back there again and again you will get tired because you will be telling them the same thing, they will also tell you the same thing' (Congolese, male, 50 years).

'You know, Somali people, when they go there many times and didn't receive anything, they stop going' (Somali, female, 17 years).

Lack of understanding of InterAid Uganda mandate and criteria

As already stated, there was confusion amongst respondents regarding the mandates of the different refugee-assisting organisations in Kampala, including InterAid Uganda, and this led to frustration as people approached InterAid Uganda for help which was not within their mandate, so were turned away. In many cases, the refugees believed that help was available, and they had been refused access to it unfairly. There was a widespread lack of knowledge about what InterAid Uganda does, and a belief that it should be able to help with all issues affecting urban refugees.

The fact that some refugees were given assistance and some were not (e.g. in relation to help with school costs, or rent) led to further confusion and frustration, as the criteria for making these decisions were not known. Whether a particular refugee child received assistance was perceived as random or 'luck'. The lack of clarity contributed to a belief amongst some that the money allocated for refugee assistance was being misused by InterAid Uganda and UNHCR.

'There are always lucky people who get assistance, sometimes you may go there when there is nothing to assist everyone' (Congolese, male, 16 years).

'They can decide to consult any broker or landlord and see the cheaper house for your household, and they will pay a warranty of three months. It is random' (Congolese, group discussion, male, 35-55).

There was particular confusion about what InterAid Uganda offered in terms of assistance to go to school, and the criteria they used for decision-making. Some respondents believed that InterAid Uganda would pay school fees for one year if the child was particularly intelligent; others believed they helped a small proportion of children who required assistance with school fees, but were not sure on what basis; others believed that InterAid Uganda did not help at all with school costs, but would direct refugees to UPE schools.

'They say that they pay school fees for some children but we have never seen children being taken to school, even those who are lame. For us who have taken children there, they are never assisted then they are sent back. We wonder whether they have special people they assist or not' (Congolese, group discussion, male, 16-20 years).

'Let us be sincere, if InterAid Uganda has structures or procedures for the children to go to school, these procedures are not respected' (Congolese, group discussion, male, 35-55).

Some respondents said that InterAid Uganda offered some assistance, but that many refugees were not aware of the system, or not clear about the procedure to follow, which led to them not receiving help.

'After being registered, they must take the school file to the lawyer then the lawyer will follow up with the school fees payment. But without a document they will never call you ... [If] you don't go with the document the lawyer will think that you just need money. Many people go and deceive' (Congolese, group discussion, male, 15-17).

There was a clear contrast between the views of members of the refugee communities, and the views of 'key informant' refugees, such as community leaders, CPEC members, pastors. These leaders had a good understanding of the mandate of the InterAid Uganda, the procedures used to access services, and the constraints InterAid Uganda work under. InterAid Uganda worked closely with refugee organisations, such as the Congolese church organisations, and these relationships seemed to function well. Since the organisations were clear on InterAid Uganda policy and criteria, they were more satisfied with the help they received.

'We decide to collaborate with InterAid Uganda because even when we call InterAid Uganda at night they tell us to come early morning, and when we reach there they receive us and serve us ... InterAid Uganda assists us so much. Sometimes we take a child to hospital, InterAid Uganda pays half of the fees, and we also pay the other half. We go to InterAid Uganda and they do help' (Key informant, community leader, Congolese community).

CHILD PROTECTION AND EDUCATION COMMITTEES

Child Protection and Education Committees (CPEC) were established by InterAid Uganda, in collaboration with refugee leaders, in many of the communities where refugees live in Kampala (currently 28 communities) as a strategy to reach refugees more effectively, and have greater impact. Each CPEC consists of five members, who work as volunteers. Those invited to join were men and women who were active in their community, and able to interact well with their fellow

community members. The committees were still fairly new at the time of this study (established 2011/ 2012), so they were in the process of establishing themselves, and committee members had not yet had the opportunity to participate in much training or capacity building. InterAid Uganda staff held monthly meetings with each CPEC, and these meetings included an element of training.

The main responsibilities of CPECs were to encourage parents to send children to school, to raise awareness within their communities of child protection issues, and to identify any children who need support. In simple cases, they were able to provide the support as a committee, but otherwise they referred the child to InterAid Uganda.

There were some differences between the CPECs the research team heard about in the Somali and Congolese communities. In the Somali communities, the CPECs were very closely linked to InterAid Uganda, relied on them heavily for support and assistance, and were still in the process of establishing relationships with community structures such as religious leaders and schools. The Kasaato CPEC has established good relationships with school teachers and madrasa teachers, and worked closely with some schools. One school in particular had a large population of Somali refugee children, and the teachers consulted the CPEC if there was a problem in the school concerning refugee children, and invited CPEC members to general meetings or parents' meeting. CPEC members addressed these meetings, and used the opportunity to raise awareness on child protection issues. They also had meetings with the school authorities to try to reduce the discrimination experienced by Somali children in school.

When members of the Kasaato CPEC identified children who were at risk in the community, they first met with the individuals involved, then, if necessary, they referred the case to the protection desk at InterAid Uganda. They could also advise parents as to the process to follow to get assistance, and accompany the parent to the relevant office.

The CPECs in the Congolese communities were closely related to the church associations, so linked into many of the children's activities offered by the churches (e.g. sports teams, English classes, weekend play activities). They could refer directly to the church associations for some issues, such as accommodation. They referred criminal cases, such as rape, to the LC1 and police, but engaged directly in mediation where there were problems between Congolese and Ugandan children. The CPEC members talked to children and young people, and to their parents, to offer guidance and advice. They referred some children to the InterAid Uganda child counsellor.

The challenges faced by the Kasaato CPEC included high expectations from the community of material assistance, and rumours within the community that the CPEC were earning money from their work. They were also sometimes told not to interfere when they tried to talk to parents about not overworking their children, or sending both boys and girls to school. CPEC members felt they lacked capacity and experience, especially to deal with sensitive issues in the community. The main challenge mentioned by members of Congolese CPECs was that they were unable to address the underlying cause of many of the risks children were exposed to, which was lack of access to formal education. All CPEC members worked voluntarily, and needed to earn money to provide for their families, so did not always have the time available to devote to CPEC work that they would like. In addition, the cost of airtime and transport could be a challenge.

None of the respondents (other than key informants) talked about CPECs or were aware of their work, perhaps because the CPECs are still new, or, in the Congolese communities, they were indistinguishable from the church associations.

REFUGEE LAW PROJECT

Refugee Law Project (RLP) was one of the organisations referred to frequently by respondents in relation to child protection issues. RLP offers services to all refugees, mainly through self-referrals. It supports through counselling (individual and group); referrals for medical support; legal support

(e.g. cases of custody, or children in conflict with the law). RLP organises child support groups for refugee children, and information sessions with parents.

Respondents particularly appreciated the help of RLP in legal cases, such as when a refugee child had been arrested, or when some advocacy was needed to ensure that the police responded to child protection cases reported by refugees.

'When a child has been raped or has been grabbed her goods, we go and report to police. We take the police reference number to RLP and then they go and advocate for us because they are lawyers, they go and talk to their fellow Ugandans' (Congolese, male, 38 years).

Respondents also said that RLP would assist with medical care for refugee children who had been beaten or raped. However, a lack of understanding about the broader services offered by RLP led to some disappointment and resentment on the part of some respondents, who were expecting financial assistance with school fees or rent.

'I hear that RLP helps but I have never seen anyone who has been helped by RLP' (Congolese, male, 17 years).

'I again approached RLP, but they told me that they do not have a budget for paying people's rent. They just said that they can intervene when there is a legal issue' (Congolese, male, 35 years).

'About the education of our children we wake up very early in the morning at around 4am to go in different office. When we reach at Refugee Law Project they tell us that they don't have any assistance for education. They tell us that they have assistance for those who are in insecurity' (Congolese, female, 38 years).

There was a general confusion over what RLP and other organisations working with refugees were able to offer.

'They are OPM, HIAS, and Law Project. I am not sure whether they help people, I do not know ... There are people who told me that I have to open a file at Law Project, HIAS, OPM. But we go there asking for assistance, we tell them "I am doing nothing here, I have nothing to eat", they say we are not there to assist; we are there to counsel you, and help you with other things' (Congolese, male, 20 years).

UNHCR

UNHCR in Kampala supports activities to enable children to access services; advocacy for children's rights; best interest assessments and best interest determinations; tracing and family reunification (with ICRC and Uganda Red Cross). They will assist individual refugees on a case-by-case basis, through InterAid Uganda (which is their implementing partner). They also support community structures which aim to protect children, such as youth groups.

There was some confusion amongst the refugees spoken to between UNHCR and InterAid Uganda; sometimes respondents said they had been to UNHCR but when they described the interaction in more detail, it was clear that they had actually been to InterAid Uganda.

There was also confusion about the role of UNHCR in relation to child protection concerns, and – perhaps as a result – disappointment at a perceived lack of assistance. UNHCR was seen by some as being ultimately responsible for the welfare of refugees in Kampala, and as failing to fulfil that duty.

'If you are a refugee you have nothing else to do apart from going to UNHCR and expose your problems there. They will know what to do. It depends on them' (Congolese, male, 18 years).

'I can say as we are refugees now this issue is on the responsibility of UNHCR. UNHCR is the one which knows us. How to find food, the place to sleep, UNHCR is the one who knows and it doesn't do that thing ... Our country pays for us to be here ... for each refugee our government

pays five dollars a day. They pay it with reference to the number of your children. We know that our government pays and as we are here we live but we don't eat, they don't give us food' (Congolese, group discussion, male, 28-40 years).

'Why can't UNHCR take children to school? Why can they not build a school for refugee children? Where are the hospitals for refugees?' (Congolese, male, 20 years).

As with InterAid Uganda, the research team heard many complaints that there was 'no response' after reporting a protection concern to UNHCR, or that the response was that the complainant should take their children to the settlements in order to receive services. A key role UNHCR was perceived to play, however, was in organising resettlement for some families. This was perceived to be the ultimate solution to the child protection concerns faced by refugees in Kampala.

'If they realise that you're in danger they refer you to another level where you will get the protection you need ... what they can do is to get for you a third country which will help you. They present your case to that third country; if it accepts the request then they will help you' (Congolese, group discussion, female, 25-45 years).

Linkages Within The Child Protection System

For some aspects of the child protection system for refugees in Kampala, referral pathways were clear. The LC referred to the police, for example, and the police referred to InterAid Uganda and other organisations (e.g. OPM). InterAid Uganda referred to UNHCR, to government clinics and hospitals, to UPE schools, and to other organisations, such as JRS. Inter-referrals took place between InterAid Uganda, UNHCR, JRS, HIAS and RLP, in particular, but also with ACTV and Uganda Red Cross/ ICRC.

Within the Congolese community, church associations connected refugees to organisations, and in the Somali community the chairman was the 'middle man' between the community and refugee-assisting organisations and the government bodies.

The fact that these referral systems existed, though, did not mean that the linkages are clear or that the mandate of each organisation or body was understood by those referring. In fact, the organisations were perceived by some refugees to be in competition, rather than providing a coherent service.

'It is very difficult to have a linkage, because they all do the same work, they are like steps; I am not sure whether there is any linkage. If I am selling this (shows a pen) and you are also selling the same article, I would think that sometime I will not have customers, there may be quarrelling because everyone wants to sell or to get customers. I really don't know if there is that linkage or not' (Congolese, male, 22 years).

Staff of refugee-assisting organisations themselves recognised that more communication was necessary if refugees were to receive appropriate and effective services, with minimal duplication and confusion.

'One organisation can't do much, but if we came together we could do more. Currently refugees go to all organisations, but we don't talk to each other' (Key informant, Refugee-assisting organisation).

Connectors

In discussions with Congolese and Somali respondents, three main 'connectors' existed, through which refugees found out where to go to obtain various services.

- i) Police: when refugees arrive in Kampala, they first go to register with the police. At this stage, they were directed to various organisations and bodies which assist with child protection issues.

- ii) More established refugees: in many cases, we heard that refugees found out where to go to get help in child protection cases through talking to refugees who had been in Kampala for longer, and knew the different sources of help.
- iii) Congolese church communities: the church associations were well organised, and many specifically provided information services to newly arrived refugees. Some church associations had good relationships with refugee-assisting organisations, so gave helpful information on where to find assistance with child protection issues.

'When you arrive and get help from church, they will advise you to go report to the police, and there to police you meet with another refugee who advises you to go to the next office' (Congolese, female, 14 years).

'As refugees, when we reached here we met with other refugees who assisted us to get to know those offices and which assistance we can expect from each one of them. Like nowadays HIAS is helping mothers and counselling of children, all those things we knew them through our fellow refugees, they even introduced us to some churches' (Congolese, female, 38 years).

In the Somali community, the community chairman responded to child protection issues brought forward by individuals, represented the community to NGOs and government, and sought help from offices where necessary.

The CPECs were potentially very powerful connectors, although they were still establishing themselves, so were not yet in a position to perform this function effectively.

Gaps

There seemed to be little direct connection between refugees and schools. The research team heard that most refugees tended not to get involved in parents' committees, for example, perhaps because of language difficulties. Some of the CPECs were trying to address this; a key informant described how their CPEC is providing a link between a primary school and the Somali community. There were some schools which had made attempts to involve refugees; in Katwe Primary school, for example, some refugee parents were part of the PTA, and in Nakivubo Blue there was a refugee parent who linked the school administration to the refugee parents to solve issues related to refugee children in school.

The relationship between Congolese church associations and some organisations (e.g. InterAid Uganda) was strong, but in many aspects of their work, the church organisations were operating independently of the formal child protection system. This led to some concerns. For example, whilst the churches were providing a much-needed safety net in terms of emergency accommodation, some incidents of sexual assault had occurred as a result of unsupervised young people sleeping in church halls. Whilst services provided by registered organisations were subject to certain standards and safeguards, this did not apply to informal organisations, and this could unintentionally expose children to additional risk.

There was no specific co-ordination system for child protection in Kampala, except for the 'best interest determination' panel, which was not attended by some organisations (e.g. JRS). A number of key informants working in refugee-assisting organisations saw a need for a child protection working group to facilitate co-ordination, referrals and a coherent service. There was a sense that some refugee children were not being identified, or were not being assisted, partly because documentation is lacking and partly because there was no formal communication system in which to discuss these cases. Such a forum could also focus on planning and co-ordination, in order to avoid duplication of services.

There were some questions about the role of Probation and Social Workers within the refugee child protection system. These officers were potentially powerful connectors, but they did not provide services to refugee children because these children were perceived as falling within the mandate of

UNHCR and the refugee-assisting organisations, rather than within the mandate of the national child protection system.

Amongst the refugees spoken to, there was considerable confusion about the mandates of different organisations, as already discussed. Increased co-ordination between organisations, and the provision of a more coherent service, would go some way towards reducing the frustration refugees felt at not being able to access the services they require.

'You can now go to InterAid Uganda and get a counsellor, this one will just orient you how to deal with things, he or she can tell you also that here we help in this way, but if you need help in that way, go to that NGO, it is the one that can help you in that way. For example if you need food, he or she will tell you to go to JRS. When you go at JRS, you start telling them your problems. After you've told them, they will tell you that they do not help in that way but InterAid Uganda does. Now you feel very disappointed of what are being told, it is like they have a game that they are playing around. InterAid Uganda sends you to JRS, and JRS sends you back to InterAid Uganda - which path to follow now?' (Congolese, group discussion, female, 24-55 years).

