



REPORT FOR A BASELINE SURVEY FOR HOUSEHOLDS OF DIRECT BENEFICIARIES

SKILLS AND LIVELIHOODS TRAINING IN INCOME GROWTH AND ENTERPRISE DEVELOPMENT FOR HIV/AIDS PEER SUPPORT GROUP MEMBERS AND VSLA GROUP MEMBERS



May 2017

...nurturing hopes!

Study undertaken by: Child Rights Empowerment and Development Organization (CEDO-Uganda)

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Acknowledgement

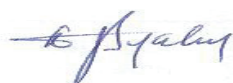
This report is a result of the collaboration between CEDO (Child Rights Empowerment and Development Organization) and USAID/Uganda Private Health Support Program to implement an activity aimed at increasing the ability of HIV/AIDS peer support groups members, Village Savings and Loan (VSLA) group members, and their respective households to pay for health services through economic strengthening initiatives in the Districts of Jinja, Sheema, Rukungiri and Wakiso. The contract for skilling VSLA and HIV/AIDS peer support group members in the area of economic empowerment is gratefully acknowledged. Also, special thanks go to the District local government leadership in Jinja, Wakiso, Sheema and Rukungiri for their useful inputs during the preparation of the report.

The preparation of this report would not have been possible without the direct support of a number of leaders for HIV/AIDS peer support groups and VSLA members who shared secondary data and reports and provided key technical inputs to the data collection methodology.

During the field visits, the District Administrative Officers (CAOs), Community Development Officers, District Agriculture Coordinators and District Commercial Officers in all the four districts were very helpful and cooperative in sparing time for discussions on various issues in the respective districts.

The preliminary findings of the report were presented in District level inception meetings in June 2017. Our special thanks go to the participants in the meetings for their special inputs into the report. Besides, we are also thankful to staff for their inputs in the process of discussions of the report at analysis stage.

In this report, it has been tried to put across a holistic understanding of vulnerability and household livelihood's status in the project regions. The report would be useful not only for planning and targeting to deliver on the mandate for the USAID/Uganda Private Health Support Program interventions for increasing the ability of HIV/AIDS peer support groups members, Village Savings and Loan (VSLA) group members and their respective households to pay for health services through economic strengthening initiatives, but also would help in devising and targeting other safety net measures. I encourage you to contact us at CEDO-Uganda, for any comments regarding the report.



Byabasaija Abdallah
Executive Director

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List of Abbreviations

AIDS Acquired Immune Deficiency Syndrome

BDS Business Development Support

CBHI Community Based Health Insurance

CBHIS Community Based Health Insurance Scheme

CEDO Child Rights Empowerment and development Organization

CHPA Community Health Plan for All

DISO District Internal Security Officer

DIT Directorate of Industrial Training

HIV Human Immune Virus

ICOBI Integrated Community Based Initiative

KIIs Key Informant Interviews

NAADS National Agricultural Advisory Services

NDP National Development Plan

S/C Sub-county

SACCO Savings and Credit Cooperative Society

SILC Savings and Internal Lending Community

UHC Universal Health Coverage

US\$ United States Dollars



USAID	United States Agency for International Development
VSLA	Village Savings and Loans Association
WHO	World health Organization
YLP	Youth Livelihood Program

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Executive Summary

Introduction

In March 2017, CEDO–Uganda secured financial support from USAID/Uganda Private Health Support Program to execute a performance based grant activity titled *“Skills and Livelihoods Training in Income Growth and Enterprise Development for HIV/AIDS Peer Support Group Members and VSLA Group Members”*, to increase the ability of HIV/AIDS peer support groups members, Village Savings and Loan (VSLA) group members, and their respective households to pay for health services through economic strengthening initiatives.

CEDO conducted a household livelihoods survey in four target districts of Jinja, Wakiso, Sheema and Rukungiri to establish the baseline information necessary to inform the design for project performance indicators of success. Specifically, the survey sought to answer two key questions:

1. What are the major social economic features that shape the targeted beneficiary group members for their skills enhancement?
2. To what extent do HIV peer support and VSLA group members have the ability to meet health and other basic needs?

Methodology and Design

The study used a cross-sectional survey design, adopting a quantitative method approach. This involved the intentional collection of quantitative data that made it possible to provide both numeric descriptions of the targeted beneficiaries and, which assisted to explain the major social economic features that shape the HIV peer support and VSLA group members for their skills enhancement. A total of 1,973 individual targeted beneficiaries were interviewed and data analyzed using Statistical Package for Social Scientists (SPSS version 16).



Results

The study showed that 88% of the direct beneficiaries had at least attended formal education, i.e; education with a structured curriculum (from primary to tertiary), with about only 12% not having attended formal education at all. The majority of the group members were engaged in farming (53%), while only 08% were employing their manual labour to earn a living. The findings revealed that (50%) of the targeted beneficiaries were found to be earning between UGX 5,000 and UGX 50,000/= per month. This suggests that such a reasonable of the beneficiaries earned below UGX 3,000/- (less than US\$ 1) per day. Impliedly, such members lived below the poverty threshold of US\$1.90 as per the World Bank International poverty threshold and therefore, largely poor.

The study established that there are four major social economic features that shape VSLA / HIV Peer Support Group Members to be reached for their skills enhancement. These in order of importance include; farming, salaried employment, small business, and casual labourers. Also, the findings revealed that the majority of the group members worked between 5 and 6 days in a week, but not in profitable ventures since their earnings were not reciprocal to the number of days and hours they worked. The findings exhibited in the previous paragraph attests to this.

Conclusions

Whereas Uganda has made commendable progress in addressing poverty and establishing livelihood and income enhancement initiatives, much remains to be done to improve delivery of quality basic services for the people, as well as improve the income and secure the livelihood of the approximately 43% of the population that is at risk of falling back into poverty in the event of a shock. The beneficiaries have low incomes; necessitating the need to enhance income sources and income alternatives for the beneficiaries. They have limited skills and business enterprise necessitating the need for training in key livelihood enhancing skills and enterprise mix among beneficiaries. Majority of beneficiaries are farmers though engaged in subsistence farming, largely unprofitable and difficult to earn sustainably to meet the daily needs including the need for health care. This implies enhancing incomes requires empowerment at the farm with modern agronomic practices to make the sector more profitable for the current subsistence farmers.

Recommendations

It is recommended that the proposed skills interventions should build capacity of the targeted beneficiaries to leverage from their VSLA resources for access to capital to strengthen their income generating initiatives. Although majority of the beneficiaries are earning from farming, salaried employment and casual labour,



further support is needed to ensure decent work and sustainable income generating ventures. The skills and livelihoods trainings should go beyond supporting the beneficiaries to start up income generating activities by embedding business development support services by skilled Business Development Support (BDS) and/or technical service providers throughout the project period and post project end date. The planned project should leverage on potential public and private sector partnerships to effectively promote and sustain entrepreneurship among the beneficiaries. Further, all planned training programs should incorporate elements of group dynamics, effective management of meetings, leadership and financial management at a personal and group levels to ensure group sustainability. There is need to popularize the purpose of community insurance while innovating on the existing ICOBI CBHI product range. The measure of success for the subsequent interventions should consider indicators towards addressing the aforementioned aspects.

CHAPTER 1.0: INTRODUCTION

This survey sought to establish the baseline information necessary to inform the design for project performance indicators of success of a performance based grant activity titled *“Skills and Livelihoods Training in Income Growth and Enterprise Development for HIV/AIDS Peer Support Group Members and VSLA Group Members”*, to increase the ability of HIV/AIDS peer support groups members, Village Savings and Loan (VSLA) group members, and their respective households to pay for health services through economic strengthening initiatives. The project is implemented by CEDO–Uganda with financial support from USAID/Uganda Private Health Support Program. The introductory chapter is about the general introduction and dwells on issues of the background, major objective, methodology and design, significance and justification of the survey, and as well, the scope of the survey.