8. THE ROLE OF EDUCATION IN CHILD PROTECTION

There was a consensus amongst respondents that the most effective way to protect refugee children from harm was to send them to school. Respondents identified a number of ways in which schools prevented children from being exposed to harm. The protective factor mentioned most commonly was that while a child was in school, he or she was safe, supervised and, most of all, busy.

'When he or she is studying, he or she is getting wisdom, knowledge and company. He or she will not be able to visit a place which is not appropriate, when a child is at school he or she is in safe hands, like in second family there. There is discipline, education, instruction that makes him or her to be protected ... They are not exposed to the risk of the other things they could have done if he or she was free, like wandering, fighting, to learn to smoke, taking alcohol, they are spared of all this' (Congolese, male, 46 years).

Supervisions and physical safety

When a child was at school, he or she was physically safe, since they were within a fenced compound, so were not exposed to potential road traffic accidents, or to potentially harmful people (e.g. groups of antisocial youths; drug users) who were idle in the neighbourhood.

'He will be protected in this way, that he will never be in touch with people from outside, a corrupted environment which will act on a child's knowledge' (Congolese, male, 17 years).

Many parents worked outside the home, leaving children unsupervised, so a crucial protective factor associated with the school was that the child was supervised by teachers throughout the day. The school rules were in place to further protect the child (e.g. children not allowed to leave the school compound).

'At school, a child has people who protect him or her. He or she is protected by their teachers, because it is the teacher who protects them when a child is at school and wants to go out, the child has to ask for permission or during the break even though this child wants to run away but he or she can't because they are in a fence' (Congolese, male, 35 years).

Time and energy focused on school

Respondents said that children who were in school were safer because they had no time to get involved in harmful activities, they were too busy at school and with homework. They were protected by the routine of going to school, then coming home and doing their homework.

'School is an environment where children are kept busy from morning to evening, so children will not have that time to wander, as their mind is busy concentrated on the subjects, they forget about those sexual desires, and at the time they come back home they are very hungry and what they need is only food. So no time to think about men or girls, no time to think about robbery. That routine becomes a protection for them, at home they need food and do their homework. At school they are very busy concentrated on teachings' (Congolese, female, 38 years).

Development of protective skills

Although most respondents focused on the physical protection offered by schools, and the engagement of children's time and energy, some also talked about the cognitive skills children developed through going to school as protective factors. Education was believed to increase children's awareness of right and wrong, and to improve their consequential thinking, so they were less likely to take action which would lead them into problems.

'An uneducated failed Somali can come and make her pregnant. The cause for all of this is this ignorant guy who did not go to school that comes without thinking to this poor girl and

impregnates her. He doesn't care what will happen to the girl. An educated person will try to consider everything like if the girl becomes pregnant, are you able to care for her? Can you provide for her? Can you take her out of the refugee situation?' (Somali, male, 16 years)

Some key informants who were involved in the education system also talked about the teaching children received on potential harms and how to avoid them.

'Children are sexually abused but when they are in school we talk about all these things. For example, the disadvantage of early marriage, so they find somebody who is teaching them in secret and these children will say that "no the teacher has said this". So it protects them against early marriage. We talk about the drug abuse to them so they must know that it is very bad to smoke marijuana, because it is bad to their health' (Key informant, teacher).

Future orientation

A key protective factor associated with education was said to be that children had a goal and a sense of purpose that prevented them from engaging in activities which may bring short-term benefits but long term problems (e.g. prostitution, stealing, drug use). They were more confident, and more likely to focus on increasing their potential for earning money in the future.

'Every morning a child is taken to school and returns home he feels a sense of purpose. Young children do not feel this but when they are 15 or 16 they have that feeling that they have a goal' (Somali, male, 23 years).

'These girls of 15–17 years, the idea comes to them that as 'we don't study, we can go to look for men which can give us some money and other things'. But if she studies this will think that 'I always see other children studying finishing and go to the university. Then they have got good jobs. So I myself I have to make a lot of effort of completing my studies'. That is the good idea which can come when she or he studies' (Congolese, male, 23 years).

Learning English

Learning English was said to be a very important aspect of education, which protected children through helping them integrate into the Ugandan society.

'In Uganda if you know some English, you do not have risks like the person who does not know. You can talk to a person, you ask for help and she helps you' (Congolese, male, 16 years).

Children who could speak English were less vulnerable because they were able to read, so could get information more easily, were able to explain themselves and seek help when necessary.

'The child is able to protect himself because protection is being able to say what has happened, and when you are able to say it, it is already a protection. Protection is being able to report without fearing of the language' (Congolese, male, 32 years).

'It gives the child confidence, in case a certain thing happens to me, I can report to the teacher. They get the courage to say out their problems, they become assertive' (Key informant, teacher).

RISKS ASSOCIATED WITH SCHOOL

Although school was seen as primarily protective for refugee children, there were also some risks associated with it.

Discrimination from teachers

Both Somali and Congolese respondents said that children from their communities were sometimes discriminated against by teachers, either by being selected out for punishment, by being verbally abused, or by not being allowed to participate fully in classroom activities. This issue has already been discussed earlier in this report, so will not be explored in more depth here.

Beating

Complaints about the beating experienced by refugee children in Ugandan schools were common, especially from Congolese respondents. In some cases, this was due to a belief that refugee children were being beaten unfairly due to discrimination, but generally respondents said that all children were beaten in school. This was not the case in DRC, and respondents found teachers' use of beatings as a punishment for not understanding an issue, or for making a small mistake, both distressing and confusing.

'We heard that here in Uganda beating is forbidden, but why they do beat children at school, and not only one school but all over? We asked that question at school but they said that the best way of giving children discipline is through beating. But we heard that if you beat somebody and he is hurt, especially when there is blood shed, it is a crime. I don't understand why children are really beaten at school. They always say that this is the way of giving discipline' (Congolese, female, 32 years).

'Once we went and complained at school, they told us that in their culture the best way of giving discipline to children is by beating. They do believe that without beating children don't listen. So he told them that us in Congo, we give punishment to children, there is other way of punishing children than just beating them' (Congolese, female, 18 years).

Assaults and abuse from other children (Ugandan)

Somali children especially reported experiencing high levels of abuse and discrimination from Ugandan students, which sometimes took the form of physical assaults.

'Other Ugandan children discriminate us, like when are playing together they say 'Somalis, why don't you go back your country? You're bothering us', something like that. And even they say 'you Somali people, you are here because of president Museveni, when his years are finished we will kill' (Somali, female, 16 years).

Sexual abuse and exploitation

Several Congolese respondents gave accounts of teachers and other school staff sexually abusing or exploiting female students. In some cases, teachers were said to promise increased marks for girls who agreed to have sex with them; in others, they unfairly punished those who refused to have sex with them.

'[The teacher] called her in the office. Reaching there, the teacher told her that 'whatever we are going to talk about here shall be confidential between you and me, do not talk to your mum and dad, do you hear me?' ... the teacher starts telling that 'you see, I really love you so if you want to pass that exam you need to be in love with me. I will be teaching you separately by giving you coaching ... now before we start the coaching, come first, this a very good exercise which is not hard, haven't you tried it? If we do, I will never ask you money from your mum for the coaching, I will be doing it for free' (Congolese, group discussion, female, 22-55 years).

Somali parents did not mention sexual exploitation from teachers, but feared that their daughters might be exposed to sexual assault from other students because boys and girls were in mixed classes in Ugandan schools.

'Some of the schools here are not like the ones in Somalia where boys and girls sit separate from each other. Here in schools girls and boys sit together. In the same class boys should sit one side and girls one side of the class as happens in Somalia' (Somali, male, 17).

Accidents or incidents on the journey to and from school

Children who were not escorted to and from school by their parents were exposed to the risk of road traffic accidents or kidnap, especially those children who stayed far from the school.

9. DISCUSSION AND RECOMMENDATIONS

A summary of the findings

The findings of this research can be considered in relation to the key questions outlined earlier in this report.

What role is education perceived to play in children's development and protection? Are there benefits of education to the protection of children?

There was a consensus amongst respondents and key informants that the most effective way to protect refugee children from harm was to send them to school. The protective factor mentioned most commonly was that while a child was in school, he or she was safe, supervised and, most of all, busy. Some also talked about the cognitive skills children developed through going to school as protective factors, including the development of an awareness of right and wrong, and consequential thinking skills, so children were less likely to take action which would lead them into problems. Children attending school had a goal and a sense of purpose that prevented them from engaging in activities which may bring short-term benefits but long term problems (e.g. prostitution, stealing, drug use).

Learning English was said to be a very important aspect of education, which protected refugee children through helping them integrate into the Ugandan society. Children who could speak English were less vulnerable because they were able to read, so could get information more easily, were able to explain themselves and seek help when necessary.

What are the main child protection risks or sources of harm to children?

Lack of access to formal education was by far the child protection issue that most concerned Congolese refugees, with more than 90% of groups listing it among their top three harms. This was followed by discrimination, rape and inadequate or overcrowded houses (resulting in children being exposed to adult sexual activity). The top two harms prioritised by the Somali refugee community were the same as for the Congolese: discrimination and lack of education. However, the third most important harm for the Somali groups was drug abuse, and the fourth was child trafficking.

How do child protection risks vary by gender and age? How do they vary by educational enrolment for different age and gender groups of children?

Child protection risks varied by gender, age and educational enrolment. Younger children were less exposed to risk because they were more closely supervised, although those out of school were said to be at increased risk because they were more likely to wander around the neighbourhood, especially if their parents were out of the home trying to earn money. Young girls were said to be at risk of rape, more so than boys, especially if they were out of school.

Particular concern was expressed about the risks faced by boys and girls once they reach adolescence (typically described as age 12 and above). Children at this age were said to be less accepting of the situation in which they were living, and more likely to try to do something to improve their lives, especially children who were out of school. Children seeking to improve their lives were often said to engage in activities which place them at increased risk, such as finding employment, engaging in sex work, theft and paying traffickers to take them overseas. There were some gender differences, in that girls were more commonly said to engage in sex work (Congolese more than Somali), and to be at risk of sexual abuse and exploitation through employment. Boys were more likely to use drugs and become involved in criminal activity, exposing themselves to beatings as well as arrest. Adolescent Somali boys and girls were particularly likely to consider paying traffickers to take them abroad.

To whom do girls or boys turn to for help when protection threat X arises? Are schools perceived as a point of entry for reporting protection threats?

The primary helpers for children, in both Congolese and Somali communities, were their parents. For every type of harm discussed, the research team heard that children would go first to their parents. Although some respondents said that children would report harms that occur in school to a teacher, more commonly they would wait until they reached home, and tell their parents. Schools were not generally perceived as a point of entry for reporting protection threats. In some cases, this was because teachers were perceived as being prejudiced against refugee children, but generally children seemed to feel more confident talking to their parents than to teachers.

What processes or mechanisms are used by families or communities to support children who have been affected by various protection threats? Are schools involved in this support process?

The processes and mechanisms used by families and communities to support children included both community based and formal structures. Within the Somali refugee community, the community leadership, including religious leaders and the clan-based structures, provided the main source of support for children. They also engaged with NGOs, particularly InterAid Uganda, but had very limited contact with the LC1 and police.

The Congolese refugee community relied heavily on church associations within their communities for support. These church associations were strong, and provided not only spiritual support but a range of practical services for children, including limited financial support, practical assistance in finding accommodation for unaccompanied or separated children, and advocacy services, or linking children to organisations who may be able to assist them. The church associations, and other community-based organisations, provided English classes, vocational training and other activities to help children who were unable to attend formal school.

Congolese refugee children were also assisted by InterAid Uganda when they faced protection risks, and by other NGOs, including Refugee Law Project, HIAS, ACTV and JRS. The Congolese community engaged more than the Somali with the LC1 system and the police, but these structures were not seen as being very supportive of children facing protection risks.

Schools were involved in the support process when the risk related to the school environment. For example, when parents were struggling to meet the costs of their child's education, some schools would negotiate flexible payment plans to enable the child to return to school. If a child faced discrimination, or verbal or physical abuse at school, the school authorities would take a lead role in addressing the issue.

What processes or mechanisms are used by families or communities to support out-of-school children? What are the outcomes of those mechanisms, and how satisfactory are the outcomes in the eyes of different stakeholders?

Parents and communities made every effort to find ways of enabling children to return to school. However, it was acknowledged by most that the majority of refugee children were out of school, and faced a number of harms as a result. Parents found it difficult to support their out-of-school children other than to provide guidance, love and moral support to encourage the child, and prevent them from becoming involved in harmful activities. The Congolese church associations organised non-formal education classes and vocational training for adolescents who were out of school, and these were appreciated by both young people and parents. However, they were seen as a poor substitute for formal education, since the quality of the teaching was lower, the classes only took place for a few hours a day, and they did not provide the child with official qualifications which could help them in the future. In the Somali community, parents sometimes sent children to the schools run by religious leaders as an alternative to formal education.

For older children, respondents said that parents sometimes encouraged the child to find work, or they set the child up in a small business. Whilst most parents would prefer their children to be at school, it was believed to be better for a child to be working than to be idle at home; not only because the child was able to contribute financially to the family, but also because the child would be busy, so less likely to become involved in harmful activities such as sex work or crime. However, children were said to be exposed to different types of harms through work, particularly exploitation (not being paid for work done), heavy physical labour, and sexual assault.

What are the indigenous, 'traditional' mechanisms of protection and how are they regarded by different groups?

The traditional mechanisms had been maintained within the Somali refugee community but were less strong in the Congolese community. The research team heard frequently that all refugees were struggling to cope, so were less able to help their friends, relatives and neighbours than they would have been able to in their home countries. Even in the Somali community, where family networks were still strong, respondents said that people were busy working, looking for ways to earn money and provide for their families, so took less interest in the problems of others than they would have done at home.

Apart from indigenous mechanisms, what groups or structures exist in urban refugee communities?

Refugee-assisting organisations played a significant role in educating and sensitising both refugees and Ugandans about child protection issues. In addition, InterAid Uganda, in collaboration with refugee leaders, had recently established Child Protection and Education Committees (CPEC) in many of the communities where refugees lived in Kampala. The main responsibilities of CPECs were to encourage parents to send children to school, to raise awareness within their communities of child protection issues, and to identify any children who need support. In simple cases, they were able to provide the support as a committee, but otherwise they referred the child to InterAid Uganda. The committees were still fairly new, so they were in the process of establishing themselves. They have great potential to link formal and community-based child protection mechanisms.

What do communities do to promote school enrolment and safer schools?

Communities contributed financially to assist children who are out of school but, as mentioned, their resources were limited and generally it was difficult for them to enable children to return to school. Some of the Congolese church associations had links with other organisations which sponsored children to go to school, and a key informant (head teacher of a primary school) said that refugee children were sometimes supported by Somali associations and a large mosque in Kisenyi to access education.

The research team also heard that CPECs had begun to develop links with schools; they were consulted by teachers if there was an issue relating to refugee children, and were invited to attend general meetings or parents' meetings. CPEC members addressed these meetings, and used the opportunity to raise awareness on child protection issues. They also had meetings with the school authorities to try to reduce the discrimination experienced by refugee children in school.

Who has or does not have access to existing protection mechanisms?

Many respondents felt that refugee children did not have equal access to child protection mechanisms, because both parents and children were discriminated against. This was said to affect all aspects of the formal child protection system, including health care facilities, LC1 structures, the police, and even schools.

Certain groups of children were marginalised even within the refugee population. The central role played by parents and families in child protection meant that children living without their parents,

children from minority clans or tribes, and children who were rejected by their families and communities, had difficulty accessing informal protective networks.

Younger children had difficulty accessing protection mechanisms because they lacked the ability to explain the harms they have experienced. Although this study obtained little information about children with disabilities, it is likely that these children were extremely marginalised and unable to access existing mechanisms.

Who has or does not have access to education?

Under UPE all children had access to education, but there were costs involved which could exclude those whose families were unable to pay. This applied not only to refugee children, but also to Ugandan children from very poor families. However, refugee children were more vulnerable because their parents struggled to find work due to discrimination, language barriers and lack of connections.

What do NGO actors see as their main roles and responsibilities in regard to community based child protection mechanisms?

The Ugandan Government has primary responsibility for child protection, including the protection of refugee children, but is limited in terms of both resources and capacity. Therefore, NGOs play an important role in supporting child protection activities.

All the refugee-assisting organisations spoken to during this research, including InterAid Uganda, HIAS, and Refugee Law Project were involved in advocacy activities, working directly with institutions involved in child protection (e.g. police, schools, LC structures) and with CBCPMs. They also provided direct services to child refugees and their parents.

Refugee-assisting organisations worked closely with CBCPMs, including the church associations in the Congolese community, and the community leadership in the Somali community. Youth groups were present (but not currently active) in many communities, and plans were in place to strengthen these. The CPECs established by InterAid Uganda had great potential as a link between CBCPMs and the more formal child protection mechanisms. They were already working to raise awareness of child protection issues in their communities.

What are the linkages of community mechanisms with the formal elements of the child protection system?

For some aspects of the child protection system for refugees in Kampala, referral pathways were clear. The LC referred to the police, for example, and the police referred to InterAid Uganda and other organisations (e.g. OPM). InterAid Uganda referred to UNHCR, to government clinics and hospitals, to UPE schools, and to other organisations, such as JRS. Inter-referrals took place between InterAid Uganda, UNHCR, JRS, HIAS and RLP, in particular, but also with ACTV and Uganda Red Cross/ICRC. Within the Congolese community, church associations connected refugees to organisations, and in the Somali community the chairman was the 'middle man' between the community and refugee-assisting organisations and the government bodies.

The CPECs were potentially very powerful connectors, although they were still establishing themselves at the time of this study, so were not yet in a position to perform this function effectively. Probation and Social Workers also had potential, but they did not provide services to refugee children because these children were perceived as falling within the mandate of UNHCR and the refugee-assisting organisations, rather than within the mandate of the national child protection system.

There seemed to be little direct connection between refugees and schools. The relationship between Congolese church associations and some organisations (e.g. InterAid Uganda) was strong, but in many aspects of their work the church organisations were operating independently of the formal child protection system.

There was no specific co-ordination system for child protection in Kampala, and a number of key informants working in refugee-assisting organisations saw a need for a child protection working group to facilitate co-ordination, referrals and a coherent service. Amongst the refugees spoken to, there was considerable confusion about the mandates of different organisations. Increased co-ordination between organisations, and the provision of a more coherent service, would go some way towards reducing the frustration refugees feel at not being able to access the services they require.

Facilitating linkages between education and protection

It was clear that access to education was key for urban refugees in Kampala. Children out of school were exposed to many more risks than children in school, including sexual assault, child labour, drug use, trafficking, early sexual activity (sometimes resulting in pregnancy), accidents and verbal and physical abuse. Many refugee children in Kampala were out of school, and increasing their access to the formal education system would have a significant impact in terms of child protection.

The UPE policy applies to all children, including refugees. The main challenge is not implementation of the UPE policy but addressing poverty among refugee parents who are not able to meet some of the additional costs associated with attending school, such as lunch, uniforms and scholastic materials. Livelihood programmes for parents is the main way in which children's access to education could be facilitated. InterAid Uganda already assists parents to set up small businesses or other income generating activities in order to send their children to school, and these activities could usefully be expanded, and adopted by other organisations working with urban refugees in Kampala. Livelihoods programmes could include not only direct assistance to start up businesses, but advocacy with employers and the Ugandan Government, as well as skills training, savings and loans groups, or other approaches.

InterAid Uganda had already talked to all 81 UPE schools in Kampala and obtained agreements that they would offer flexible payment plans to refugee parents to enable them to pay in instalments. However, some respondents said that they had been unable to negotiate a payment plan with the school their children attended. This policy should be standardised across all schools.

Even with livelihoods programmes in place, there will always be refugee families who are unable to earn enough money for their children to go to school. These families are likely to have additional challenges (e.g. disability, sickness) which increase the vulnerability of their children, so it is particularly important that these children are able to access the protective factors associated with schools. These families will require financial assistance in order to send their children to school, so it is important that: (a) funding is available to support this, and (b) there are clear criteria and decision-making processes in place to identify families in need of such assistance. It is crucial that such processes are transparent in order to manage refugees' expectations and prevent an increase in mistrust and frustration. The research team heard that some CBCPMs connected individuals with organisations able to sponsor children through school. Although this is less sustainable than parents earning enough to pay for their own children's school costs, linking children to organisations who offer such sponsorship might be helpful, especially if it can be done more systematically, with clear criteria and a transparent decision-making process.

Although the main cause of children being unable to access education was financial, it is not the only barrier described by respondents. For refugees who came from non-English-speaking countries, they faced the challenge of trying to enter a school system which used a language which they may not be confident in. This affected older children particularly, as the content of the teaching was more complex in the higher classes. Respondents said that some older children were obliged to join classes with younger children, because their English was not good enough for them to continue at the level they were at in their home country. The humiliation of this led some older children to drop out. This also affected children who had not been to school in their home countries, so struggled to fit into the school system in Kampala. Although there were many English language classes for

refugee children in Kampala, they were sometimes not valued because they were not perceived to lead to formal qualifications. Since the research team heard regularly that refugee children needed support in terms of language, and sometimes also educational skills, in order to benefit from the Ugandan educational system, there would seem to be room to explore ways of linking these additional classes to the mainstream educational system, so that they are perceived as a way into formal education, rather than an alternative to it. Linking these classes to the Ugandan curriculum would enable older children who participated in these 'foundation classes' to join school at the level they were at in their home country, rather than being obliged to drop a number of grades because of their standard of English and lack of knowledge of the Ugandan curriculum. One of the challenges would be to find a way of providing this support in a way that did not stigmatise those involved.

Respondents said that young children were often left at home alone while their parents went out to try to earn money. This placed children at risk, and the establishment of early child development centres would help to minimise this risk. They would provide safe places for parents to leave young children, and staff could engage the children in some learning and play activities, to assist in their development. Such centres could be run by existing community-based organisations, with some external support in terms of materials, training and supervision.

Children who were in school reported being exposed to some harms, specifically discrimination, sexual exploitation and accidents on the journey to and from school. This suggests that action could be taken to make schools safer and more protective places for refugee children. InterAid Uganda are already actively involved in this, through providing material support (e.g. fencing, water tanks) and recently began a 'school group counselling' programme which will include all UPE schools, and aims to ensure that refugee children are enrolled and retained in school. Separate discussion groups are held with children (refugee and national combined) and teachers to sensitise participants about the experience of refugees.

Discrimination is the main harm reported by school-going children. This could take the form of being verbally or physically abused by other pupils, or being discriminated against by teachers in the classroom (e.g. being given lower marks, not being allowed to participate in classroom activities and discussions). The needs of Muslim students were not considered by all schools. There are several ways in which schools can address this, some of which are already being implemented in certain schools in Kampala. There is a need for the type of ongoing training provided by InterAid Uganda for teachers on issues such as diversity, the background and experience of refugee children, and how to build cooperation and respect between children from different backgrounds. This in itself will not be sufficient, however; every school should also have a policy on managing issues of discrimination, and a formal complaints system which refugee children and parents (as well as Ugandan children and parents) can use to report instances of discrimination.

In order for the needs of refugee children to be considered by schools, refugee parents should be active in school committees and other bodies so they can influence policy and practice. At the time of this study, of the 81 UPE schools, 20 had a refugee parent on the PTA. In order to expand this, and to enable refugee parents to be more generally involved in the education of their children, they need to have enough English to express themselves clearly, and with confidence. Offering opportunities for parents to improve their English would need to be done in a flexible way, to fit in with their many other commitments.

Community-based child protection mechanisms can play an important role in supporting refugee children to access education, and reducing drop-outs. Close relationships between CBCPMs and schools enable teachers to inform a member of the CBCPM when a child regularly misses classes, so they can follow up with the family, and help them to resolve any issues affecting the child's ability to go to school. Although education was greatly valued by the majority of refugees spoken to, the research team also heard that this was not always the case, and that some parents kept their children out of school to work, help in the home, or because they believed they would be resettled

soon so there was no need for their children to begin school in Uganda. InterAid Uganda is working with parents to address these beliefs, but the CBCPMs are in a particularly good position to do so, and to raise awareness about the importance of education. Certain groups of children are especially likely to have difficulty accessing education (e.g. children who are not living with their biological parents; child mothers; children with disabilities) and CBCPMs are able to identify these children in their communities and support them to return to school.

Recommendations: Facilitating linkages between education and protection

The below recommendations are intended for ‘refugee-assisting organisations’ in the broadest sense. When possible, the recommendations have been addressed to specific entities and organisations; however, there are four large refugee-assisting organisations in Kampala (InterAid Uganda, Refugee Law Project, HIAS and JRS) and many smaller ones. In order to ensure that the recommendations are implemented effectively, there would need to be a process of discussion between all refugee-assisting organisations to assess their strengths, capacities and resources. On the basis of such a discussion, which would also ideally involve the Government of Uganda (and especially the Ministry of Education as well as the Office of the Prime Minister), the collective group of refugee-assisting organisations should decide which organisations could best address each recommendation, and how to do so. This process is essential if co-ordinated, efficient child protection systems are to be established. UNHCR could play a facilitating and convening role in this process.

The recommendations for facilitating linkages between education and protection are that:

1. Refugee-assisting organisations, including InterAid Uganda, should establish or strengthen livelihoods programmes for parents to enable those who are able to earn enough money to send their children to school. To achieve this recommendation, InterAid Uganda has planned a five-year (2014-2018) Livelihood Strategy to provide support to refugee parents to enable them increase income. Such livelihoods strategies should be based on preparatory market surveys to determine which livelihoods strategies will be most effective.
2. InterAid Uganda, UNHCR, and other refugee-assisting organisations should advocate for more funds from the Government of Uganda and from the international community to assist particularly vulnerable children (identified using existing vulnerability determination criteria) for support. It will be important that the criteria and decision-making processes involved in administering this fund are transparent and clearly communicated.
3. The Ugandan Ministry of Education should require all government schools to be flexible regarding payment plans, which can be agreed in discussion with parents. InterAid Uganda is already working with government schools which are part of the Universal Primary Education system to facilitate such a process, and this approach should continue and be expanded until all government schools have been brought on board and a formal flexible-payment system established.
4. CBCPMs and InterAid Uganda should continue to link refugee children to various organisations and individuals for education support based on their specific individual organisation criteria for selection children for support.¹⁰ Again, it is important that such decisions are made in a transparent way.

¹⁰ Existing InterAid Uganda linkages include the media organisation, Banks, Kampala City Authority Bursary Scheme, Education NGOs(Children Fund), Faith Based organisations (e.g. Missionary of the Poor) where about at least 300 refugee children are being sponsored in schools

5. The Ugandan Ministry of Education should collaborate with refugee-assisting organisations, including community-based organisations, to explore possibilities for providing ‘foundation classes’ for children either before they join the formal education system, or alongside it. These classes could focus on English language alone or a combination of English language and basic educational skills, depending on whether the child had attended school in their home country. If these classes were linked to the mainstream educational system and formally linked to the curriculum, they could act as a ‘way in’ to formal education, rather than an alternative. Ideally, they would enable older children to join school at the grade they were at in their home countries rather than dropping to a lower level.
6. CBCPMs and refugee-assisting organisations should raise awareness within refugee communities regarding the existence of ECD centres attached to UPE schools, and, in collaboration with UNHCR, establish new ECD centres in areas where they are lacking.
7. Refugee-assisting organisations, including InterAid Uganda, should provide training of teachers in UPE Schools on issues such as diversity, the refugee experience, and how to build cooperation and respect among children of different nationality. As part of this programme, refugee-assisting organisations support schools to develop policies to manage discrimination.
8. Refugee-assisting organisations, including InterAid Uganda, should continue to provide English language classes to facilitate integration of refugees. Flexible, creative options—such as classes conducted in the refugees’ places of work—should be explored to enable parents to learn English around their other commitments.
9. The Uganda Ministry of Education should collaborate with refugee-assisting organisations, including InterAid Uganda, to ensure that refugee parents are supported to participate in school decision-making bodies, such as Parents Teachers Associations (PTAs) and School Management Committees (SMCs). PTAs and SMCs could also be involved in enabling schools to better meet the needs of refugee children, in terms of offering advice to the school, and following up on refugee children with problems by facilitating communication between parents and the school authorities.
10. CBCPMs should raise awareness in their communities of the importance of sending all children to school, and challenge attitudes and beliefs which contribute to children not being sent to school through their typical communications channels, such as church and mosque events, community meetings, and other regular gatherings.
11. CBCPMs should identify children likely to be excluded from education (e.g. children not living with their biological parents; child mothers; children with disabilities) and support them to go to school by advocating with parents, caregivers and schools on their behalf, and referring to refugee-assisting organisations where necessary.

Findings and Recommendations: Strengthening child protection mechanisms

PARENTS

The key community-based child protection mechanism for refugee children in Kampala was parents. Strengthening parents’ abilities to support and protect their children would have a significant impact on refugee children’s wellbeing.

The poverty of refugee families underlies many of the harms experienced by children. Poverty was the main reason refugee children did not go to school, and this in itself exposed them to various other harms. Poverty was also the reason Congolese families lived in overcrowded accommodation,

increasing the risk of children engaging in early sexual activity, and was the reason that girls were easily sexually exploited or raped by men who promise gifts and money. Child labour was also strongly related to poverty, and exposed the child to many harms. Strengthening parents' ability to earn a living, and to provide for their children's basic needs, would, therefore, significantly reduce refugee children's exposure to harm. One of the challenges parents face currently in earning a living is that they have to leave their children unsupervised at home while they do so, which they recognise is risky. Alongside facilitating parents to earn a living, therefore, there must be the establishment or strengthening of systems to take care of non-school-going children while the parent is out at work. One possibility is supporting community-based organisations to provide early childhood development centres, as already suggested.

Parents who can speak English are in a better position to support and protect their children. A lack of English was identified as a barrier to reporting and following up on cases, and since parents are the main helpers for children experiencing protection issues, their communication skills are crucial. It must be recognised, however, that the priority for parents will be to earn a living, so any English language support would have to be flexible in order to parents to access it at a time and in a format most suitable for them. There may also be a need for advocacy training for key individuals in communities to enable them to support parents who are not able to express themselves in English, or who lack the confidence to deal with government bodies (e.g. LC1, police) or NGO staff.

In many cases, respondents said that it is not possible for parents to protect their children as they would wish to. For some, it was not possible to send the child back to school, or to prevent their child experiencing verbal or even physical abuse in the neighbourhood. In such situations, the relationship between the parent and child was said to be the main factor preventing the child from losing hope, or trying potentially harmful ways of improving their lives, such as criminal activity, early sexual relationships, or paying traffickers to take them overseas. The parent-child relationship was, therefore, crucial, but was sometimes affected by the stressors that the parents are experiencing. The research team heard that some parents are so absorbed by their own problems that they are not able to focus effectively on their children.

Community-based organisations, such as the CPECs and the church associations in the Congolese community, would be in a good position to raise awareness on the importance of the parent-child relationship, and to help parents to maintain good relationships with their children, despite the pressures they are all under. Ongoing discussions within communities could help parents to identify strategies to prevent their children being exposed to harms, and know how to respond if their child experiences a particular harm. CPECs or other community-based organisations would require support from organisations such as InterAid Uganda, Refugee Law Project and HIAS to perform this task effectively, but such strengthening of parents' capacity to protect their children is likely to be a good investment of resources.