1.1 Background

CEDO (Child Rights Empowerment and Development Organization) is a Ugandan *“not for profit”* and non-governmental organization (NGO) that seeks to promote the rights of children to a healthy, secure and value adding childhood. *“The organization envisions a nation where absolute poverty, poor health and rights abuse have been overcome and people live in Dignity. However, in line with its mission and vision, CEDO conceptualized the project; “Skills and Livelihoods Training in Income Growth and Enterprise Development for HIV/AIDS Peer Support Group Members and VSLA Group Members”* to deliver on the mandate for the USAID/Uganda Private Health Support Program; *“to increase the ability of HIV/AIDS peer support groups members, Village Savings and Loan (VSLA) group members, and their respective households to pay for health services through economic strengthening initiatives. This was against the background that ICOBI (Integrated Community Based Initiatives) in partnership with USAID/Uganda Private Support Program had been implementing the Community Health Plan for All (CHPA) Program in the Districts of Sheema, Rukungiri, Wakiso and Jinja, which after an evaluation, it was realized that the project participants had not appreciated fully the health insurance scheme. According to ICOBI, this was partly due to economic vulnerability and inability of the project beneficiaries to provide for their healthcare needs including annual premium obligations.*



Therefore, CEDO under the USAID/Uganda Private Health Sector funded project is implementing a number of strategies to empower 6,000 HIV/AIDS peer support group and VSLA group members targeted by ICOBI in the four districts of Sheema, Rukungiri, Wakiso and Jinja. The purpose is to provide ICOBI's targeted HIV/AIDS peer support group and VSLA group members with necessary skills and access to a portfolio of interventions to reduce their economic vulnerability and enable them provide for their healthcare needs by February 2018. Planned interventions include: building business and entrepreneurial skills for HIV/AIDS peer support group and VSLA group members to start market-driven and contextually relevant income generating ventures; facilitating focused and pro-active partnerships and linkages with formal financial institutions to access business financial services; promoting partnerships between the VSLA group members and government programs as well as other economic operators in the rural communities; and developing models that encourage accumulation/carry-over of group savings to enhance savings and acquisition of assets.

1.2 Purpose and Objectives of the Survey

Thus, as part of CEDO's strategy to equip the target category of beneficiaries with non-formal vocational and livelihood skills for self-reliance and food security so as to raise themselves out of poverty and meet healthcare costs for their respective households; the organization conducted a household livelihoods survey for the direct beneficiaries in the four targeted districts of Jinja, Wakiso, Sheema and Rukungiri to establish the baseline information necessary to inform the design for project performance indicators of success. Specifically, the survey sought to answer two key questions:

1. What are the major social economic features that shape the targeted beneficiary group members for their skills enhancement?
2. To what extent do HIV peer support and VSLA group members have the ability to meet health and other basic needs?

1.3 Methodology and Design

The study used a cross-sectional survey design, adopting both qualitative and quantitative approaches. This involved the intentional collection of quantitative data that made it possible to provide both numeric descriptions of the targeted beneficiaries and, qualitative data which assisted to explain the major social economic features that shape the HIV Peer Groups and VSLA Groups targeted by ICOBI for their skills enhancement. Besides, the design for the survey helped explain the extent to which the HIV Peer Groups and VSLA Groups targeted by ICOBI have the ability to meet basic needs.



The populations for the survey were household members that belong to the HIV Peer Groups and VSLA Groups targeted by ICOBI in the four districts of Jinja, Wakiso, Sheema and Rukungiri. Accordingly, the questionnaire for the survey was administered to collect data from the members. The response rate was over 95%. Data preparation included logging the data, checking the data for accuracy with the data collectors after data collection, entering the data into the computer, and transforming the data. Later, data was coded before being entered and analyzed in the computer using the Statistical Package for Social Scientists (SPSS 19). The univariate results from the analysis were presented using tables and graphs.

Four ethical considerations recommended by Amin (2005) were observed in this survey. This is because both the proposed survey method and the conditions under which the survey was carried out could not pose any danger to the participants. The ethical considerations included seeking consent of every participant and each one of the respondents signed a consent form; every record of sensitive information provided by the respondents was left anonymous to cater for privacy and confidentiality. In addition, before the data collection exercise, permission was sought from Resident District Commissioners and Chief Administrative Officers of the respective local government authorities. This was able to cater for access and acceptance. Finally, all participants were informed of their right to participate voluntarily, and of their freedom to withdraw from participation in the study.

1.4 Significance of the Survey

It was hoped that the findings from the survey would be useful in contributing to the performance indicators that would be used to assess the impact of the “Skills and Livelihoods Training in Income Growth and Enterprise Development for HIV/AIDS Peer Support Group Members and VSLA Group Members” project. Thus, the survey yielded data and information that would be useful for proper project implementation and monitoring. Henceforth, the project management of CEDO would not have to rely on haphazard personal experiences, or subjective expert judgments, or on tradition or fashion in their project monitoring and decision making processes, but rather; base their methods, decisions and actions on concrete knowledge of issues of the beneficiaries, which now are supported by the findings of this study.



1.5 Justification for the Survey

This study considered that the various targeted groups would have to pursue secure livelihoods at household level. CEDO Uganda understands livelihoods not only in terms of income earning but a much wider range of activities, such as gaining and retaining access to resources and opportunities, dealing with risk, negotiating social relationships within the household and managing social networks and institutions within communities and the manner in which these translates into affordability to access health. A focus on the livelihood initiatives of project beneficiaries and their households and communities intended to highlight the status and livelihood importance to the health issues of the communities.

It was envisaged that understanding the direct beneficiaries would facilitate thorough assessment of their needs and capacities in order to design appropriate beneficiary households' tailored skilling and training programs under the Skills and Livelihoods Training in Income Growth and enterprise Development for HIV/AIDS peer support Group Members and VSLA group Members, a contracted partnership for delivering on the mandate of the USAID/Uganda Private Health support program.

1.6 Scope of the Survey

The study was conducted among only individuals that are members of ICOBI affiliated HIV/AIDS peer support Group Members and VSLA group Members in the districts of Jinja, Wakiso, Sheema, and Rukungiri. The focus was on those individual group members that had been active in regular savings with the ICOBI groups at least for the last twelve months, because such individuals are the ones that had in custody the kind of information required. Lastly, the survey was limited only to the study objectives as set out in section 1.4 above.

CHAPTER 2.0:

PRESENTATION OF RESULTS AND DISCUSSION

2.1 Introduction

This chapter describes the analysis of data followed by a discussion of the survey findings. The findings relate to the questions that guided the survey. Data was analyzed to create a deeper understanding for: the location of the respondents who also happen to be direct beneficiaries of the project for which the survey was undertaken, the employment and economic status of respondents, health expenditure status and attitude on community based health insurance. This chapter also covers the respondents' perspectives on the relevance of community-based health financing and the bottlenecks facing their incomes to meet the basic needs of their respective households. Therefore, this chapter presents the study results with respect to the dual research questions including: (1) what are the major social economic features that shape the targeted beneficiary group members for their skills enhancement? And (2) to what extent do HIV peer support and VSLA group members have the ability to meet health and other basic needs?