Strengthening parents' relationships with schools and LC1s would also assist them to respond effectively when their children report a problem to them. For example, if a parent has a good relationship with their child's school, she or he can talk immediately to a teacher or head-teacher if their child tells them that a teacher is discriminating against them. Improving relationships with LC1s would help to challenge some of the prejudicial attitudes held by LC1s about refugees, and would enable parents to report problems more easily. Again, community-based organisations, such as the CPECs and the church associations in the Congolese community, would be in a good position to facilitate such relationship-building through organising meetings, and through regular, informal conversations with key people in schools and the LC1 office.

The central role played by parents in child protection in urban refugee communities in Kampala meant that those children who were living without their biological parents were particularly vulnerable. Whilst some were well-cared for, by relatives or foster parents, others were neglected or mistreated, and it was difficult for them to report their problems. CBCPMs should ensure that

they identify the children in their communities who are living without their biological parents, monitor their welfare, and support them to access services where necessary. Refugee-assisting

The recommendations for strengthening **parents'** ability to protect and care for their children are the following:

1. Refugee-assisting organisations, including InterAid Uganda, should establish or strengthen livelihoods programmes for parents to enable those who are able to earn enough money to send their children to school. To achieve this recommendation, InterAid Uganda has planned a five-year (2014-2018) Livelihood Strategy to provide support to refugee parents to enable them increase income. Such livelihoods strategies should be based on preparatory market surveys to determine which livelihoods strategies will be most effective.
2. Refugee-assisting organisations, including InterAid Uganda, should continue to provide English language classes to facilitate integration of refugees. Flexible, creative options—such as classes conducted in the refugees' places of work—should be explored to enable parents to learn English around their other commitments.
3. The Ugandan Ministry of Education and refugee-assisting organisations should enable Community Based Education Committees (CBECs) and key individuals in communities to support parents who lack the language skills or confidence to engage with government officials or NGO staff regarding child protection issues. Such enabling might take the form of the establishment of a formal focal point system for key individuals who receive training on linking refugees with service providers. These key individuals will vary depending on the community, but could include church leaders, prominent business people, those who are active in community-based organisations, teachers, and others.
4. Refugee-assisting organisations, including InterAid Uganda, should support community-based organisations to strengthen parents' capacity to support and protect their children. This support may include: enabling CBOs to raise awareness on the importance of the parent-child relationship; helping parents to maintain good relationships with their children, despite the pressures they are all under; helping parents to identify strategies to prevent their children being exposed to harms; and giving information on how to respond if a child experiences a particular harm.

organisations should ensure that these children, along with others who may not easily access community based child protection systems (e.g. those from minority clans or tribes; children with disabilities), are prioritised for assistance.

REFUGEE COMMUNITY BASED ORGANISATIONS

A number of refugee community based organisations (CBOs) were identified through this research. A large number of faith-based associations and other types of CBOs existed in the Congolese communities, including Born Again Refugee Association (BARA), Refugee Solidarity Group, Bondeko Centre, Women's Association for Peace and Development, JSS/ Yarid, Umoja, PADEAP, PANIP, REHORE (Restoration and Hope for Refugees), as well as individual churches which offered services. Fewer organisations existed in the Somali community, but Tawhid mosque was active, and there were community structures, such as the community leader and his committee. These organisations and structures were actively involved in child protection activities, as described elsewhere in this report. Their strengths are that they are highly integrated into the community, have high levels of acceptance and respect, and are able to respond immediately to any child protection concerns. They have considerable flexibility, and are able to mobilise the resources which exist within their communities.

These strengths put them in a good position to educate community members on child protection issues, advocate for refugee children with formal child protection mechanisms, and respond to sensitive and urgent issues affecting children in their communities.

There are also the Child Protection and Education Committees (CPECs) which are voluntary bodies established by InterAid Uganda in collaboration with community leaders. These bodies are newly established, and fall somewhere between CBOs and an NGO child protection mechanism. However, their strengths are similar to those above, so they will be considered in this section. They have an additional strength, in that they provide a link between community-based child protection mechanisms and formal child protection mechanisms.

Filling in the gaps

One of the strengths of CBOs is that they are flexible, are in touch with the issues affecting children in their community, and can be creative in finding solutions where official bodies are unable to. For example, in the Congolese community the research team heard of many CBOs which provided English language classes and skills training for out-of-school youth. These are crucial activities, since they give these youth a purpose and a structure to their days, and so may prevent some of them becoming involved in harmful activities, especially if they are able to earn an income through the skills they develop. The research team heard less about activities for young children who are out-of-school, and this may be an area where community-based organisations could develop their activities. Whilst it is important for community-based organisations to maintain ownership of these activities for children and young people, it would be helpful for refugee-assisting organisations to provide them with some material support, and capacity-building where necessary.

Another key service that community-based organisations provided was that of finding accommodation for refugee children who were living without their biological parents. In some cases, this consisted of giving children a space to sleep on the church floor, to avoid them having to sleep on the streets. In other cases, it consisted of finding a family to foster the child. It was acknowledged by representatives of refugee-assisting organisations that this type of practical help is crucial, since there are few alternatives. However, it was also noted that the CBOs may unintentionally expose children to further harm, through inappropriate placements with foster families and lack of follow-up, or children sleeping unsupervised in a communal space. CBOs need support from NGOs and government bodies to provide services in a way that protects children. Whilst it is necessary to improve standards and oversight, it is important that this is done in a manner that does not restrict the ability of CBOs to respond to emergency situations in an informal way.

Raising awareness of child protection issues

CBOs are in an ideal position to raise awareness amongst their fellow community members regarding child protection issues. Members of CBOs are very aware of the issues affecting their children, and are able to communicate messages in a way likely to be acceptable to the community as a whole. The research team heard that there was little education or discussion of child protection issues occurring in the Somali refugee community, and this is a gap that the CPEC could fill. We heard mixed reports from the Congolese community; it appears that some church associations and other organisations were discussing child protection issues, but that they were not reaching everybody. Again, there is room for the CPEC to strengthen awareness of child protection issues in the Congolese community. Issues which could be focused on include: the need for all children to access education; the dangers of early marriage; raising awareness amongst children of risks of sexual assault (e.g. trusted people can be perpetrators). Whilst the CPECs are in an ideal position to undertake this awareness-raising, they would need capacity-building and support from InterAid Uganda and/ or other refugee-assisting organisations in order to do so effectively.

Advocacy

Respondents said that parents often had difficulty in accessing formal child protection systems, such as LC1, police and refugee-assisting organisations. One of the church associations in the Congolese community assisted parents by directing them to the correct organisation or institution, and, where necessary, accompanying them there. This type of advocacy has great value, especially where language issues are a barrier. Community-based organisations, including CPECs, are in a good position to do this. In order to facilitate this, refugee-assisting organisations could provide training for key community members on the mandates and access procedures of the different organisations working with refugees in Kampala.

Identifying and monitoring vulnerable children

This research identified groups of children who may find it more difficult to access child protection mechanisms, and so may be particularly vulnerable. These include children who are not living with their biological parents, disabled children, children from minority clans/ tribes, and children who have been rejected by their families and communities. They may be more likely to try to fend for themselves through finding work, including sex work, or paying traffickers to take them abroad. As already noted, such children are unlikely to be able to report their problems to either non-formal or formal child protection mechanisms. One of the key functions of CBCPMs, therefore, should be to know who these children are in their community, and to ensure they are monitored and protected. They may need support from refugee-assisting organisations to find appropriate ways of identifying and monitoring these children.

Supporting and strengthening CBCPMs

The CBCPMs the research team heard about in the Congolese and Somali refugee communities in Kampala were working to support and protect children in very difficult circumstances, whilst facing considerable constraints in terms of resources. They demonstrated creativity, energy and commitment in promoting the welfare of their children. They were achieving a great deal. However, there are areas in which they could be strengthened: there is a need to ensure that the most marginalised children are able to access their services, and that the safety and welfare of children is prioritised by community-based organisations and structures. Respondents gave examples of cases in which mediation took place and the child's interests were not prioritised (e.g. in cases of rape), or where CBCPMs did not respond to a harm committed against a child because the perpetrator was a Ugandan and the CBCPM was unwilling to engage with the formal authorities.

Formal child protection structures, both government and NGO, could assist in strengthening the ability of CBCPMs to respond to harms committed against children, and their ability to protect children from harm. However, it is crucial that the CBCPMs' strengths, such as their flexibility and creativity, are not undermined by the imposition of external rules and conditions in a top-down manner. Monitoring and support of CBCPMs should focus on:

- Whether marginalised or vulnerable children are being systematically identified and provided with the necessary support.
- Ensuring that those not associated with a particular church or mosque are not excluded from CBCPMs and that going to the church/ mosque is not a condition of receiving services.
- Ensuring that direct services to children are being provided in a way that ensures their safety and welfare.
- Ensuring that children's interests are prioritised when decisions are made by CBCPMs.

The CPECs have great potential as CBCPMs that are linked closely with the formal child protection system, through InterAid Uganda. They are still new, and require more capacity building, support and supervision, but in the short time they have been active they have already made great progress. Those in the Congolese community were embedded within the church associations, which is a good way of focusing existing community-based organisations on the needs of children. It is important

that the CPECs link into existing community-based organisations if they are to be effective CBCPMs, rather than being seen as InterAid Uganda structures. Their activities should be based on community priorities, as identified through discussion with community members, including children. However it may be useful for CPECs to establish relationships with other bodies related to child protection, such as schools and LC1s, in order to strengthen those services and improve refugees' access to them. If the CPECs are to be effective, they will need to develop a higher profile in their communities, and at the same time communicate a clear and consistent message about their role, so that the community members' expectations of the CPEC are realistic.

The recommendations for **refugee community-based organisations** to better protect children are below.

Refugee-assisting organisations, including InterAid Uganda, should support CPECs and other community-based organisations through technical and—to the extent possible—financial support to:

1. Identify and monitor children in their communities who are particularly vulnerable and may find it difficult to report their problems, particularly those who are living without their biological parents. The support required is likely to take the form of training and guidance regarding the signs of a child being particularly vulnerable; how to keep accurate records; and how to respond to the types of situations they are likely to come across, including making appropriate referrals.
2. Undertake a series of awareness-raising activities, using multiple approaches (such as messaging during community meeting, the development of visual aids, and the use of mass media), focusing on the issues affecting children in their own communities.
3. Advocate with local-level statutory bodies (e.g. the police, LC1s, Probation and Social Work Officers, and other local authorities) to help refugee children and caregivers to access the services they need.
4. Continue to provide activities, including English language classes and skills training, for those children who are out of school, particularly younger children.
5. Provide emergency accommodation for children in a way that ensures the child's safety and wellbeing, working in close collaboration with Probation and Social Work Officers. This activity may include providing community-based organisations with guidelines regarding the issues they should take into account when providing such accommodation (e.g. girls and boys sleep in separate spaces), the development of which guidelines could be led by one designated refugee-assisting organisation during the aforementioned consultations.

CBCPMs should improve support and monitoring by:

1. Focusing on whether marginalised or vulnerable children are being systematically identified and provided with the necessary support.
2. Ensuring that those not associated with a particular church or mosque are not excluded from CBCPMs and that going to the church/ mosque is not a condition of receiving services.
3. Providing direct services such as emergency accommodation to children in a way that ensures their safety and welfare.
4. Ensuring that children's interests are prioritised when they make decisions concerning children. Where organisations like InterAid Uganda have staff working closely with communities, they will be in a position to monitor the assistance provided by CBCPMs to children, and to provide guidance and support where required.

CPECs should:

1. Receive ongoing training and supervision from refugee-assisting organisations, including InterAid Uganda, to ensure that they are able to perform their function effectively.
2. Link into current CBCPMs, rather than positioning themselves as “InterAid Uganda structures,” and base their activities on community priorities as identified through structured consultations with community members, including children.
3. Communicate messages about their role and scope of work clearly and consistently so as to develop a more visible profile within their communities whilst managing community expectations.

GOVERNMENT STRUCTURES

Government structures, primarily the LC1 and the police, but also (potentially) the Probation and Social Welfare officers and the staff of government health centres, play a crucial role in the protection of refugee children. Unfortunately, the strong message emerging from this research is that these structures are not currently providing an effective service.

For LC1 and police officers, discrimination and prejudicial attitudes appeared to limit their ability to provide adequate protection to refugee children. Training will be required, and is, in fact currently being offered by organisations such as InterAid Uganda, for these government bodies. However, this in itself is unlikely to be sufficient to change practice. Training should be accompanied by activities designed to strengthen relationships between refugee communities, LC1 offices and the police. It should also be accompanied by the development of policies to ensure that refugee children and adults receive the services they are entitled to, and systems need to be in place to monitor the implementation of these policies. A well-functioning complaints system is an important part of any public service, to ensure that individuals and organisations are held accountable. An improvement in the service offered to refugees by LC1s and police would have a considerable impact on child protection. LC1s, in particular, are in a good position to prevent the kind of abuse Congolese children experience in their home areas, not only by responding to individual cases but by creating a ‘zero tolerance’ culture in that area.

The role of Probation and Social Work officers in relation to refugee children was unclear. Their role should be clarified, and, if they are to work with refugee children, they should be provided with explicit guidance on how to do this. They are likely to require training on issues specific to refugee children, and should work closely with refugee-assisting organisations.

The recommendations concerning **Ugandan government structures** working with refugees are the following:

1. InterAid Uganda should continue organising sensitisation meetings for LC1s, the Police and Probation officers on child protection issues to address discrimination, attitudes and practices. Other refugee-assisting organisations working in other areas should replicate similar sensitisation meetings if they are not already doing so.
2. LC1 offices should strengthen their relationships with refugee communities through activities such as general meetings, the inclusion of refugees in fora on specific issues relevant to that community, and the involvement of refugee groups in designing solutions for community problems.
3. The Office of the Prime Minister, working with UNHCR, should ensure that policies are in place to ensure that LC1 and police officers provide refugees with the services they are entitled to, and the implementation of these policies is monitored.
4. The Office of the Prime Minister, working with UNHCR, should provide oversight of LC1s and police officers in communities where refugees live, ensuring, for example, that these local authorities are consulting refugee communities through regular community meetings. The Office of the Prime Minister should also establish a functioning complaints system via which refugees can voice concerns about local governance at a higher level.
5. The Ugandan Government—including the Office of the Prime Minister and the Ministry of Gender, Labour, and Social Development—should clarify the role of Probation and Social Work Officers in relation to refugee children so that these officers are able to provide assistance to refugee children in the same way as national children. This activity may include a review of the job description for Probation and Social Work Officers to ensure that refugee support is included.
6. The OPM should increase its engagement with national child protection coordination bodies such as the Child Protection Working Group to promote the development of an effective coordination and referral system to ensure that refugee children receive the services they require in an efficient way (i.e. it is not necessary for them to visit several different organisations with the same request), and that efforts are not duplicated.

REFUGEE-ASSISTING ORGANISATIONS (NGOS AND UN BODIES)

This study has shown clearly the high level of need amongst refugees living in Kampala, and their dependency on a small number of organisations, particularly InterAid Uganda, Refugee Law Project and HIAS, to meet these needs. The resources of all these organisations are limited, and it is not possible for them to meet the sometimes unrealistic expectations of the refugees who need assistance.

Clearly, it will never be possible for refugee-assisting organisations to meet the needs of refugees in Kampala. Therefore, it would make sense for efforts to focus on the establishment of mechanisms that would reduce the reliance of refugees on these organisations. Livelihoods programmes would have many advantages in terms of child protection. Refugee-assisting organisations are also best placed to undertake the advocacy and awareness-raising activities required at all levels, including with government bodies, the general public, health workers and police, to reduce the discrimination experienced by refugee children, including at school.

Frontline agencies, such as InterAid Uganda, experience every day the challenges of managing refugees' expectations, which vary not only from individual to individual, and family to family, but also from day to day, as expectations change. Working in such an environment is extremely

challenging, especially for those who are responsible for meeting with the refugees and absorbing their frustration and despair on a daily basis. These workers require considerable support if they are to provide an effective service without 'burning out'. The organisations themselves also require support from each other, through coordination and referral systems, and from donors, to ensure that they are able to plan their services and to respond to refugee needs in a consistent way. These organisations are providing crucial services to refugees who often have nowhere else to turn, and funding limitations create additional pressure both on the staff of the organisation and the refugees who are seeking help. For example, there are just two members of staff in InterAid Uganda providing services for children, including both direct services to children in need, and indirect services such as advocacy.

There seemed to be considerable confusion amongst refugees about the mandates of the various refugee-assisting organisations in Kampala, and their limitations. This contributed to refugees' frustrations, as they requested help from organisations which are unable to offer that particular form of assistance, so they felt they were being sent from one organisation to another without understanding why. They were also frustrated at the lack of clarity around decision-making and not understanding the criteria for assistance.

Additional recommendations for refugee-assisting organisations include:

1. All refugee-assisting organisations should ensure that advocacy and awareness-raising activities are conducted at all levels, including with government bodies, the general public, teachers, health workers and police, to reduce the discrimination experienced by refugee children.
2. In its areas of operation, InterAid Uganda should promote regular meetings of CPECs with schools and LC1s with the aim of raising awareness among government actors of the protection needs of refugee children and each actor's respective role in the process of protecting and caring for them. Another aim of such meetings is to strengthen these actors' relationships with refugee communities in order to reduce discrimination and improve their service provision to refugee children. Refugee-assisting organisations working in other areas should also promote such meetings.
3. Refugee-assisting organisations, including InterAid Uganda, should prioritise for assistance children living without their biological parents, along with others who may not easily access community based child protection systems (e.g. those from minority clans or tribes; children with disabilities). Such prioritisation may take the form of reviewing criteria for support and adapting as necessary so that children living without their biological parents are more systematically taken account of and supported in their programming activities.
4. Senior management of refugee-assisting organisations, including InterAid Uganda, should provide awareness-raising and training for frontline staff of refugee-assisting organisations to ensure that the latter are receiving the emotional and practical support needed to enable them to provide an effective service to refugees. This recommendation may take the form of regular supervision for individuals and groups; assistance from supervisors with particularly difficult cases; regular breaks from front-line duties; and training in how to manage their own emotions when faced with frustrated and distressed refugees.

LINKAGES BETWEEN CHILD PROTECTION ACTORS IN KAMPALA

Many of the issues in relation to linkages have already been explored. To improve connections between child protection actors working at the national level, the recommendations in summary are:

1. All refugee-assisting organisations should ensure that the criteria for receiving assistance are clear, that refugees always receive a response to a request and that the reason for the decision is explained.
2. The OPM, working in collaboration with UNHCR and existing national coordination mechanisms such as the Child Protection Working Group, should ensure that systems are put in place to increase the communication between refugee-assisting organisations and to facilitate co-ordination of activities and services. This would include, at minimum, a regular, minuted, co-ordination meeting.
3. Once co-ordination meetings and systems are established, the lead agencies—including, for the government, the OPM as well as the Ministries of Education and Gender, Labour, and Social Development—should ensure that CBCPMs are included and linked more closely with the formal child protection system. This recommendation would include inviting CBCPMs to participate in regular co-ordination meetings, planning meetings and any training events, as well as community-based staff of refugee-assisting organisations linking specifically with the identified CBCPMs.
4. Refugee-assisting organisations, including InterAid Uganda, should continue to work through community-based organisations on child protection issues rather than implementing activities and programmes directly themselves. The recently-formed CPECs will have a key role to play here, and it would be worth investing resources in developing their capacity to address some child protection issues themselves and to document and refer to the appropriate agency those they are unable to deal with. The model that exists within the Congolese community, whereby the CPECs consist of members of existing community-based organisations which are well known and trusted within the refugee community, ensures that these bodies are stable, supported and sustainable.
5. Refugee-assisting organisations, including UNHCR, should link more closely with organisations working on child protection issues in relation to Ugandan children, including UNICEF and the Probation and Social Welfare officers. Ideally, the Probation and Social Welfare officers will provide the same services to refugee children as they do to Ugandan children. Similarly, UNICEF should work with partner organisations to facilitate access for refugee children to their programmes in addition to the Ugandan children who already benefit by reviewing targeting criteria and programming guidelines to ensure the inclusion of refugee children.

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Annex 1. Research tools

Working Discussion Guide on Protection Risks and Functional Responses

Purpose: To identify the main protection risks to children, the networks that support affected children, the outcomes of various channels of help and action, and the level of satisfaction with the networks and outcomes by children, parents, community.

Participants: Seven to ten participants with attention to diversity (for example, different economic status, including the poorest of the poor; different social status, those living in difficult circumstances, etc.)

Participants will be divided into groups according to gender, age, and other criteria as decided on during the training workshop.

Time: 2 hours

- Introduction: (15 minutes)
- Activity 1: (45 minutes)
- Break, (10 minutes)
- Activity 2: (45 minutes)
- Wrap up and thank group: (5 minutes)

Resources & Materials needed:

- 1 facilitator
- 1 note taker with notepad and pens
- Audio-tape recorder (test battery beforehand)
- Spare battery for tape recorder
- 10 different items (stone, stick, cup, etc.)

I. Introduction:

Good morning. I am very happy to see all of you. Your attendance shows how much you care about your children. And as I had said earlier, this meeting is about children's welfare, and we'll be discussing your children--not other children, but your children.

My name is XXX. I am a researcher, and I work for the CPC Learning Network. We work on children's issues and want to learn how communities and groups of people ensure their children's wellbeing, what they do when their children are in trouble, how they support their children's development. This is the goal of our research. The research is not limited only to your community, it has already been carried out in three other countries. In Kampala, we have chosen a few groups of refugees, because we cannot talk to everybody. And your community was one of the communities we chose for the research.

But before we begin the research itself and begin to talk to you about how you care for your children, first, I want to tell you something very important. I want to request your permission to talk to you, to ask you questions, and record your answers. If there is anyone here who would prefer to not take part in this discussion, you are free to say that you would not like to participate. And you are free to leave.

In addition, everything that we will say to each other is confidential and will stay between us. We are not going to take anything that is said here and share it with anyone else. The people who will get a report of our discussions are the ones who will pick it apart and tell us what is good, what is helpful, or will tell us this is what happened, and that is what happened. And when we have collected information that will tell us how to better help children, we will not identify the speakers in our

report and say Mr. Joe said this, or Mr. Y said that, whether we use it to teach or to inform others. The report will be about refugees in Kampala and how people respond when things go wrong or when the wellbeing of children is at risk; these are the ways that people respond. This is the kind of research we do. It is confidential. So, I'm going to ask each of you for permission before we continue with our discussion. So, Mr. George, what do you say? Okay, Mr. George has agreed. Mrs. Isata has agreed. Everyone has agreed. So, we can now continue with our discussion because everyone had given their consent.

But again, before we start, it will be good for us to get to know each other. We cannot be here for an hour or an hour and a half, and we don't get to know each other, because we are one in this work on behalf of children. So, as I told you before, my name is XXX. Please introduce yourselves so I can get to know you. Okay, everyone has now introduced themselves. Thank you.

Now, we are going to begin the discussion we came here for about children and their wellbeing. Today, we are going to discuss what happens here, in your community, where we are now. That is what we want to discuss. We want to talk about the things that hurt children; we want to talk about the things that hurt their development. We want to talk about the things that happen to children that make them unhappy, that they do not like to experience. We want to discuss the things that happen to children that make even you their mothers and fathers unhappy. We want to talk about the things that make you as a community come together to discuss what you want for your children. So, all of those things that are not good for your children, that make you unhappy, that make your children unhappy, these are the things we want to discuss today.

But before we begin our discussion, I want you to know a couple of things. Everyone here is free to express themselves, and whatever anyone says is right. No one here is wrong, anything anyone says is right. That is the first thing. We should respect the views of everyone here because everyone is right, no one is wrong. Secondly, as I said, it is a good thing for everyone to express themselves. But if we all talk at the same time, my colleague who is taking notes here will not be able to write everything down. He will miss some of what you say. I myself will not be able to listen to all of you, and I will miss what you say. So please, as we speak, let us speak through the chairperson. Let us ask the chairperson, who is me, and we will call on who wants to speak. That way, the discussion will go well, and everyone will have a chance to speak, and everyone will get a chance to hear what their neighbor is saying. Please, don't be shy, I want all of us to be comfortable, and for all of us to speak freely. Whatever we say here will remain here.

II. Activity One: Listing and Ranking of Child Protection Risks (45 minutes)

Steps:

1. To provide a framework for the discussion, provide this explanation about the first part of the discussion:

So let's begin. The things that make children unhappy, that affects their development, that ruin their ability to be successful, that make us, their mothers and fathers, unhappy on their behalf. We don't want to talk about poverty, because poverty affects all of us. And we can talk about it today, or even for a month, and we can go on talking. So, let us put poverty aside for now. And the problems with health care and hospitals, we know that that is a problem everywhere. We, in fact, know that there aren't enough hospitals for all the areas that need them. So, please let us put that issue aside for now. Let us not discuss it, because those things are things that are out of our control. Those are things that people who do not live in this community are responsible for. They have not done what they should do. But let us look at our children, at the things that we do and that we do not do that make them unhappy, that affects their development. Those are the things we want to discuss. So, who wants to start? Who wants to be the first person to tell us about one of the problems?

2. **Ask participants:** *What makes children feel unsafe or insecure?*

3. **Ask participants:** *Are there additional problems that children experience: At home? At school? In the community?*

4. Continue until at least 5 risks have been identified. Let the process continue up to 10 items if the group is very energetic and then explain that we need to close this discussion now and decide which are the biggest or most important risks to children in their village/area.

5. **Identify Objects.** With the list of problems/threats/risks in hand, have the group identify for each problem an object that represents the problem (for example, a stick might represent a problem such as severe physical punishment). Place it on the floor/ground so that all can see it. As risks are named and objects identified, be sure that the objects are spread out to allow room for the subsequent voting/ranking process. The note-taker should record which object goes with which problem.

6. **Ranking—** Explain to the participants that they will use pebbles to rank the objects/issues in order of importance. Remind everyone what risk each item represents.

Give each participant one pebble (or locally available item such as a seed) and ask him or her to place the pebble in the basket (or circle) by the object they think is **most** important. The recorder should record how many pebbles had been placed in each basket or circle. If participants talk with each other or speak out loud, it is useful to record what they say since it can be revealing.

Identify the issue with the most votes, and report this to the participants. Then set the object representing the top ranked issue aside, and return all the pebbles to the participants (one per person). As this occurs, be sure to listen to (and record) what participants say, since some will likely make useful statements about why they see a particular issue as most important. You can also probe by asking out of curiosity why some people voted for a particular issue/object.

Ask participants to repeat the process at least two more times, with each person placing their pebble beside the remaining objects/issues that they think is most important. Continue to record how many pebbles had been placed in each basket for each object.

7. Announce the outcomes for the top-ranked issue, the second ranked issue, the third ranked issue, etc. At the end, there should be three at least three issues ranked as most important/biggest problem, second most important and third most important. If ties occur in voting, there should be another vote which involves only the tied items.

Short break (optional) – Icebreaker and small refreshment (if available). Note that although participants are not asked to talk about child protection issues during the break, they may do so spontaneously. It is valuable to listen and capture through notes what people say.

III. Activity Two (45 minutes)

Purpose: This activity provides a broad, preliminary mapping of the functional networks for support/action/services available to children and the outcomes and levels of perceived satisfaction associated with each line of support/action/service. For each of the three top-ranked child protection threats identified in Activity 1 above:

The focus will be on:

- which steps would be taken
- the people who would be involved in making the decision
- the likely outcomes of the response
- the level of satisfaction of different stakeholders with those outcomes
- which other alternatives might have been available and why they were not utilized
- recommendations for improvement of supports for children exposed to the three top-ranked child protection threats that had been identified in Activity 1 above.

Steps:

1. Tell participants: *I'd like to ask you what would happen if a child were affected by one of the three main risks/sources of harm you identified. Let's take your first ranked item, which was—[NAME the top ranked item]. Suppose this had happened to an 8-year-old girl in your community. (Or if the risk is specifically related to a boy, the example would be a boy).*

2. Ask the group the following questions:

Q: Who can a child who has been affected by this issue go to for help? Who is told about the issue?

Make a list of all the people and places that may be told about the issue or that may respond. Ask which of these is MOST TYPICAL, and explore this one by asking the following questions.

Q: What are the key steps?

Probes: Describe what would happen step by step.

Who could the child go to for help?

What would the family do?

What would the community do?

Who would be involved?

What supports would actually be provided for the child and family?

Q: Who would be the key decision makers about what would happen?

Who would be involved?

What role would be played by people/services outside the community?

Who takes the decision?

Q: What would be the likely outcomes of the responses to the problem?

What would likely happen to the child?

What would likely happen to the family?

What would likely happen to the perpetrator?

Q: How satisfied with this outcome would various stakeholders (child, family, community, people outside the community) be? Why?

Q: What other options did the child/family have?

Probes: Describe what would happen step by step.

Who could the child go to for help?

What would the family do?

What would the community do? Who would be involved?

Who would be the key decision makers about what would happen?

What role would be played by people/services outside the community?

Q: Why wouldn't other named options be used?

Would children, families, community leaders know about this option?

Why or why not?

Would it be viewed as less safe? Less appropriate? Less effective? Please explain why.

Q: Is there a legal responsibility related to this problem?

Who would it be reported to? (for example, Police? Social workers?)

Who would report this problem?

What would be the response of the agency/person it was reported to?

If not reported, why not?

Q: What recommendations would you make for better ensuring that the child is protected from harm and that the risks of the harm re-occurring are minimized?

What might have made it easier for the child to seek or access help?

How could the help/services that the child received have been made better?

Who else should have been involved in the process? What could be changed so that they become involved in the future?

Is the risk that the harm will re-occur still present? If so, what could be done to minimise this risk?

3. Repeat the process, focusing on the second-ranked item.

4. Repeat the process, focusing on the third-ranked item.

Don't worry if you run out of time since other risks and responses can be explored in the in-depth interviews.

5. **Conclude** by thanking the participants for their time

Working tool for conducting in-depth interviews on local CBCPMs

Purpose: To have open-ended, in depth interviews with youth and adults about their views of childhood, the threats to children's wellbeing and the responses to those threats in their village or town; to use good listening and probing skills as you speak with adults and youth about how they respond to and prevent threats to children's safety.

Participants: A national researcher and individual members of a village, community group, local government or non-governmental organization.

Materials

- Notebook
- Pen
- Tape recorder

Length of Activity

The length of an in-depth interview should last long enough to answer the key questions of the research project. It is important to stop an interview if the interviewee is tired.

What is an in-depth interview

An in-depth interview is an intensive exploration of an individual's perspective or experience of the key questions of a research project. It should give you detailed information about an individual's perception of childhood, children's safety, and the responses to threats to children's wellbeing that he or she is aware of.