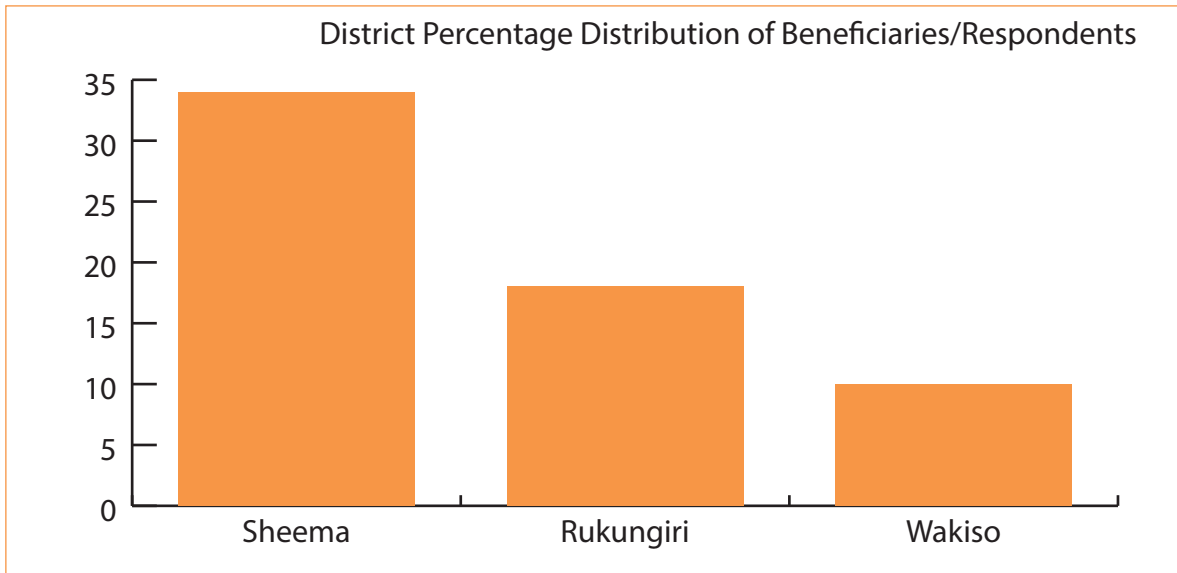
2.2 Distribution of respondents/direct beneficiaries

A total of 1,973 respondents out of the 2,046 planned targets for the survey were reached through individual household interviews. This represented over 95% of the expected population for the survey. 671 (34%) of the respondents/beneficiaries were from Sheema district, 355 (18%) from Rukungiri district, 750 (38%) and 197 (10%) of the respondents were from Jinja and Wakiso districts, respectively. These four districts had been pre-selected purposively because that is where ICOBI was implementing the Community Health Plan for All Program whose beneficiaries CEDO was targeting for the USAID/Uganda Private Health Sector Program funded project aimed at increasing the ability of HIV/AIDS peer support group and VSLA group members and their respective households to pay for health services through economic strengthening initiatives.



The distribution of respondents is illustrated in figure 1 below.

Figure 1: Showing the Distribution of Respondents by Districts



The number of beneficiaries identified and interviewed largely depended upon the number of group members in a districts. This implies that Sheema and Jinja had more beneficiaries than Rukungiri and Wakiso districts. It also implies that more resources should be channeled to more beneficiaries than where there are few beneficiaries.

2.3 Demographic Characteristics of the Respondents/Beneficiaries

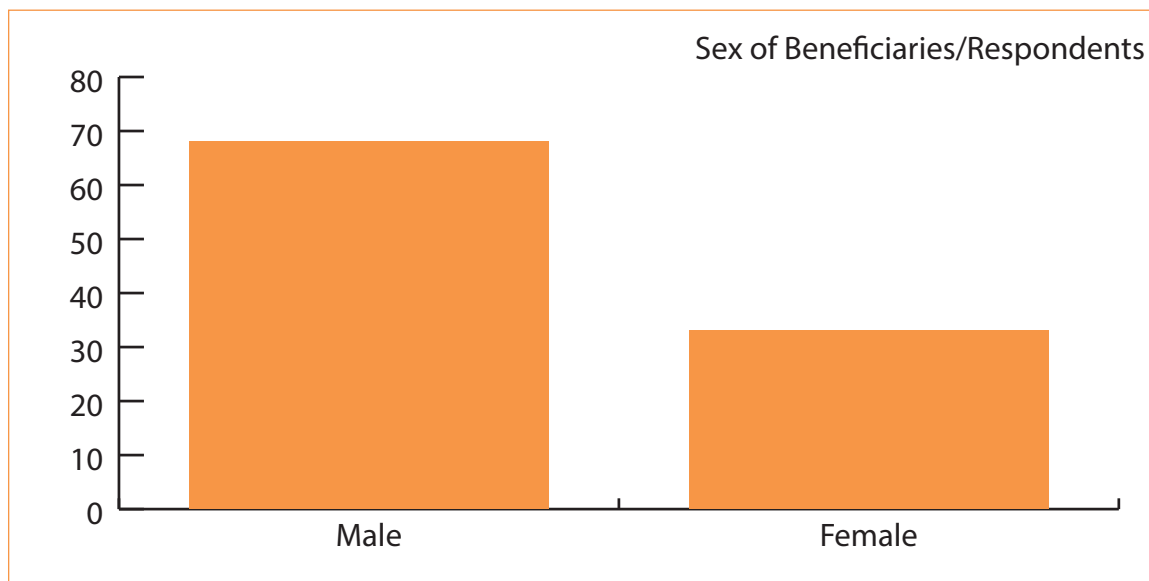
This section addresses specifically, the study findings on demographic characteristics of group members including the sex, age, level of education, and their level of participation and performance in VSLA groups.

2.4 Sex of Respondents/Beneficiaries

In terms of sex composition, 67% of the beneficiaries are female while 33% are male. This has direct implications on the households' livelihoods since decisions by households in most communities are made by men. Yet, the control of resources and major decisions at home are made by men but most interventions aimed at enhancing incomes would target women. Thus, the CEDO income and skills enhancement interventions should target homes as opposed to individual beneficiaries only.



Figure 2: Showing the Sex of Respondents



2.5 Age of Respondents/Beneficiaries

Majority of the Community Health Plan for All project beneficiaries were aged between 31 and 45 years. This represented 38.8% while 28.5% of the beneficiaries were largely aged between 46 and 60 years. Nine respondents could not reveal their age and thus could not be categorized in any of the age groups considered under the study. The study showed that 98.3% of the respondents were aged between 18 and 61 years and none of them were still attending formal education.

One of the measures of performance for the project targeting the respondents may be the ability of beneficiaries in the age of 18–30 years (who will benefit from non-formal vocational trainings and get Directorate of Industrial Training (DIT) certificates) to re-integrate in formal education system, and the ability of those between 18–61 years with children to send them to school and meet the basic needs for their households.

Table 1: Showing the Age Brackets of Respondents

Age category	Frequency	Percent
18–30 years	412	21%
31–45 years	762	38.8%
46–60 years	560	28.5%



Age category	Frequency	Percent
Above 61 years	230	11.7%
Total	1,964	100%

2.6 Education Status of Respondents/Beneficiaries

As illustrated in the table 2 below, the study showed that 88% of the direct beneficiaries had at least attended formal education with about only 12% not having attended formal education at all.

Table 2: Showing the Respondents' Level of Education

Level of education	Frequency	Percent
Primary	1097	63%
Ordinary Secondary	507	29%
Advanced Certificate of education	50	3%
Certificate	31	2%
Diploma	36	2.1%
Degree Graduate	18	1%
Total	1739	100%

The survey shows that majority of the respondents who had attended formal education had attained primary living examination level of education, which implies limited employable skills in formal sector, and lack of practical skills for self-employment. Like in other countries in Sub Saharan Africa, majority of the families without skills and knowledge for wage and self-employment, are most likely to depend on extended family system as form of social safety net. Thus, the percentage on the targeted beneficiaries who acquire non-formal training skills for self-reliance should be among the measures of success for the skills development project by CEDO.

2.7 Employment status of Beneficiaries/Respondents

Out of 1,973 respondents, 1,963 (99%) responses were realized and 1% did not respond to the employment status and occupation type. The survey revealed that 99% of the respondents/beneficiaries were working or owning a business at the time when the survey was conducted. As illustrated in Table 3 below, the type



of work or businesses in which the respondents were involved were in 4 major sectors, namely; farming (53%), manual labour (8%), small businesses (Urban informal sector) (15%), and salaried employment (24%).

Table 3: Showing major Sectors engaged in by respondents/beneficiaries

Economic Activity	Frequency	Percent
Farming	1040	53%
Manual Labour	156	08%
Small Business	294	15%
Salaried Employment	473	24%
Total	1,963	100%

As evidenced in the above table, majority of the beneficiaries (53%) earn a living from farming. This conforms to the Uganda Bureau of Statics (UBOS, 2016) that majority of Uganda’s population (70%) is employed in the agriculture sector. However, Uganda Revenue Authority’s tax revenue breakdown for 2012-2014 reveals that although agriculture accounts to 23% of GDP in Uganda, its contribution to tax revenue is only 0.8%. This majorly is because the country has a large agricultural sector, but dominated by subsistence farmers. This makes the sector potentially unprofitable; therefore, difficult to tax. Therefore as an indicator for success of the livelihood skills project, the ability of the project interventions to make the farming business/enterprises for the majority of the beneficiaries profitable to meet household basic needs and make a decent living should not be under looked.