What are the characteristics of an in-depth interview?

It is unstructured: This means it is guided by a set of questions, but it is not administered as a questionnaire. It is more flexible than the formal, structured format of the questionnaire. The questions are there to guide the conversation and to gather the information relevant to the purpose of the research. Translate the key questions to make them understandable while keeping them intact.

It is controlled by the participant: It follows the lead of the participant. Allow the interviewee to determine how he or she will respond, while you pay attention to the key research questions. The goal is to give the participants a lot of room to express themselves and go

into depth about their views, perceptions, and knowledge. Make use of good interviewing techniques to arrive at your answers, like, listening actively, using prompts, and asking interviewees to tell you more about a response.

The interviewee's responses have depth Simple yes or no answers are not adequate in an in-depth interview. Ask your questions in such a way that the respondent offers rich, complex answers. This can be achieved by asking good open-ended questions. A closed question only has a yes or no answer, whereas an open ended question gives the respondent the opportunity to fill in the content of his or her answer. Probes should be used as much as possible: to clarify issues or to understand more and elicit adequate answers from respondents; help to structure and direct the interview and reduce irrelevant and ambiguous answers.

What are the Key Questions of the research project?

The key questions of this research project are listed below and should guide your interviews. Read them as often as you can so that they inform what you listen for as you conduct interviews, and what you write down as you make notes.

The questions are **not** a questionnaire and should not be administered as such. Phrase the questions in the best way possible for your interviewees to understand them and be able to offer details.

How do local people understand:

1. What are girls' and boys' normal activities, roles, and responsibilities?
2. What role is education perceived to play in children's development and protection?
3. What are the main child protection risks or sources of harm to children? Are these the same for in-school and out-of-school children?
4. What processes or mechanisms are used by families or communities to support children who have been affected by various protection threats?
5. What steps do {families, communities, schools} take to prevent or avoid these harms from happening to children?
6. What processes or mechanisms are used by families or communities to support out-of-school children? What are the outcomes of those mechanisms, and how satisfactory are the outcomes in the eyes of different stakeholders?
7. How do child protection risks vary by gender and age?
8. To whom do girls or boys turn to for help when protection threat X arises? Who are the natural helpers and what networks do they have? Are these natural helpers and networks linked to the education system?
9. What are the endogenous, 'traditional' mechanisms of protection and how are they regarded by different groups? Apart from indigenous mechanisms, what groups or structures (e.g., Child Protection Committees or community based child protection mechanisms facilitated by NGOs) exist in communities and/ or refugee camps?
10. What do communities do to promote school enrolment? Are CBCPMs actively involved in supporting or advocating for children's access to school? Are CBCPMs actively involved in supporting or advocating for safer schools?
11. Who has or does not have access to existing protection mechanisms (e.g., do refugees have access to the same mechanisms as their host populations)?
12. Who has or does not have access to education(e.g. do refugees have access to the same mechanisms as their host populations)? Are there linkages between protection mechanisms and schools?
13. Are there benefits of education to the protection of children? If so, what are they?
14. What are the linkages of community mechanisms with the formal elements of the child protection system? How do communities perceive formal mechanisms and structures and do they use them? If not, why not?

Planning for and carrying out an in-depth interview

The following sections will give you some tips and tools on carrying out an in-depth interview. It is structured as a 'before', 'during' and 'after' guide.

Before the interview

It is recommended that you spend some time doing participant observation and facilitating group sessions before you begin conducting interviews.

During the period of participant observation and group activities, you will meet the people of the village in different settings. Begin to think about and schedule your in-depth interviews.

- While you are conducting participant observation, you will have plenty of casual and open conversations with your informants. Pay attention to those children, youths and adults who will be good candidates for in-depth interviews. Choose them so that you will have a range of perspectives from different social groups: men, women, boys, girls, officials, traders, school teachers, etc. They may be members of community groups or they may be grandmothers or grandfathers who are knowledgeable about the goings-on the village.
- Schedule your interview. Explain the purpose of the interview to the interviewee and why you have chosen to speak with them. Tell them approximately how long the interview will last.
- Also pay attention to work schedules for both men and women in the community and work around their schedules. For example, if a majority of women work around the clock, go to the farm, and then come back home to prepare the evening meal, it would be useful to observe when they are a bit relaxed and to enquire about what they see as free time

What to bring to an interview

Tape recorder

- Before you arrive for your interview, always check your tape recorder to make sure that the batteries are charged. You do not want to run out of power during a very interesting or important conversation.

Notebook and pen

- Take running notes during your interview. Write down your interviewees' responses verbatim as much as you can. The tape will help you fill in the blanks later. Running notes will save you time as you write up the transcript from the interview.
- Do not let time elapse between the time of the interview and the write up of the notes or transcript.

Beginning the interview

- **Find a comfortable place to talk** Make sure that you and your interviewee are in a quiet place, or in an environment in which you are both comfortable and can speak without fear or hesitation. Avoid secluded places.

The first tasks of an interviewer are ethical. Following the ethical protocol will help to build trust between you and the interviewee.

- **Informed Consent** Inform the interviewee about the purpose of the research. Ensure that the interviewee understands the aims and limits of the project. Get oral or written consent from the interviewee to participate in the research.
- **Confidentiality** Inform the interviewee that anything shared during the conversation will be kept confidential and be used only to meet the goals of the research project.

- **Permission to tape** Some interviewees may be uncomfortable about being taped. Ask the interviewee's permission to tape the interview.

As an introduction, you might want to say something like:

I would like to learn from you about childhood and children's development. I want to request your permission to talk to you, to ask you questions, and record your answers. You are free to say that you would not like to participate and you are free to leave. Everything that you will say is confidential and will stay between us. You are free to express yourself, and there are no right or wrong answers. Do you give your permission to be interviewed?

During the Interview

You will be able to have successful in-depth interviews if you use good and effective interviewing techniques.

The most effective techniques are **active listening skills** and **knowing how to ask good questions**, particularly the use of probing questions.

Active listening skills An active listener is an alert and engaged listener who communicates interest in and respect for what an interviewee has to say. Active listening

- Be attentive and alert – While the participant is speaking, use verbal and non-verbal expressions of attention that are appropriate for the setting. You can intermittently say 'yes' or 'uh-huh'; use what is linguistically and culturally appropriate. Non-verbal cues often use body-language. This could be expressed by nodding your head, having an open facial expression and not crossing your arms.
- Use silence to listen effectively – Do not overdo the expressions of attention. Silence can allow space into the communication and give the interviewees room to hear themselves and think more clearly. While being silent, remain engaged and attentive by using open and friendly facial expressions and body language.
- Do not interrupt the flow of your interviewee's responses – Allow the speaker to get to the end of his or her sentence. Jot down an interesting or important question and ask it later.
- Keep your opinions and personal stories to yourself – Sharing your personal opinions takes the focus from the research project and the goals of ethnographic enquiry, which are the views and opinions of the people who live in Somaliland and Puntland on childhood and the threats to children's safety

Asking good questions

- Ask open-ended questions – Open questions do not have yes or no answers. An example of a closed question is —Are girls more likely to work in the kitchen than boys? The answer here is yes. An open question would be —How do the responsibilities of girls and boys differ in the home?
- Do not ask leading questions – leading questions contain the answers in the question and do not give the respondent a choice in the answer. For example, a leading question would ask —Is child beating one of the ways in which children's well-being is threatened in the village? A non-leading question would be —Tell me about one of main child protection risks in this village?
- Ask probing or exploratory questions – This is useful when you are looking for information that has been left out of a respondent's answer. For example, you can say, —Tell me more about that. —Anything else? —What do you mean?

- Use prompts – They can communicate that you are listening, like the non-verbal —enh henh or a more verbal prompt like —Really? They can also help the interviewee to continue their train of thought and deepen it.

What are the prompts of the language you will be using?

- Use repetition as a form of feedback – Repeat the last word or phrase of interviewee’s answer. This can encourage them to say more, and it indicates that you are listening.
- Don’t editorialize i.e. do not add comments to the key questions that express your opinion about them. For example, an editorial question would say —It must be very difficult for children in foster care who are regularly punished. Is foster care a child protection risk? This is also a leading question.
- Ask naïve questions – Naïve questions allow you to set aside your prior assumptions about the subject you are researching. They are basic questions that can lead to in-depth answers with information you may not get otherwise. For example, a naïve question is —What makes someone a child?

Some useful questions for in-depth interviews

Questions we might be interested in asking during in-depth interviews include the following. However, it is important to remember that these questions are not to be asked as though they were a questionnaire – phrase them in your own way, and be led by the interviewee and their interests.

CHILDHOOD

1. What is childhood like for boys?
2. How do boys develop?
3. What is childhood like for girls?
4. How do girls develop?
5. What are the normal activities, roles, and responsibilities for boys? For girls?
6. What can, and cannot, boys do? What are the taboos? For girls?
7. When do boys start working? When do girls start working?
8. How do boys begin working and what type of work do they do?
9. How do girls begin working and what type of work do they do?
10. What do boys do for recreation? When and where does it occur? For girls?

RISKS AND HARMS

11. What are the main child protection risks or harms to children?
12. How do child protection risks vary by gender?

PREVENTION

13. What steps do families take to prevent or avoid these harms from happening to children?
14. What steps do communities take to prevent or avoid these harms from happening to children? What do schools do to prevent harms happening to children?

RESPONSES

15. What mechanisms or processes are used by families or communities to support children affected by these harms?
16. What are the outcomes of these mechanisms or processes?
17. How satisfied are the parents with the outcomes?
18. How satisfied is the child?
19. How satisfied are community members?
20. Whom do boys turn to for help when a protection threat arises? Whom do girls turn to?

MECHANISMS, STRUCTURES & NETWORKS

21. Who are the natural helpers and what networks do they have?

22. What are the traditional mechanisms of protection and how are they regarded by different groups?
23. What other groups or structures exist in the community to protect children (for example, an NGO)?
24. How are these perceived by local people?
25. What are their roles, responsibilities, and functions?
26. What religious supports help to respond to various harms or to prevent those harms from occurring?
27. What do government and NGOs see as their main roles and responsibilities in regard to child protection in communities?
28. How do communities perceive government mechanisms such as police and the legal system?
29. How are very sensitive/complex issues addressed?
30. Who has or does not have access to existing protection mechanisms (for example, do the poorest of the poor or orphans or people not related to community leaders have access)?

LINKAGES

31. What are the linkages of community mechanisms with the national child protection system?
32. What are the gaps in those linkages?
33. How should those gaps be bridged, and by who?

Working with difficult informers

- Be patient – The most effective response to difficult interviewees is patience. Be patient and communicate empathy.
- Show respect for their time and opinions even if you disagree with them.
- What are their concerns? – If their concerns are about the project itself, give them some room to discuss their concerns about the research project. It could be helpful information.
- If an interviewee is resistant or unresponsive – Ask them questions about their lives or about another topic that is easier to talk about. Then return to the research questions.

Other things to consider

- When women/girls or men/boys cannot speak freely in front of the other group, arrange for separate interviews and, if necessary, arrange for each group to be interviewed by a researcher of the same sex/gender.
- Be sensitive to other factors that may influence gender relations in the families and communities-- lack of services, migration, politics, etc.
- Be aware of the power dynamics between researcher and participant, even if of the same gender and ethnic group.

Concluding the interview

- Thank your interviewee for his or her time
- Ask them if you can follow up with them if you need to make clarifications

TOOL ON BODY MAPPING ACTIVITY

Purpose:

To understand the perspectives of children, including younger children, with regard to their likes and dislikes, as well as sources of harm and support for them.

Parents' permission

Before beginning the body mapping activity, get informed consent from the child's parent/guardian before talking with the children. Explain to the parents that you will be playing a game with children that asks them what they like and don't like, to understand children's sources of well-being and distress.

Materials:

Sheet of paper, approximately 1 meter by 1.5 meters. 1 box of crayons

Participants:

Approximately 10-12 children ages 6 to 10, with separate groups for boys and girls.

Before beginning, get informed consent from the children.

Procedure:

1. Gather the group of children and ask for one child to volunteer to have their body traced
2. Ask for a child to volunteer to trace the outline of the child as s/he lies on the paper
3. Ask the children to color the drawing (give each child one crayon)
4. Ask the children to make up a name for the figure that was drawn
5. Ask the following questions and write all the answers on a separate sheet of paper. Encourage all children to provide an answer. For each question, point to the part of the body that the question is asking about:
 1. What do eyes like?
 2. What do eyes not like?
 3. What do ears like?
 4. What do ears not like?
 5. What do noses like?
 6. What do noses not like?
 7. What do mouths like?
 8. What do mouths not like?
 9. What does the head like?
 10. What does the head not like?
 11. What does the heart like?
 12. What does the heart not like?
 13. What does the stomach like?
 14. What does the stomach not like?
 15. What do hands like?
 16. What do hands not like?
 17. What do feet like?
 18. What do feet not like?

Thank the children for talking with you!

KEY INFORMANT INTERVIEW QUESTIONS: TEACHERS

Child Protection Issues

1. What are the main sources of harm to children in the school environment?
 - a. Are there differences between the sources of harm experienced by refugee children and by Ugandan children?
 - b. Are the sources of harm the same or different for boys and girls?
 - c. Are the sources of harm the same for all age groups?
2. How does education help in development and protection of children?
3. What is the advantage of education to child protection?
4. Do boys and girls equally have access to education?

Child Protection mechanisms

5. What steps are taken to support children affected by harms at school?
6. Which steps are in place at school to prevent harms at school?
7. What do teachers do to encourage or promote enrolment and retention of children in school?
8. To whom do children go for help when they are faced by harm?
9. How do teachers act in case a child misses school?
10. What do teachers do to make school a safer place for children?

Linkages

11. How is the community supportive to education?
12. What roles do government and NGOs play in the promotion of education?
13. What are the steps government and NGOs take to ensure that all children access education?
14. What do teachers do to address a risk faced by a child out of school environment?

KEY INFORMANT INTERVIEW QUESTIONS—NGO CHILD PROTECTION WORKERS

Child Protection Issues

1. What are the main sources of harm to refugee children in this community?
2. Are there differences between the sources of harm experienced by refugee children and by Ugandan children?
3. Are the sources of harm the same or different for girls and boys? Please explain.
4. Are the sources of harm the same or different for children of different ages? Please explain.

Child Protection Mechanisms

5. Please describe the community system or mechanisms of child protection.
6. What do you see as the main strengths and weaknesses of the traditional community mechanisms for protecting children?
7. What NGO or other externally facilitated or supported child protection mechanisms are there in the community? For each, ask:
 - Who are the members and how were they selected?
 - What kind of training or capacity building have the members received?
 - What are their roles and responsibilities? How are they intended to work?
 - When does the Committee or mechanism make referrals and to whom? Please describe the process.
 - What are the strengths and weaknesses of this mechanism? How effective is the mechanisms and what challenges does it face?

8. How does coordination occur across the various community mechanisms for child protection?
9. What are the main gaps in the community system of child protection?
10. What should be done to strengthen community-based child protection mechanisms?

Linkages With the National System

11. Does this community have access to any government employees (e.g., Social Workers) or mechanisms/services (e.g. police Child Family & Protection Units) that are active on child protection? If so, ask:
 - What kinds of cases are referred to them and how (e.g., via referral from the religious leaders, direct contact by the family, etc.)?
 - What are their roles and responsibilities?
 - How are they intended to work?
 - How are they viewed by community members?
 - How effective are they?
12. How effective is the mechanism or worker? What are their successes? What challenges do they face?
13. How would you describe the relationship and connections between community-based child protection mechanisms and aspects of the national child protection system such as government workers or services?
14. What should be done to strengthen the linkages between community-based child protection mechanisms and the national child protection system?