As revealed in section 2.3.1 that women (67%) form the bigger percentage of the beneficiaries, yet, studies reveal that of the people employed in the agriculture sector, 77% are women and 63% are youth (Prof. Augustus Nuwamanya, 2017), the project interventions on economic strengthening initiatives in agriculture should be seen as a strategy to addressing agro-issues to a wider spectrum of users, who are women and youth forming the majority of this country whose mobility is constrained by economic, social and cultural/gender factors.

2.8 Features of the VSLA groups from which project beneficiaries were derived

CEDO-Uganda has been implementing the VSLA Methodology since 2009. Lessons learned over the years reveal that VSLAs have greatly contributed to increasing access to financial resources to the excluded and unbanked populations (including women and youths) in rural areas. However, efforts by the VSLAs remains constrained by the inadequate skills that could help them create or expand their own enterprises/businesses- such as the lack of life skills and low entrepreneurial capacity of most VSLA



members. Further, most members of VSLAs have low confidence in the face of limited financial knowledge to ensure effective utilization of the available financial resources to the households. Most VSLAs have no formal identity and have remained loosely formed at village level. This, as a result, (individually and as a group) kept them un-attractive to the formal financial markets. Against this backdrop, the study captured salient features to inform the maturity of the VSLA groups and their members' motivation to stay in the groups as illustrated in Table 3.8 below.

Table 4: Showing the Group Specific Features

District and Group Name	Key features and members motivation to be in group
Jinja district	
Tabaalo	Communities expect direct financial support and benefits from development interventions Much appreciation of the care Limited value addition for example maize. Need for business planning and management. Great passion for rearing but limited space A lot of agonizing and limited self-belief There is borrowing to cater for basic needs. Slave training in hair dressing
Agali-Awamu	Starting is basically for subsistence(food,fees etc) Business highly hinged on mirage
Nalabengo	Business attend to social media Too much commodification Member at a family level lack critical practical skills
Kibibi V MATI Shamushi Division	Groups for earning a living Supporting children Groups for social reasons Nothing to do Food and school fees.



District and Group Name	Key features and members motivation to be in group
Agali-Wamu Development Association	<p>Focus on wealth and health</p> <p>Food constitute a major priority in family decision making and in group level of participation</p> <p>Better living Focus on agriculture</p>
Nakibongo Twokeme	<p>Earn a living</p> <p>Getting some financial assistance</p> <p>Ten plus cycles</p> <p>Health and school fees</p> <p>Need for money support</p>
Gemakiimwiino Women's Group	<p>Savings for social reasons</p> <p>Five plus cycles</p>
Tabaalo–Buwenge S/C	<p>An average of 5 cycles in the groups</p> <p>Largely, business is for basic needs</p> <p>Earning a living is the major motivator for the members to belong to the group</p> <p>Most members have projects</p> <p>The area is not fertile</p>
Agali Awamu Buwairama VSLA – Budondo	<p>Average of 3 cycles</p> <p>Motivated by basic needs in business dealings</p> <p>Aims at generating income from the group</p> <p>Good group culture in attending meetings</p>
Nyakibengo Twekembe Group – Budondo	<p>An average of 7 cycles</p> <p>Focused on addressing medical needs</p> <p>The need to attend to basic needs is the major motivation</p> <p>The need for generating income for households and basic care is the major inspiration to the group</p> <p>Need for training for their young ones</p>



District and Group Name	Key features and members motivation to be in group
Kibibi Umati Shamushi DINI – Budondo	20 + cycles Aims at earning a living Members largely work for basic needs Limited skills among members of practical nature that enhance income like vocational There is urgent desire to support livelihood efforts
Agali – Awalala Development Association – Budondo	An average of 12 cycles Focus is on better and affordable medication Business is focused on addressing basic needs Most group members challenged with sustainability issues of their homes Family members lack any livelihood practical skills Agriculture done as a by the way
Nakibengo Tweekambe – Budondo	An average of 5 cycles Focus on general wellbeing Households sustainability challenges Too expectant
Gemakumwiro Women’s Group – Budondo	An average of 5 cycles Most expenditure is on family medication Focus on income generation and enhancement for most members Need to identify projects and initiatives or business opportunities around them
Nile teachers Savings and Credit Association – Butangaya S/C	2 cycles Focus on earning a living Limited business and enterprise management skills Need for agricultural practical skills Limited business and entrepreneurship skills Group leadership skills lacking



District and Group Name	Key features and members motivation to be in group
Moon Light Association of Disabled – (Buwala) Butagaya S/C	<p>An average of one cycle</p> <p>Members do what they do due to the desire to earn a living</p> <p>Groups are considered as an avenue for socializing with other people</p> <p>Focus of businesses and enterprises is on income generating</p> <p>Expects support to enhance their business</p> <p>Experience low market for their products like soya beans, egg plants etc</p>
Obwesigwa Bugaiga – Butagaya	<p>An average one cycle</p> <p>Focus on basics and earning a living</p> <p>Most occupied in income generation for earning a living</p>
Buwala Workers Saving & Credit Association – Butagaya	<p>An average of 7 cycles</p> <p>Income generation is the main determinant for being in the group</p> <p>Need more skills in agriculture especially taking agriculture as a business</p> <p>Farming largely on nature thus need for water harvesting technologies</p> <p>Members run with less enterprise choices</p>
Gemakumwino – Butagaya	<p>An average 4 cycles</p> <p>Medication form part of the regular expenditure</p> <p>Focus on income generation</p> <p>Deeper appreciation of health insurance</p> <p>Monopoly projects thus need alternatives</p> <p>Aims at rising their standards of living</p>
Mabira Gemakumwino – Butagaya	<p>An average of 3 cycles</p> <p>Investment and business is largely to attend to households and basic needs</p> <p>Low savings plans</p> <p>Savings is not targeted</p> <p>Need more skills on income generation and business</p> <p>Family members incapacitated with no skills</p>



District and Group Name	Key features and members motivation to be in group
Abakorela Awamu	Focus on social amenities Large part of the members' income is spent on food and fees 2-5 cycles of saving Members do short target businesses
Mununuzi	Focus on social amenities The need to address basic needs is a key factor in business and group work Limited business skills Lack of saving plans and targets among members Limited savings roll out plan An average of 7 cycles plus made by most members The members health take core considerations of business decisions
Kiwauka VSLA	An average of 7 saving cycles made by most members Focus is based on attending school fees issues Limited knowledge of insurance information Members aspire to attend to basic needs
Tweigaite womens' Group	An average of 2 cycles by most members Business is largely to attend to basic needs School fees take a bigger portion of members income Savings with passion
Kirikumwino Womens' Group Butangala	An average of one and two cycles Business is aimed at attending to essential needs Like other groups, the need to attend to health and treatment needs form the major motivation for the savings



District and Group Name	Key features and members motivation to be in group
Tulimuwaki Integrated Group	<p>An average of 3 cycles</p> <p>No savings exist strategies</p> <p>The need to attend to the basic needs form the major motivation to forming and doing business</p> <p>Most groups target daily income</p> <p>Focus on addressing basic needs</p>
Twelwaneku Womens' Group	<p>An average of 3 cycles</p> <p>Business is considered as a booster of their income</p> <p>The need to attend to their basic needs and treatment is the major motivation in the groups</p> <p>Group attendance is high</p>
Balitwegomba Development Association	<p>High group turn up in meetings</p> <p>An average of 4 cycles among members</p> <p>The need to address basic needs such as rent and treatment</p> <p>Business is largely to attend to key service needs like school fees</p>
Village Health Team VHT	<p>An average of 7 cycles made among members</p> <p>Savings expended on house necessities and fees</p>
Buwenge Teachers Development Association	<p>An average of 3 cycles</p> <p>Focus on fees and thus large business expenditure put there</p> <p>Savings for basic needs</p>
Youth Integrated Empowerment	<p>An average of 2 cycles</p> <p>Consider insurance as an essential initiative in their health</p> <p>Business is motivated due to the need to attend to the basic amenities like fees and rent</p>
The Friends' Association	<p>An average of 2 cycles</p> <p>Savings aimed at addressing basic needs as fees, rent etc</p>
Tasosola Group Buwenge T/C	<p>An average of 2 cycles</p> <p>Large group members expenses and savings put on basic needs as school fees, health etc</p>