KEY INFORMANT INTERVIEW QUESTIONS—CHILD PROTECTION AND EDUCATION COMMITTEE MEMBER

Child Protection Issues

1. What are the main sources of harm to refugee children in this community?
2. Are there differences between the sources of harm experienced by refugee children and by Ugandan children?
3. Are the sources of harm the same or different for girls and boys? Please explain.
4. Are the sources of harm the same or different for children of different ages? Please explain.

Child Protection and Education Committee (CPEC) and Linkages

5. Who are the members and how were they selected?
6. What kind of training or capacity building have the members received?
7. What are their roles and responsibilities? How are they intended to work?
8. When does the CPEC make referrals and to whom? Please describe the process.
9. How does the CPEC link and coordinate with other responders (e.g. LC, religious leaders, teachers)?
10. Are there any international NGOs that work on child protection in your community?
 If so, ask who participates, what are their roles and responsibilities, how are they linked with or involved in the work of the CWC, how effective are they, and what challenges do they face? Do they work specifically with refugee children?
11. Do people in your community have access to any government employees (e.g., Social Workers) or mechanisms (e.g., Child Family and Protection Units) that are active on child protection? If so, ask:

What kinds of cases are referred to them and how (e.g., via referral from the LC, direct contact by the family, etc.)? Do they work specifically with refugee children? What are their roles and responsibilities? How are they intended to work? What are your roles and responsibilities with respect to the mechanism or worker?

12. How effective is the mechanism or worker? What challenges do they face?

Effectiveness and Recommendations

13. How well do the CPECs work at present? What challenges do they face?

14. What should be done to strengthen them?

KEY INFORMANT INTERVIEW QUESTIONS: LC OR VICE FOR WOMEN AND CHILDREN

Child Protection Issues

1. What are the main sources of harms and risks to refugee children in this community?
2. Are there differences between the sources of harm experienced by refugee children and by Ugandan children?
3. Are the sources of harm the same or different for girls and boys? Please explain.
4. Are the sources of harm the same or different for children of different ages? Please explain.

Child Protection Mechanisms

5. What kind of harms to refugee children do you deal with?
6. How do you find out about them?
 - a. Do children report to you directly?
 - b. If not, who reports to you?
7. How do you respond when you receive a report that a child has been harmed? [ask about each step in the process]
8. Who do you talk to or refer to?
9. How are these problems solved? Who makes the decisions?
10. Which other organisations or institutions or individuals do you work with to solve problems affecting refugee children's safety?
11. What are the roles and responsibilities of these organisations or institutions or individuals?
12. How well does the system to protect refugee children actually work? What challenges does it face?
13. How well or poorly enforced are the national laws regarding refugee children's well-being?

Relations between Government and Traditional Mechanisms of Child Protection

14. At present, what is good about relations between government employed people or mechanisms of child protection and traditional mechanisms and leaders on child protection?
15. What gaps or problems are there in the relations or connections between the two?
16. What should be done to improve the linkages between traditional mechanisms and government mechanisms of child protection and well-being?

KEY INFORMANT INTERVIEW QUESTIONS: POLICE

Child Protection Issues

1. What are the main sources of harms and risks to refugee children in this community?
2. Are there differences between the sources of harm experienced by refugee children and by Ugandan children?
3. Are the sources of harm the same or different for girls and boys? Please explain.
4. Are the sources of harm the same or different for children of different ages? Please explain.

Child Protection Mechanisms

5. What kind of harms to refugee children do you deal with?
6. How do you find out about them?
 - a. Do children report to you directly?
 - b. If not, who reports to you?
7. How do you respond when you receive a report that a child has been harmed? [ask about each step in the process]
8. Who do you talk to or refer to?
9. How are these problems solved? Who makes the decisions?
10. Which other organisations or institutions or individuals do you work with to solve problems affecting refugee children's safety?
11. What are the roles and responsibilities of these organisations or institutions or individuals?
12. How well does the system to protect refugee children actually work? What challenges does it face?
13. How well or poorly enforced are the national laws regarding refugee children's well-being?

Relations between Government and Traditional Mechanisms of Child Protection

14. At present, what is good about relations between government employed people or mechanisms of child protection (e.g. police, LC) and traditional mechanisms and leaders on child protection?
15. What gaps or problems are there in the relations or connections between the two?
16. What should be done to improve the linkages between traditional mechanisms and government mechanisms of child protection and well-being?

KEY INFORMANT INTERVIEW QUESTIONS—PROBATION AND SOCIAL WELFARE OFFICERS

Child Protection Issues

1. What are the main sources of harm to refugee children in this community?
2. Are there differences between the sources of harm experienced by refugee children and by Ugandan children?
3. Are the sources of harm the same or different for girls and boys? Please explain.
4. Are the sources of harm the same or different for children of different ages? Please explain.

Social Work/ Probation

5. What are your main roles and responsibilities as a social worker/ probation officer?
6. If you do case management, please describe the process, including referrals.
7. How do you connect with or coordinate with community-based child protection mechanisms such as indigenous processes, CWCs, or committees facilitated by external NGOs?

Child Protection Mechanisms

8. Please describe the community system or mechanisms of child protection.

Ask probing questions about what happens when issue X occurs—who does a child go to for help, what happens next, what are the perceived outcomes, and who is happy or not happy with the outcomes.

9. What do you see as the main strengths and weaknesses of the traditional community mechanisms for protecting children?
10. What NGO or other externally facilitated or supported child protection mechanisms are there in the community? For each, ask:
- Who are the members and how were they selected?
 - What kind of training or capacity building have the members received?
 - What are their roles and responsibilities? How are they intended to work?
 - When does the Committee or mechanism make referrals and to whom? Please describe the process.
 - What are the strengths and weaknesses of this mechanism? How effective is the mechanisms and what challenges does it face?
11. How does coordination occur across the various community mechanisms for child protection?
12. What are the main gaps in the community system of child protection?
13. What should be done to strengthen community-based child protection mechanisms?

Linkages With the National System

14. Does this community have access to any government mechanisms/services (e.g. police Child Family & Protection Units) that are active on child protection? If so, ask:
- What kinds of cases are referred to them and how (e.g., via referral from the LC, direct contact by the family, etc.)?
 - What are their roles and responsibilities?
 - How are they intended to work?
 - How do relate or connect with them?
 - How are they viewed by community members?
 - How effective are they?
15. How effective is the government mechanism at responding to refugees' child protection issues? What challenges do they face?
16. How would you describe the relationship and connections between community-based child protection mechanisms and aspects of the national child protection system such as district workers or services?
17. What should be done to strengthen the linkages between community-based child protection mechanisms and the national child protection system?

KEY INFORMANT INTERVIEW QUESTIONS: RELIGIOUS LEADERS

Child Protection Issues

1. What are the main sources of harms and risks to refugee children in this community?
2. Are there differences between the sources of harm experienced by refugee children and by Ugandan children?
3. Are the sources of harm the same or different for girls and boys? Please explain.
4. Are the sources of harm the same or different for children of different ages? Please explain.

Child protection mechanisms

5. What do religious organisations do to protect children from these risks and harms? [Prevention]
6. When children experience certain risks [specify those mentioned], how do religious leaders and organisations respond?
7. What kind of cases are referred to you? How are they referred (e.g. by LC, or direct approach by family members)?
8. Which other organisations or services (NGO, government, informal) are involved in responding when refugee children are harmed in this community?
9. How effective are these responses?
10. What are the gaps?
11. What are the linkages between religious leaders and these other elements of child protection [give examples]?

KEY INFORMANT INTERVIEW QUESTIONS—ELDERS & COMMUNITY LEADERS

Child Protection Issues

1. What are the main sources of harm to refugee children in this community?
2. Are there differences between the sources of harm experienced by refugee children and by Ugandan children?
3. Are the sources of harm the same or different for girls and boys? Please explain.
4. Are the sources of harm the same or different for children of different ages? Please explain.

Child Protection Mechanisms

5. Please describe the community system or mechanisms of child protection.
6. What do you see as the main strengths and weaknesses of the traditional community mechanisms for protecting children?
7. What NGO or other externally facilitated or supported child protection mechanisms are there in the community? For each, ask:
8. Who are the members and how were they selected?
9. What kind of training or capacity building have the members received?
10. What are their roles and responsibilities? How are they intended to work?
11. When does the Committee or mechanism make referrals and to whom? Please describe the process.
12. What are the strengths and weaknesses of this mechanism? How effective is the mechanisms and what challenges does it face?
13. How does coordination occur across the various community mechanisms for child protection?
14. What are the main gaps in the community system of child protection?
15. What should be done to strengthen community-based child protection mechanisms?

Linkages With the National System

16. Does this community have access to any government employees (e.g., Social Workers) or mechanisms/services (e.g. police Child Family & Protection Units) that are active on child protection? If so, ask:
17. What kinds of cases are referred to them and how (e.g., via referral from the religious leaders, direct contact by the family, etc.)?
18. What are their roles and responsibilities?
19. How are they intended to work?
20. How are they viewed by community members?
21. How effective are they?
22. How effective is the mechanism or worker? What are their successes? What challenges do they face?
23. How would you describe the relationship and connections between community-based child protection mechanisms and aspects of the national child protection system such as government workers or services?
24. What should be done to strengthen the linkages between community-based child protection mechanisms and the national child protection system?

TOOL ON NOTE-TAKING: TIPS AND STRATEGIES

In order to take good notes, practice active listening.

Take notes during interviews and group discussions using one of the following strategies:

1. Running notes or a close-to-verbatim record of what has been said
2. Jottings of key words and phrases as the interviewee states them
3. Categories, e.g., (a) main points, (b) related points, (c) examples

What you should listen for:

The main points: When an interviewee responds to a question, what are the main points he or she makes?

Key words and phrases: What are the key words and phrases that express these points?

Elaboration: How does s/he elaborate on those points?

Examples: Does s/he give examples? Does she explain what she means?

Repetition: Does s/he repeat words? Repeated words and phrases are important. **Do not** reproduce them when you reconstruct your jottings or notes into a compressed transcript.

Non-verbal cues: What is the body language of the respondent? What does his or her body language express?

Writing a condensed transcript

The document you are expected to prepare for each in-depth interview or group discussion is a condensed transcript. A condensed transcript is an accurate, comprehensive, reconstruction of the respondent's own words from your jottings or running notes. Use the tape recorder to fill in omissions and to check that you have used the exact terms used by the respondent.

Don'ts

- Don't rephrase the respondent's words in your own words.
- Don't describe the interview.
- Don't omit vivid, concrete statements.

Dos

- Use the respondent's own words
- Use verbatim quotations
- Make running notes
- Use abbreviations to speed up your writing

The best way to understand how to build an accurate condensed transcript is to consider a verbatim transcript and examine possible jottings that an alert interviewer might have taken during the interview. Then we will consider one unacceptable example and one acceptable example of a condensed transcript that was prepared following the interview. These are presented in order below.

Full Verbatim Transcript

I: Mary, I understand that, you told me that you had spent time with the RUF in the bush, and that now you're back home in your village of origin. I'd like to learn a little bit more about your situation. What can you tell me about your situation and the kinds of challenges you face.

R: It has been so hard since I came back. I came back I did not even have a piece of cloth to cover myself, and when I came back, the people they treated me like dogs. My baby is sick, he has malaria, and how can I get the medicine. The health post is far, and I don't even have 10 Leones. How can I take him to the health post? How can I get him to be well? My parents, they reject me and they reject my baby. They call him rebel child. They do not even call him by his name. And then his father, he does not help, he has gone back to the bush, but he comes around and he want me to come with him and to have sex with him. And what can I do I do not want to be with him. He raped me. He has treated me badly and has beaten me. But what can I do, I need something. Sometimes he has given me money but most times he gives me nothing, he just abuses me. He says bad words. He beats me. There was a man I met on my way back when coming to Freetown, he took me into his house and he gave me food and let me sleep on his bed, but now he went out and one day he was cutting a tree and it fell on him and now he's dead and I have nothing. And I come back and my parents won't even let me eat off the same plate, they throw me in the corner like dogs. They're afraid of me, and what have I done. They say that I'm . but what have I done, I'm a child, I'm only 16.

I: What does this mean, you cannot eat off the same plate? What does that mean to you?

R: They've rejected me. When they eat, they eat all the best parts and they just throw me in the corner like a dog.

Jottings – an example

- Understand. Time. RUF. Bush. Family. Challenges.

- So hard. Cloth cover. Treat like dog. Baby sick malaria. Health post. 10 Leones. Parents reject me. Baby rebel child. Father wants me sex. Treated badly raped. Sometimes money. Beats me. Abuses me. Man took me in. house. Food. Sleep in his bed. Man dead. Tree fell. Parents afraid of me. Throw me in corner. Eat off the same plate. Afraid of me. What have I done? I'm a child. Only 16.

- Mean? Same plate

- Rejected me. Throw in corner like a dog.

Below are two examples of reconstructed interviews. The first is an unacceptable transcript. The second is a condensed version of the full transcript. Notice the format of the second.

Unacceptable

The interviewer said to the respondent that he understood that she spent time in the bush with the RUF. He asked her, "What are the challenges of your situation?" She said her life has been difficult and she doesn't even have a blanket to cover herself and her baby at night. She looked angry and traumatized. She said she was treated like a dog and her baby was sick with malaria. She could not even take him to the hospital. The respondent said she had been rejected and disowned by her parents and her baby was called a rebel child. The father of her baby was a rebel man and he came around sometimes but he only came to have sex and he treated her badly. She came back to her parents but they said they were afraid she would bring them bad luck. They threw her food in a corner and gave her leftovers. She was treated like a dog. She has been rejected by her parents.

What is wrong with this reconstruction? Identify the following:

- What words are not the respondent's words?
- What important points did the interviewer leave out?
- What facts have been altered?
- What statements are inferences and reflect the analysis of the interviewer?

Acceptable

In-depth Interview 1.0

Freetown, Sierra Leone

January 26, 2011

I: I understand you spent time in the bush with the RUF. Now you are back in your village. Tell me about your situation and the challenges you face.

R: (Respondent is agitated. She is seated upright and speaks loudly.) It has been so hard since I came back. I do not even have a piece of cloth to cover myself. People treated me like a dog. My baby is sick with malaria, but I don't even have 10 Leones to take him to the health post. My parents have rejected me and my baby. My baby is called a rebel child. His father has gone back to the bush, and when he comes around, he wants sex, but I don't want to be with him because he raped me and beat me. Sometimes, he gives me money. On my way back to Freetown, another man had taken me in, gave me food and let me sleep on his bed, but a tree fell on him and he died. I came back but "my parents won't even let me eat off the same plate." They are afraid of me. "What have I done? I'm a child, I'm only 16."

Working Guide on Research Ethics

Research often causes unintended harm by violating the principles of confidentiality or informed consent, or stigmatising particular groups of people. If conducted in an extractive manner, the research process may raise expectations, create frustration, and lead affected people to mistrust outsiders. In the process of exploring sensitive topics or issues, research may pick open people's wounds and leave people in a more vulnerable condition than they had been in previously. Research may also increase power imbalances that cause particular people or groups of people to be vulnerable. Researchers may also use their own power to exploit the research participants.

A high priority in this research is to respect the humanitarian imperative Do No Harm and to adhere to appropriate ethical standards. This section outlines these principles, the review process for insuring that they are upheld, and practical guidelines for implementation.