District and Group Name	Key features and members motivation to be in group
Aseka Aseke Group	4 savings cycles Business viewed as source of employment The need to earn a living is a motivation to doing business
Sheema District Group Features	
Kabutshye twebiseho-Kigarama	Earning a living Social reasons Few cycles
Kyengando town council Turibamwee	Medication is the lead motivation Social factors for business Many saving cycles
Byayegamba town council- turibamwee	Expectant for help Money a motivation for business Few 2 to 3 saving cycles The question of school fees
Kyangenyi care givers –Kakindo town Council	Average 4 cycles Income a motivation for business Limited information on insurance Lack of skills for sustaining life
Kyangenyi tumanyene –Kakindo town council	Limited culture to attend meetings Education core business motivator Limited knowledge on insurance Income Few cycles 1 to
Rweibaire IV Care Givers	5 to 6 cycles Income tagged and enhancer Many vulnerable orphans



District and Group Name	Key features and members motivation to be in group
Kyangenyi kukore- Kakindo Town Council	Fighting poverty Income Basic needs Family support Need for seed capital
Tukwatanzegroup- Kyangenyi	Three groups Basic needs Targeting income
Mutojo Traders Association-Kyangenyi	Average four cycles Basic needs Income generation Limited markets
Rushoroza tutunguke group-kyangenyi	Three cycles Generate income for house hold support Basic needs Come out with shelter Targeting medication Hardworking
Nyakatojo Twewetungure group- Kyangenyi	4 cycles Income generation Basic needs
Matsyoro United Association-Kimirama	5 cycles Basic needs Income generation Savings Promote in their farming Nofertile soil Many orphans with no help



District and Group Name	Key features and members motivation to be in group
Muzira twefeho-kamirama	4 cycles Targeting medication Basic needs Income generation Savings Shelter No fertile soils Many orphans with no help
Rushambya Abamwe Group-Kamirama	4 cycles Basic needs Land Income generation Request to reduce ICO care premium money
Kango Twetungure – Kamirama	4 cycles Cater for the family Basic needs Income generation Many widows with no help
Abakungu Tweyambe VSLA Group –Sheema Municipality	4 cycles Basic needs Income generation Members and family members lack critical essential skills that supports livelihood like vocational skills
Kigimbi Abamuse group-Sheema Municipality	15 cycles Basic needs Earn a living Income generation for house holds Shelter



District and Group Name	Key features and members motivation to be in group
Turibamye group- Sheema municipality	3 cycles Basic needs Income generation Sensitilisation One person should be allowed to register for ICO Care
Kemiceera Care Givers VSLA – Sheema Municipality	4 cycles Targeting medication Basic needs Income generation VSLA has good support
Kabingo Group- Sheema Central Division	4 cycles Basic needs Limited land use skills and alternatives
Nyamitooma Group - Sheema Central Division	2 cycles Basic needs Income generation Hard working
Nyakabungo Tuhwerane Group- Masheruka	4 cycles Basic needs Agriculture Domestic work Stone quarrying Low income generation in a community
Nyabwina Care Givers- Masheruka	Average four cycles Basic needs Income generation for household survival Hardworking



District and Group Name	Key features and members motivation to be in group
Twetungure group – Kagango SubCounty	Average 2 cycles For security Basic needs Employment Hardworking
Kizimba Tukinatanise Group - Kagango	4 cycles Basic needs Income generation Hardworking
Bubaare caregivers-masheruka	4 cycles For survival Basic needs Plan future Hardworking
Kyenkunga Care Givers-Kabwohe	4 cycles Basic needs Home consumption Hardworking Family vulnerability especially of the OVC under the group membership
Katooma Tukundane– Kabwohe	3 cycles Basic needs Earning a living Business skills highly lacking



District and Group Name	Key features and members motivation to be in group
Rukungiri	
Katerampungu Tukwatanise Group- Bugangari Subcounty	One cycle Self-sustainability Basic needs Income generation Need more knowledge and skills in farming processes Market is low for coffee growers Lack for vocational skills in our children Inadequate vocational skills Teachers
Nyamabare Tutungukye Group- Rujumbura	3 cycles Support the house holds Basic needs Income generation
Nyabitete Kwebisaho - Rujumbura	Averagely 3 cycles Basic needs Income generation Expects hardware benefits
Rwantundo bahingi Kweterana - Nyakishenyi	4 cycles Basic needs Income generation No fertile soils inadequate food
Kasenyi Modern Farmers(VSLA) Group- Nyakisenyi subcounty	4 cycles Basic needs Future planning Income generation is the major motivation for members in the group Hardworking Soil erosion is high so need



District and Group Name	Key features and members motivation to be in group
Kisya bahingi Kwebishaho VSLA- Nyakisenyi Sub County	An average of 5 cycles Basic needs for households are the main focus of the members businesses Medication Need for help in households in Rukungiri
Tweyambe VSLA Group-Bugangari SubCounty	Participated in 5 cycles Motivated by basic needs while doing business Focused on earning a living Doing business with a small targets Focused on households needs Need for bursaries especially for vocational skills
Rwenshama Youth Development Group – Bugangali	One cycle majorly Motivated by the argue of earning a living Lack of farming skills Business is done for maintenance In dare need for vocational skills Need to training for children in vocational skills
Basholi VSLA Group Bwambara S/C	Average two cycles Business is motivated by need to attain basic needs Motivation to the group is to generate income that supports their standard of living In need for loan
Babarija Kwetuua Group Bugangali S/C	An average of 5 cycles Work and efforts are largely for basic needs Earn a living Expectant of support



District and Group Name	Key features and members motivation to be in group
Kakindo Tukwatanise Group - Bugangali	An average of 8 cycles Motivated by the need to attend to the basic needs Low business skills Need for feedback in case of studies and research
Mabungo Twetungule group – Bugangari S/C	Average of 4 cycles Motivated by the need to address basic needs of life while doing business The desire to enhance income is the major inspiration for belonging to the group
Nyamabare Tutungukye – Bugangari	Average of 3 cycles Basic needs are the major motivators Lack of business and vocational skills

Basing on the salient issues highlighted in Table 3.8 above, using proven innovative models especially that encourage the accumulation / carry-over of group savings to higher levels in order to grow larger the group's loan portfolio is a significant intervention and an indicator for the success of the skills project for increased incomes. For example, the seemingly mature VSLA groups whose members revealed having participated in more than 3 cycles are considered to be mature and the project should facilitate focused and pro-active partnerships and linkages with formal financial institutions for financial support services that may accrue from such partnership, such as tailored credit packages. Other proven models may include promotion of partnerships between the VSLAs and their members and other economic operators in the rural communities. The project should also facilitate these seemingly mature groups who have existed for more than 3 cycles to register into recognized associations to benefit from the financial inclusion programs under the auspices of the Project for Financial Inclusion in Rural Areas (PROFIRA) ran by the Ministry of Finance and Economic Development.



2.9 Status of economic wellbeing of Respondents/Beneficiaries

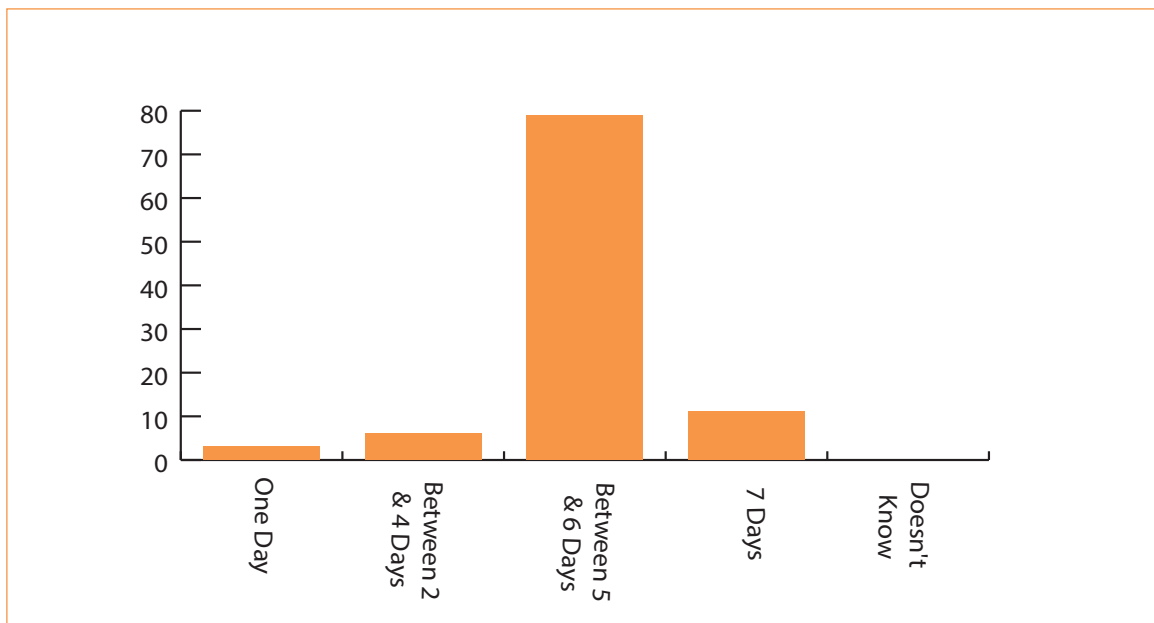
2.9.1 Working Conditions

The study captured data on the working conditions of the beneficiaries/respondents to show the linkage with corresponding earnings with the current working conditions.

As illustrated in Table 1 showing age brackets of respondents on page 18 of this report, all the beneficiaries/respondents were above 18 years and below 61. Similarly, it was established that all the respondents were working independently without caretakers and the work they performed was based in their communities of residence.

The survey revealed that the majority of the respondents (79%) worked between 5 and 6 days. See figure 1 below.

Figure 3: Showing the Number of Days Worked by Respondents/beneficiaries

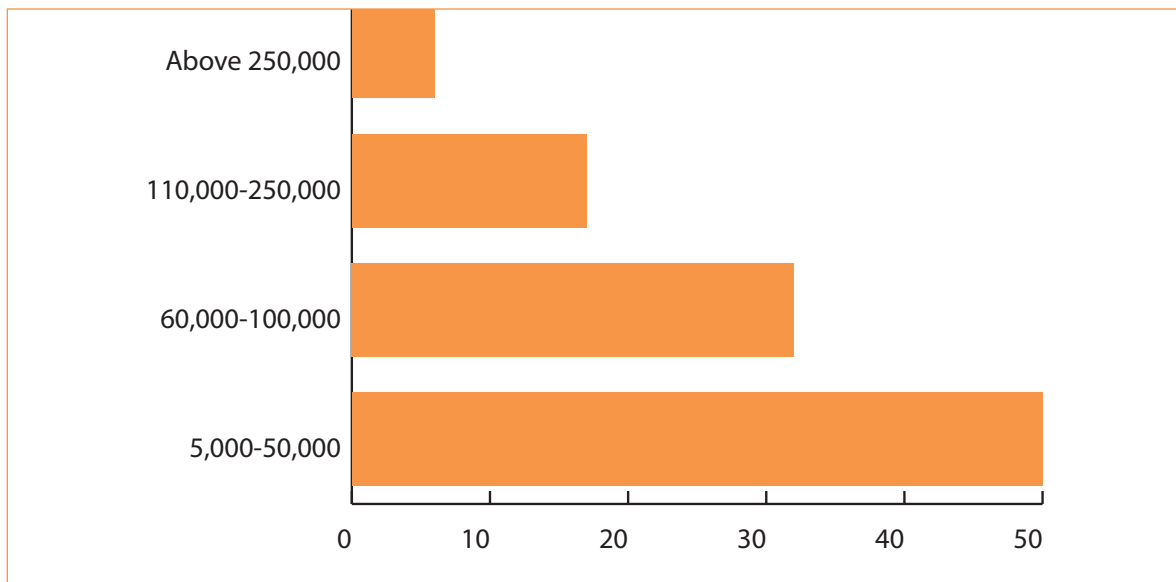




2.9.2 Status of Incomes of Respondents/beneficiaries

The study sought to establish the status of the respondents' incomes upon which the success of the subsequent economic strengthening interventions would be measured. Out of the 1,973 respondents/beneficiaries reached, 1,961 (99%) indicated their average monthly income. 50% of respondents/beneficiaries were found to be earning between UGX 5,000 and 50,000/=. Impliedly, these beneficiaries earn below USD\$ 1 per day. According to the poverty Standard Index these people are living below the poverty line and cannot afford to access basic needs including child education, health, and food, among others.

Figure 4: Showing Beneficiaries' Level of Average Monthly Incomes



In addition to skills development, it will require both CEDO Uganda and ICOBI to change the beneficiaries' mindset and appreciation of their need to solve their income and livelihood needs.

2.9.3 Status of Respondents' Participation in CBHI and VSLA Groups

ICOBI's income and health for all interventions are largely through the Savings and Internal lending Community Groups (SILC)/VSLAs. As such, the savings are envisaged to translate into livelihood improvements. Embracing the health insurance was largely based on the level of participation in the program. As such, the survey asked participants whether they participate in the CBHI (Community Based Health Insurance) activities. 76% indicated to be participating in the CBHI program. This implied that not all members of the VSLA groups were included in or benefited from the ICOBI's CBHI Scheme. This may



be a result of lack of awareness and appreciation of the CBHI scheme or some of the members being new recruit to the VSLA groups and had not been recruited into the CBHIS. Therefore, the subsequent interventions by CEDO should also aim at increasing the level of participation of the beneficiaries in the CBHI scheme of ICOBI towards improved access to health needs of their households.

2.9.4 Level of Respondents' VSLA groups' Maturity

The VSLA methodology assumes that a mature and sustainable VSLA is measured by the number of saving cycles of up to 8 – 10 months which it undergoes with the attendance of individual members of 75%. The study captured data on the attendance rates of beneficiaries in VSLA meetings as illustrated in Table 5 below and the number of cycles the beneficiaries' VSLA had undergone to inform the subsequent interventions to address the bottlenecks of VSLAs in order to make them more viable and available to the vulnerable youth, women and the rural poor. The table below illustrates the number of cycles the respondents' VSLAs had undergone.

Table 5: Showing the Saving Cycles of group members

Number of Cycles	Frequency	Percent
One cycle only	293	15%
Two Cycles	351	18%
Three Cycles	349	18%
Four Cycles	441	23%
Five Cycles	392	20%
More than 5 cycles	137	7%
Total	1,963	100%

As illustrated in Table 6 below, majority of the respondents (62%) promptly attended VSLA meetings to the desired level of 75%, while 26.3% attended to the level of 66% and 11.1% attended to the level of 42%. Impliedly, majority of the VSLA groups are mature. However, the success of the project interventions by CEDO may be measured on the sustainability and cohesion of beneficiaries' VSLA groups as measured on the level of participation of the group members. The table below illustrates the current status of respondents' attendance in their respective VSLA groups.



Table 5: Showing the Number of Times Members were Present in VSLA Group Meetings

Number of attendance in the last 12 saving days	Frequency	Percent
Between 0–5 days out of 12 days	218	11.1%
Between 6–8 days out of 12 days	518	26.3%
Between 9–12 days out of 12 days	1,230	62.4%
Total	1971	100%

CHAPTER 3.0:

SUMMARY, CONCLUSIONS AND RECOMMENDATIONS

3.1. Introduction

This chapter summarizes the discussions with respect to the survey questions, makes conclusions based on the findings and makes recommendations for possible improvements with regard to the investigation on the status of economic wellbeing, employment status, knowledge and attitude on community-based health financing of individual members for the VSLA / HIV Peer Support Group Members formed under ICOBI. The chapter summarizes the findings on social economic features for individuals and their ability to meet basic needs. In addition, conclusions are drawn and also recommendations made.