Ethical Principles

- 1. Humanity.** The researchers and the research process shall respect the rights of all people and treat all women and men and boys and girls of all ages in a humane manner that supports their dignity, saves lives, and alleviates suffering.
- 2. Impartiality.** The research will not discriminate against particular people or groups of people and will insure that assistance is provided according to people's needs and rights.
- 3. Neutrality.** The researchers and the research process will neither take sides in hostilities nor stir or participate in political controversies or processes.
- 4. Beneficence.** The research will have discernible benefits—including benefits that relate to information and social improvement—to the participants and affected people. As explained below, this principle requires that the research will not be extractive and will include specific steps that benefit the participants and other affected people.
- 5. Nonmaleficence.** The research will take appropriate steps to prevent and mitigate physical or emotional harm to the participants and other affected people. The research process will include specific, contextually appropriate steps to prevent and minimize harm by protecting confidentiality, insuring informed consent, and requiring adherence to a Code of Conduct.
- 6. Best interests of the child.** The research will respect and protect the best interests of children, defined under international law as people under 18 years of age. It is recognised that the well-being of children is closely interconnected with that of their parents, extended family, and community.

Policies and Practical Guidelines

Child Safeguarding Policy

The researchers and any of their support staff (e.g., drivers, translators) who have contact with children will adhere to the Code of Conduct. Cases of abuse, exploitation, violence, or neglect will be reported to the InterAid Uganda Programme Associate at the end of the data collection phase. The exception is when the abuse is extremely serious (i.e. an immediate life-or-death situation), in which case the researcher should use their judgement about how to best respond.

Specific steps to take include:

- Adhere to national laws and policies.
- Support the rights of children.

- Report suspected infractions of the child safeguarding policy to InterAid Uganda Programme Associate, the Research Co-ordinator or the Lead Researcher.
- Avoid all actions that could count as abuse, exploitation, violence and neglect toward children.
- Avoid all forms of abuse, exploitation, violence and neglect in relations with adults since these, too, violate human rights and create an enabling environment for violations against children.

Supporting People's Dignity

The way in which researchers conduct themselves and interact with local people can support or undermine people's dignity and well-being. It is vital to respect local people and customs and to avoid behaviour, dress, or attitudes that local people may regard as demeaning or inappropriate. Specific steps for supporting people's dignity are to:

- Treat each individual in a respectful manner.
- Be friendly and kind in all interactions.
- Dress and behave in ways that are locally appropriate.
- Be aware of and respect gender norms.
- Take a stance of participant observation and learning about local practices, avoiding passing judgment on local beliefs or practices.
- Be sensitive to people's schedule. For example, it is best not to ask people for interviews at the time when they normally go to tend their fields.
- Avoid political debates, criticising others, or imposing your own views.

Informed Consent

Participation in research must be voluntary, and people must be free to decline or end participation without any negative consequences. Decisions to participate should be informed by an understanding of the purpose of the research, how and what information will be collected, how the information will be used, and potential risks and benefits to participants. Where participants are children, informed consent must be obtained from the children themselves and from their parents.

Obtaining informed consent is inherently difficult for many reasons such as the power imbalance between researchers and participants, the pervasive expectations that participation will bring material improvements now or subsequently, the prevailing norms of hospitality, and the perceptions of local people about the Chief's expectations, among others. In many situations obtaining written consent is not feasible because of low literacy levels and prospective participants' fears that written documents will be used against them. Because of the fluid, unforeseeable nature of the situation, it is important to treat informed consent as an ongoing process rather than a one-off action.

Specific steps to insure informed consent are to:

- Use a child friendly approach in explaining to children the purpose of the research, what and how information will be used, their right to say —No without negative consequences, etc.
- If the participant is a child, obtain the informed consent of both the child and his or her parent or caretaker.
- Tailor to local circumstances the approach to obtaining informed consent. Where appropriate, use letters and request signatures to indicate voluntary and informed consent.

- Do not accept a community leader’s statement that everyone will participate as informed consent. The process of obtaining informed consent must be implemented for each individual.
- Avoid the tacit coercion that can occur, for example, if a parent tells a child ‘you should participate’ or if a community leader says ‘we should welcome the researchers and answer their questions.’ Explain informed consent to the person in power and ask them to explain to others that they are free not to participate and that there will be no disadvantages or penalties for people who elect not to participate.
- Manage expectations by explaining in simple, clear language that no material benefits will come through participation in the research.

Confidentiality

The research participants will be informed that the information they provide is confidential. The researchers will not share publicly information such as names that could be used to identify specific individuals or sources of information. Where identity information is collected, it will be maintained in a separate, locked file, and will be made available only to people who have a legitimate need to know. Specific steps to insure confidentiality are to:

- Conduct discussions in a private setting. If there are departures from privacy, make sure all the participants know who else is present and listening or observing and give their informed consent to continue.
- Keep any records of names and other identifying information in a safe, locked place that is not open for public access.
- Do not leave confidential files open on a desk or computer. Always close them and put them out of public access even if you leave your desk only for a minute or two.
- Use general descriptors (e.g., 13-year-old girl) rather than a specific name or other identifying information in writing up one’s data and reports.
- Share information from one’s field notes, including identifiers, with members of the research team but not with people outside the research team.
- Hold in strict confidence information about specific cases of abuse, exploitation, violence, and neglect, sharing information only with InterAid Uganda Programme Associate, the Research Co-ordinator or the Lead Researcher.

Psychosocial Support

The research is not designed to collect information about particular cases since the questions asked pertain to hypothetical situations. Nevertheless, it is possible that in the course of discussions, a participant might become upset because she recalls painful events such as having been abused herself. Key steps in preventing and handling such a situation are to:

- Identify in advance of the research a natural helper or social worker who could provide psychosocial support to someone who is distressed by the discussions. In Somaliland, this might be someone from the Child Protection Committee.
- Attend to people’s nonverbal reactions, and discontinue the discussion if the participant becomes upset.
- Provide compassionate listening and accompaniment to someone who is distressed.
- If a participant has been distressed by a discussion conducted as part of the research, notify the natural helper or social worker so that they can provide follow up support for the participant.

INFORMED CONSENT PROCEDURES

GROUP DISCUSSIONS

ADULTS

- Give them all the information on the 'introduction and informed consent sheet'.
- Ask each member of the group, one by one, whether they are willing to take part.
- If they agree, continue with the group discussion.
- Once the group discussion is over, complete the informed consent record. Make sure you correctly record the Group Discussion Identification Number. Sign it to show that all participants gave their informed consent.

YOUNG PEOPLE (aged 13-17 years)

- Find out which adult is responsible for each of the young people who you would like to invite to participate, contact each responsible adult and ask them for permission to invite the young person to participate in the group discussion. You must give the responsible adult all the information on the 'introduction and informed consent sheet' before you ask for their permission.
- If you receive permission from the responsible adult, invite the young person to come to the group discussion.
- Once all the young people are together, at the beginning of the group discussion, explain everything on the 'introduction and informed consent sheet'.
- If they agree to participate, continue with the group discussion.
- Once the group discussion is over, complete the informed consent record. Make sure you correctly record the Group Discussion Identification Number, and how the responsible adults who gave you permission are related to the respondents (e.g. father, mother, aunt, grandfather).
- Sign it to show that all participants gave their informed consent.

IN-DEPTH INTERVIEWS

ADULTS

- Give them all the information on the 'introduction and informed consent sheet'.
- If they agree to participate, continue with the interview.
- Once the interview is over, complete the informed consent record. Make sure you correctly record the Interview Identification Number. Sign it to show that the participant gave their informed consent.

YOUNG PEOPLE (aged 13-18 years)

- Find out which adult is responsible for the young person, and ask them for permission to invite the young person to participate in the interview. You must give the responsible adult all the information on the 'introduction and informed consent sheet' before you ask for their permission.
- If you receive permission from the responsible adult, give the young person all the information on the 'introduction and informed consent sheet'.
- If they agree to participate, continue with the interview.
- Once the interview is over, complete the informed consent record. Make sure you correctly record the Interview Identification Number, and how the responsible adult who gave you permission is related to the respondent (e.g. father, mother, aunt, grandfather).

- Sign it to show that the respondent gave their informed consent.

KEY INFORMANT INTERVIEWS

The procedure for obtaining informed consent from Key Informants is the same as for in-depth interviews (adult respondents). There is one important difference. Although we will not record their name, we will write down their role (e.g. religious leader, head teacher) and may refer to their role in the report. Make sure you tell them this.

BODY MAPPING (children aged 6-10)

- Find out which adult is responsible for the young person. If the activity is conducted in school this may be a teacher, if out of school it is likely to be their parent or guardian.
- Explain that you will be playing a game with children that asks them what they like and don't like, to understand children's sources of well-being and distress. Ask for their permission to invite the child to participate.
- If you receive permission from the responsible adult, invite the child to come to the group discussion.
- Once all the children are together, explain that you want to play a game with them, to find out what they like and don't like.
- If they agree to participate, continue with the body mapping.
- Once the body mapping is over, complete the informed consent record. Make sure you correctly record the Body Mapping Identification Number, and how the responsible adults who gave you permission are related to the respondents (e.g. father, mother, aunt, grandfather).
- Sign it to show that all responsible adults and the children gave their informed consent.

INTRODUCTION AND INFORMED CONSENT: GROUP DISCUSSION

Good morning. I am very happy to see all of you. Your attendance shows how much you care about your children. And as I had said earlier, this meeting is about children's welfare, and we'll be discussing your children--not other children, but your children.

My name is XXX. I am a researcher, and I work for the CPC Learning Network. We work on children's issues and want to learn how communities and groups of people ensure their children's wellbeing, what they do when their children are in trouble, how they support their children's development. This is the goal of our research. The research is not limited only to your community, it has already been carried out in three other countries. In Kampala, we have chosen a few groups of refugees, because we cannot talk to everybody. And your community was one of the communities we chose for the research.

But before we begin the research itself and begin to talk to you about how you care for your children, first, I want to tell you something very important. I want to request your permission to talk to you, to ask you questions, and record your answers. If there is anyone here who would prefer to not take part in this discussion, you are free to say that you would not like to participate. And you are free to leave.

In addition, everything that we will say to each other is confidential and will stay between us. We are not going to take anything that is said here and share it with anyone else. The people who will get a report of our discussions are the ones who will pick it apart and tell us what is good, what is helpful, or will tell us this is what happened, and that is what happened. And when we have collected

information that will tell us how to better help children, we will not identify the speakers in our report and say Mr. Joe said this, or Mr. Y said that, whether we use it to teach or to inform others. The report will be about refugees in Kampala and how people respond when things go wrong or when the wellbeing of children is at risk; these are the ways that people respond. This is the kind of research we do. It is confidential. So, I'm going to ask each of you for permission before we continue with our discussion. So, Mr. George, what do you say? Okay, Mr. George has agreed. Mrs. Isata has agreed. Everyone has agreed. So, we can now continue with our discussion because everyone had given their consent.

But again, before we start, it will be good for us to get to know each other. We cannot be here for an hour or an hour and a half, and we don't get to know each other, because we are one in this work on behalf of children. So, as I told you before, my name is XXX. Please introduce yourselves so I can get to know you. Okay, everyone has now introduced themselves. Thank you.

Now, we are going to begin the discussion we came here for about children and their wellbeing. Today, we are going to discuss what happens here, in your community, where we are now. That is what we want to discuss. We want to talk about the things that hurt children; we want to talk about the things that hurt their development. We want to talk about the things that happen to children that make them unhappy, that they do not like to experience. We want to discuss the things that happen to children that make even you their mothers and fathers unhappy. We want to talk about the things that make you as a community come together to discuss what you want for your children. So, all of those things that are not good for your children, that make you unhappy, that make your children unhappy, these are the things we want to discuss today.

But before we begin our discussion, I want you to know a couple of things. Everyone here is free to express themselves, and whatever anyone says is right. No one here is wrong, anything anyone says is right. That is the first thing. We should respect the views of everyone here because everyone is right, no one is wrong. Secondly, as I said, it is a good thing for everyone to express themselves. But if we all talk at the same time, my colleague who is taking notes here will not be able to write everything down. He will miss some of what you say. I myself will not be able to listen to all of you, and I will miss what you say. So please, as we speak, let us speak through the chairperson. Let us ask the chairperson, who is me, and we will call on who wants to speak. That way, the discussion will go well, and everyone will have a chance to speak, and everyone will get a chance to hear what their neighbor is saying. Please, don't be shy, I want all of us to be comfortable, and for all of us to speak freely. Whatever we say here will remain here.

INTRODUCTION & INFORMED CONSENT: IN-DEPTH INTERVIEW

Good morning, I am very happy to meet you here. Your participation shows me how much you care about children. My name is [name]. I'm a researcher working with the Child Protection in Crisis Learning Network, who have partnered with InterAid Uganda for this project.

The purpose of this meeting is to learn more from you about the risks and harms affecting children in this community, and the ways in which your community protects children. In our conversation we are not going to talk about poverty and health because they are everywhere, and we won't ask about your own personal situation, but about the situation for children in general in your community.

Before we ask you if you are willing to participate, we would like to let you know that whatever you tell us will be kept private. The only people who will have access to this information are the researchers for this study, and we will not take your names. When we finish this research, we will write a report which will be given to the CPC Learning Network and others concerned with the welfare of children, but no names will be included.

We will also be giving feedback to the communities that have participated, once we have finished the study, to share what we have learned about the situation of children in those communities. However, there are no direct material benefits to individuals or communities participating in this research.

You are free to decide not to participate in the interview, and this will not affect any assistance you get from any organisation.

Annex 2. List of key informants

Education system

1. Nakivubo Blue Primary School, head teacher
2. Nakivubo Blue Primary School, teachers (3)
3. Kyagwe Road Primary School, deputy head teacher
4. Tawhid Primary School, nursery section, head teacher
5. Nabagereka Primary School, Nsambya, deputy head teacher
6. Makindye Military Police Primary School, head teacher
7. St Peter's School, Nsambya, deputy head teacher
8. Katwe primary school, head teacher, deputy and one teacher
9. Old Kampala primary school, teachers (4)
10. St Paul's primary school, Nsambya, Teacher and acting deputy

Local Council

11. LC3 chairperson, Rubaga division
12. LC2 chairperson & parents association chair, Katwe
13. LC1 chairperson, Katwe
14. LC1 chairperson, Kasaato
15. LC1 chairperson and youth secretary, Makindye Luvuma

Police

16. Katwe Police Station Family and Child Protection Desk
17. Kisenyi police station, 2 police officers

Other government structures

18. Supervisor/OVC & Probation Services, KCCA, Makindye
19. Youth Office, KCCA Central division

Health services

20. KCCA Kisenyi Health Centre - Nursing Assistant
21. Youth for Christ pregnancy centre, counsellor/ social worker
22. Wakisa Ministries Crisis Pregnancy and Counselling Centre, Administrative Assistant
23. KCCA health centre, Makindye, Ugandan doctor working with refugees

Refugee assisting organisations

24. InterAid Uganda Children's counsellor/ head of Child Protection
25. HIAS, senior protection officer
26. Refugee Law Project, Psychosocial Counselling Advisor & Child Rights Officer
27. National Council for Children, Director
28. UNHCR Child Protection specialist

Child Protection and Education Committee members

29. CPEC member, Bondeko Centre
30. CPEC Member, BARA community
31. CPEC member, Refugee Solidarity Group
32. CPEC members (6), Zion church
33. CPEC Chairman, Somali Community Refugee Centre, Kasaato
34. Somalia Child Education Protection Committee members (2)
35. CPEC member, Somali community administration centre

Community leaders

36. Somali vice chairman
37. Ndeje-Makindye, Senior Pastor
38. Zion International Pentecostal Church, Lusaka Kiroombe, Senior Pastor