3.2. Summary

The survey established that there are four major social economic features that shape VSLA / HIV Peer Support Group Members formed under ICOBI for their skills enhancement. These in order of importance include; farming, salaried employment, small business, and casual labour. Also, the findings revealed that although the majority of the group members worked between 5 and 6 days in a week, the monthly earnings for 50% of the beneficiaries/respondents was between 5000 and 50,000, translating to less than UGX3,000/= or US\$1 in a day. They are thus poor to meet the basic needs for their households as per the October 2015 World Bank international poverty threshold of \$1.90 a day.

Furthermore, the survey discovered that despite the maturity of VSLA groups as measured by the number of cycles of at least 3 cycles and adequate participation and attendance of VSLA group members in group saving meetings and CBHI scheme meetings at a rate of over 75%, not all the beneficiaries in those VSLA groups were enrolled in the CBHI scheme of ICOBI. CBHI being at the very core wing for the VSLA group members' sustainable access to health needs, the subsequent interventions should ensure addressing the challenges for more VSLA group members' enrollment to the CBHI. Such interventions may include awareness raising for the beneficiaries to appreciate the CBHI scheme and economic strengthening ventures for the beneficiaries to increase on incomes to pay premiums for the CBHI scheme.



3.3. Conclusions

The overall purpose of the study was to establish the baseline information necessary for informing “Skills and Livelihoods Training in Income Growth and enterprise Development for HIV/AIDS peer support Group Members and VSLA group Members” project. The data from the survey would help profile baseline information on the direct project beneficiaries regarding their economic status, health expenditure status, attitudes and behavior on community-based health financing, core capacities and capacity gaps to be bridged in a bid to enhance the attainment of the project objectives in the four districts targeted by the project. The ability of the project interventions to bridge such gaps and the level of improvements in the economic status, health expenditure status, attitudes and participation in community-based health financing, would measure the success of the subsequent project interventions.

While the USAID/Uganda Private Health Support Program strives to increase the ability of HIV/AIDS peer support groups members, VSLA group members, and their respective households to pay for health services through economic strengthening initiatives; the attainment of vocational and livelihoods skills has the capacity to build community financial and multiple intelligences with the community members able to address to their day to day and future health and livelihood needs sustainably. Yet, skills training is one of the most important sectors for economic development in many developing countries particularly important for marginalized and vulnerable people of a country as it enables them to increase income, employment and food security, as well as improving general livelihoods and health. Therefore, planned skills training should be need-based and demand-driven.

The incomes of the beneficiaries are cardinal in determining their capacity to afford and embrace any insurance scheme. Empowering communities with income opportunities is therefore crucial as insurance of a sustainable nature is never free. It is globally appreciated that if no payment is charged for the use of healthcare and no incentive for joining an insurance scheme exists, consumers cannot take the chance to press for quality improvement or expansion of services.

Furthermore, ability to meet basic needs was viewed as a backbone to the assessment as this shapes the day to day livelihood challenges of the beneficiaries and impacts the manner in which they respond to the livelihood options they face both as individuals and in collection. It is generally observed that improvements related to ability to meet basic needs have a trickledown effect on the livelihoods of the members and how they embrace community insurance. Whereas Uganda has made commendable progress in addressing poverty and establishing livelihood and income enhancement initiatives, much remains to be done to improve delivery of quality basic services for the people, as well as improve the income and secure the livelihood of the approximately 43% of the population that is at risk of falling back into poverty in the event of a shock



However, the results from the survey present both opportunities and challenges to the livelihood and income enhancement for the HV Peer Support and VSLA group members including:

- i. Low incomes; necessitating the need to enhance income sources and income alternatives for the beneficiaries
- ii. Limited skills and business enterprise necessitating the need for training in key livelihood enhancing skills and enterprise mix among beneficiaries
- iii. Majority of beneficiaries are farmers though engaged in subsistence farming largely that implies enhancing incomes requires empowerment at the farm with modern agronomic practices and linking the farm to the market through farming as a business
- iv. Most group members lack soft skills like business, business market cohesion, marketing and business management skills
- v. The groups and those engaged in active business have limited understanding of their business needs. Vast majority presume and focus on business working capital.
- vi. There are limited linkages between skills, business needs, and skills enhancement service providers and project direct beneficiaries.
- vii. Business is done as a by the way. Group members expect their village saving groups to get external funding, which causes less ambition at individual and group levels
- viii. There is too much receivership attitude that affects participation in program activities. Some members still have low understanding of the purpose of insurance for embracing.
- ix. There is a lack of a big long term business dream among VSLA group members. Active involvement in farm specialization necessitates the need to organize farm based skills training in a cohort manner targeting farmers

3.4. Recommendations

Drawing on survey findings as discussed in Chapter two of this report, and based on the urgent need to raise VSLA & HIV/AIDS Peer Support Group Members (DBs) out of poverty to meet health care costs for their respective households, the recommendations presented in this section are therefore based on the fact that, group members are not gainfully employed and therefore, are not in position to meet their essential basic needs including healthcare. The focus of the recommendations is based on the fact that insurance has turned out to be a useful financial tool in the health sector (Griffin 1992). The uniqueness of



the ICOBI championed insurance is in its ability to cover the informal sector and the rural self-employed communities, who constitute the majority of Uganda's populations. Also, it is a clear manifestation that strong community participation can facilitate health education and Direct Beneficiaries' sensitization in order to promote healthy behavior and use of preventive services, as the members share a common interest in keeping the costs of healthcare low.

Therefore, the recommendations made hereunder are meant to facilitate the process of monitoring the implementation and evaluation of the USAID/Uganda Private Health Sector Program funded Project titled "Skills and Livelihoods Training in Income Growth and Enterprise Development for HIV/AIDS Peer Support Group Members and VSLA Group Members" to increase the ability of HIV/AIDS peer support groups members, Village Savings and Loan (VSLA) group members, and their respective households to pay for health services through economic strengthening initiatives.

The survey established that VSLA/HIV Peer support groups are engaged mainly in peasantry farming which is subsistence, therefore, unprofitable and yet, labour intensive. The survey results reveal household income was insufficient for the majority of VSLA/HIV Peer support groups. Therefore, CEDO-Uganda should prioritize the enhancement for alternative sources of income through enabling group members to self-discover themselves and link their opportunities for enhanced incomes. This also, would require group members to be empowered on living a decent lifestyle.

Basing on the findings from the study and also bearing in mind the need of skilling all group members, this survey recommends twelve points for consideration by different stakeholders. Implementation of these recommendations however, needs to be given top priority because empowering local communities to access healthcare services is of paramount importance.

- i. There is need to address the software and attitudes of VSLA / HIV Peer support group members and direct project beneficiaries to leverage on their VSLA resources to access capital to engage in gainful income generating ventures.
- ii. There is need also, to build the spirit of solidarity among VSLA / HIV Peer support group members to develop a feel that "if they would not need health care themselves, at least they had done something good for the community by contributing to the insurance fund". It's therefore anticipated that CEDO strives to enhance the households' capacity to save for health through economic empowerment of VSLA members.
- iii. The success and efficacy of VSLA / HIV Peer support groups greatly depends on the group culture, members' internal discipline, economic trends and opportunities among members among others. CEDO therefore; should emphasize as a critical part of livelihood improvements, the generation of



income through meaningful savings, acting as a tool of community mobilization and strategy of health insurance access.

- iv. There is need to move beyond supporting beneficiaries to start market-driven ventures and establish business clinics as prompt adhoc arrangements for Business Development Support (BDS) to create business related information and also, to provide business and entrepreneurship skills for VSLA / HIV Peer support group members.
- v. All planned training programs should incorporate elements of group dynamics, effective management of meetings, leadership and financial management at a personal and group levels to ensure group sustainability.
- vi. VSLA / HIV Peer support group VSLA / HIV Peer support groups need to widen the purpose of doing business through growth thinking and motivation (hope building). CEDO needs to leverage on potential public and private sector partnerships to effectively promote and sustain entrepreneurship among the beneficiaries.
- vii. There is need for attitude building and mindset empowerment with opportunities to make communities appreciate their role to their economic empowerment agenda
- viii. CEDO Uganda should employ opportunities for lifelong learning as a strategy for empowering communities using their own existing environments. Opportunities for lifelong learning could provide a fair and equal chance for VSLA / HIV Peer support group members to benefit from training as much as possible and according to their own abilities. Hence, access to the trainings should be open to everyone.
- ix. VSLA / HIV Peer support group members should be encouraged to diversify since there is too much peasantry specialization
- x. VSLA / HIV Peer support groups should broaden the purpose for saving among members and design post saving cycle exist strategies
- xi. CEDO should also invest in general group members' empowerment to appreciate the need to embrace business and key aspects of bu`ness management but also, to embrace group entrepreneurship.
- xii. CEDO should Identify skills sets for beneficiaries and link them to available opportunities
- xiii. There is need for attitude building and mindset empowerment with opportunities to make VSLA / HIV Peer support group members appreciate their role to their economic empowerment agenda



- xiv. Also, there is need to popularize the purpose of community insurance while innovating on the existing ICOBI CBHI product range
- xv. CEDO need to empower the groups as a going concern entities while making individual group members appreciate that their groups are vehicles for their income emancipation worth respecting and actively participating in.
- xvi. There is need to expound the relevancy of community health insurance among all VSLA / HIV Peer support group members for them to manage effectively their expectations and anxiety.

3.5. Limitations of the Survey

Creswell, (2009) sees limitations as hindrances that may affect the results. This survey was sensitive since it was focusing on perception on household income and general economic wellbeing. Therefore, respondents were relatively suspicious and uncomfortable with some of the questions. As a result, information was withheld. However, data collectors labored to build confidence of the respondents explaining committedly, how the survey was only for planning purposes. In addition, the data collectors explained the potential positive outcomes from the survey.

Annex 1:

List of Districts, Sub-counties, number of groups and members currently reached by ICOBI

No.	District	Sub-County	No. of VSLA groups	VSLA Group Members	HIV Peer Support Group Members/health volunteers
1	Sheema	Kabwohe division	5	125	8
2		Kakindo T/C	3	75	
3		Kamirama	3	75	
4		Kigarama	3	75	
5		Kyangyenyi	5	125	
6		Maseruka	3	75	
7		Sheema Central	4	100	
8		Kagango	2	50	
9	Wakiso	Mende	8	236	1
10	Jinja	Butagaya	5	130	4
11		Budondo	6	430	
12		BuwengeS/C	6	155	
13		Buwenge T/C	5	145	
14	Rukungiri	(Ruhinda)			4
15		Bugangari	3	75	
16		Bwambara	1	24	
17		Rwenshama	3	75	
18		Nyakishenyi	4	100	
			69	2,070	17

NB: these groups are as per April 2017. New groups continue to be formed by ICOBI

Annex 2:

Map of Uganda Showing the Districts of the Project Implementation



Annex 3:

Activity Album



Ms. Babirye Russia sharing with her group on the purpose of the survey



Data collection in Wakiso District



Training Data Collection team in Rukungiri



Training of Data collectors in Jinja



A women's Group in Masiro - Sheema District



Data Entry and Analysis

Annex 4:

Survey Tool

SKILLS AND LIVELIHOODS TRAINING IN INCOME GROWTH AND ENTERPRISE DEVELOPMENT FOR HIV/AIDS PEER SUPPORT AND VSLA GROUP MEMBERS

Direct Beneficiaries' (DB) Identification or Profiling Questionnaire

Preamble:

CEDO Uganda in partnership with USAID/Uganda Private Health Support Program is implementing skills and livelihoods training in income growth and enterprise development for HIV/AIDS peer support and VSLA group members, which are currently partnering with Integrated Community Based Initiatives (ICoBI) in this district. CEDO Uganda is currently profiling the direct beneficiaries who could be engaged in the near future. I therefore ask for your consent and information in this respect.

This form is to be filled by the person conducting Identification or Profiling exercise

General Information				
1. Name of the Group:				
2. Category of Group (HIV Peer Support or VSLA):			3. Group CODE:	
Title of action program and PHS grantee supporting the group:				
4. Starting dates of the group: DD/MM/YR			5. When did you join the group? DD/MM/YR	
6. Dates of filling in this form: DD/MM/YR:				
7. District:	8. County:	9. Municipality/Sub county/ Town council:	10. Parish/ Ward:	11. Village



Direct Beneficiary (DB) Profile		
12. DB ID NO:	13. Names of the beneficiary:	
14. Sex: Male Female	15. Date of birth: DD/MM/YR	16. Age ----- Years
17. Date of intake to the interventions by PHS supported program:		18. The DB is targeted for: a) VSLA b) CBHI c) Other (specify)
19. Has the DB attended formal education? Yes No	20. If Yes, specify level of education attained	
21. How many saving cycles have you participated in for this group?		22. Current performance in VSLA (according to the group leader's report given) a)Excellent b)Good c)Fair d)Poor/Fail
23. How many times have you been present in VSLA meetings during the last 12 saving days? a)Between 0-5 days (b) Between 6-8 days (c) 9-12 days		
24. If the DB dropped out of the VSLA and/or CBHI, give the main reason for drop out		
Health expenditure status		



<p>25. How often do you fall sick? a) Every month (b) Every after 3months (c) Once in a year (d) Other-specify</p>	<p>26. Where do you get treatment from? a) Health centre (b) Hospital (c) Traditional healer (d) Use local herbs (e) Self-medication (f) Other-specify</p>
<p>27. How many meals do you get a day? a) One meal (b)Two meals (c) Three meals (d)Others-specify</p>	<p>28. Do you know about CBHI? Yes No</p>
<p>29. Do you have any prolonged heath problem? Yes No</p>	<p>30. Do you participate in CBHI activities? Yes No If Yes, which activities? If No, Why?</p>
<p>31. Do you have family members in CBHI? Yes No If yes, how many?</p>	
<p>Attitude and Behaviour on Community-Based Health Financing</p>	
<p>32. In your view, do you think CBHI is relevant? Yes No Give reasons for either.</p>	<p>33. In your view, do you think your current economic status is conducive for health needs? Yes No Why do you think so? Give reasons</p>
<p>Economic wellbeing</p>	
<p>34. What do you or your caretaker do to earn a living?</p>	<p>35. Like how much does he/she earn in a month? a) UGX5,000-50,000 (b) 60,000-100,000 (c) 110,000-250,000</p>



<p>38. Do you think this Income is sufficient for the household? Yes No</p>	<p>39. Do you get all the essential basic needs that you want? Yes No</p> <p>Which ones do you get or do not get?</p>	
<p>Employment</p>		
<p>40. Are you working or owning a business?</p>	<p>41. What sector and type of work/business do you do?</p> <ol style="list-style-type: none"> 1. Telecom industry 2. Agriculture 3. Mining and quarrying 4. Construction 5. Community services 6. Fishing 7. Domestic work 8. Urban informal sector 9. Entertainment 10. Sex worker 11. Others (specify) 	
<p>42. Do you work alongside a caretaker? Yes: No:</p>	<p>43. Location of work; County/Municipality/sub county/ Town council/parish/village</p>	
<p>44. How many working hours per day?</p>	<p>45. Working days per week?</p>	<p>46. Time of work (seasonal, night, day, weekends, school hours...)</p>



47. Remuneration/ earnings per month?	Or in kind services/ goods	48. Year when started current work/business?	49. Reasons for starting work/ business: 1. 2. 3.
50. Is the beneficiary in hazardous work? Yes: No:			
51. Any Special Remarks:			
Names and title of person conducting interview: Telephone contact: Date:			



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Government of Uganda

CHILD RIGHTS EMPOWERMENT AND DEVELOPMENT
ORGANIZATION (CEDO UGANDA)

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