**URGENT ACTION FUND – AFRICA**

**Rapid Response Grant Application Form**

Proposals should include the following information:

ORGANISATIONAL INFORMATION

**1. Name, and contact information of the organisation making the request (physical address/ phone/ fax/ e-mail).**

Kigezi Women in Development (KWID), Plot 110 KabaleMbarara road, +256772428430, kwid1996@gmail.com

**2. Name and title of the contact person(s).**

Tumuheirwe Florence, Executive Director

**3. What is the issue of focus for this application and how long have you been working on this issue?**

Interrupted access to Sexual and Reproductive Health services by rural women during the COVID-19 Pandemic. KWID has been working on this issue since 2012

**4. Number of women working in the organization, age range, and positions held.**

4 women currently work in the organization, 23 - 57 years. The following positions are held by Women; Executive Director, Programs Director, Accountant and Field Assistant.

**5.Where are you located? Please let us know if you are located outside central/capital cities.**

KWID coordination office is located in South Western Umbrella of Water and Sanitation building, Plot 110 KabaleMbarararoad, Kabale districtin South Western Uganda

**6. List your current and previous sources of funding.**

The following are our previous sources of funding

1. World Vision

2. Civil society Fund through Mayanja Memorial Hospital Foundation

3. Civil Society Fund through PACE Uganda

4. USAID RHITES SW/EGPAF

Our current funders include:

1. Click Rukiga

2. Ministry of Foreign Affairs through Amref Health Africa - Uganda

**7. Provide at least three names and current contact information for organizations or funders who can endorse your work (Including phone numbers and e-mail addresses).**

1. Dr. Patrick Kagurusi[patrick.kagurusi@amref.org](mailto:patrick.kagurusi@amref.org), +256703330041Amref Health Africa, Uganda
2. Mr. Mike Whitlam [m.whitlam@btinternet.com](mailto:m.whitlam@btinternet.com) +441895678169 Click Rukiga, UK
3. Patricia Munabi[patricia.munabi@fowode.org](mailto:patricia.munabi@fowode.org) +256758670002 Forum for Women in Democracy

**8. How did you learn about Urgent Action Fund-Africa?**

A colleague in CSO based in Kampala

THE SITUATION

**9. Provide a detailed description of the event that has led to your proposed action. When did this event occur?**

The novel corona virus was first identified in December 2019 in Wuhan City, China and coronavirus disease (COVID‑19) declared a pandemic by World Health Organisation (WHO) on 11 March 2020.

In Uganda, the first case of COVID-19 was identified on 21st March 2020. Starting Midnight Sunday, 22nd March, 2020, the Government of Uganda banned all passenger flights entering and leaving Uganda. Only cargo planes were allowed in and out. It also banned all entries into Uganda by anyone other than truck drivers, by land or water.

On 25th March 2020, H.E. the President of Uganda, Y. K Museveni issued fresh directives in the Country's determined efforts to fight the spread of COVID19 pandemic among them was banning public transport for 14 days, decongestion of markets and a warning to traders against hiking prices of merchandise. This affected public transport includes all taxis, coasters, buses, passenger trains, Tuk-Tuk and BodaBodas.

* Private vehicles were allowed but with only a maximum of 3 people.
* Trucks, Delivery Vans & Pickups were allowed strictly for delivery of food and essential commodities.
* Ambulances, Security vehicles, Institutional/Government vehicles subject to Standard Operating Procedures issued by Ministry of Health and Vehicles for sanitary services like garbage collection, cesspools were allowed to move

On 31st March 2020, the president of Uganda addressed the nation, in his address; he announced a 14 days’ county lock down including strict movement restriction as a way of reducing the spread of the virus in addition to WHO’s guidance for containment – to test suspected cases, isolate those who test positive, contact tracing and treatment of severe cases requiring hospitalization.

The increase in the number of confirmed cases of COVID‑19 in Uganda (100 as of 6th May, 2020) has necessitated the country and Ministry of Health (MOH) to take stern measures to curb further spread of the disease. However, the restrictive measures that have been put in place by Uganda and the MOH at large to contain the spread of the COVID-19 pandemic, have negatively affectedthe access to essential SRH services especially by women and girls. This includes information and counselling on SRH and contraception services, maternal and newborn health services, services for gender-based violence (GBV), STIs/HIV, infertility and reproductive cancers, which could result in increased risk of unintended pregnancy, and possible complications of pregnancy and childbirth, and maternal and new-born morbidity and mortality

Currently, there is one COVID-19 confirmed case undergoing treatment at Kabale Regional Referral Hospital, 30 people are under quarantine at the same hospital yet it is not ready to handle COVID -19 cases as stated by Dr. Michael Bukenya, the Chairperson Parliament's Health Committee during the COVID-19 Preparedness Assessment visit <https://youtu.be/Rftx6jLvWKM?t=4>

In Kamwezi, Rukiga district, which is at the border with Rwanda, 8 people sneaked into Uganda through the Uganda-Rwanda porous border and are quarantined at Kamwezi High School. This has put the population at risk since health centres are not well equipped to handle COVID-19 cases and at the same time meet SRH needs of community members

Ever since the COVID-19 pandemic broke out in Uganda, women and girls on FP methods, pregnant mothers with appointments to attend Antenatal care, clean and safe delivery and postnatal services are suffering due to lack of access to contraceptives and reproductive services respectively.

Recently, KWID conducted Monitoring of health service delivery in 14 selected health facilities in Kabale, and observed that the proportion of women and adolescent girls who had enrolled on Family Planning methods; Pregnant mothers with appointments for attending Antenatal care, Clean and safe delivery and postnatal has reduced due to the lock down and the ban of public transport means.There is a reduction in the number of people coming to seek general health care due to fear of contracting COVID-19. We also found out that most of the health workers are not well equipped, still lacked personal protective equipment and this might put their life at stake since they are at the frontline of the fight against COVID-19. (Link to the report: <https://drive.google.com/file/d/1vUKryTEEOoIglRzSMueKgQobO8PUBxVq/view?usp=sharing>)

Young people have been affected by the closure of social spaces including schools, community centres and health clinics where many of them were receiving comprehensive sexuality education (CSE) and SRH services. This has resulted in many young people not having access to essential SRH services

**10. What makes this situation an opportunity for advancing women’s human rights?**

Due to the ban of public transport, women and girls do not access services as and when they need them or per appointment. Only expecting mothers call the RDC, Chairman LCV or DHO to be transported to the health facility. Some mothers miss on this while others have to wait yet when the time is ready the child cannot wait. Access to Family Planning, Antenatal Care and Post Natal Care services is paramount for the well-being of mothers and new born babies. Not accessing these crucial services lead to population explosion, complications in deliveries and sometimes fatal.

The government of Uganda, has focused more on combating the pandemic at the detriment of other social service including health. This has severely disrupted access to life saving sexual and reproductive health services which affects women's human rights most, thus an opportunity for advancing Women’s rights and reason for KWID to propose some interventions.

**11. Was this situation unanticipated/unexpected? Explain.**

This situation was unexpected. This is a pandemic which broke up a few months ago in countries outside Uganda andwas neverexpected to spread widely within a short period of time into the country. After the outbreak in Uganda, KWID never expected some of the preventive measures from the government and the Ministry of Health guidelines like the lock down, restriction of public transport and travel curfews.

**THE URGENT ACTION**

**12. Describe the proposed response to the situation. What is the intended result?**

* KWID shall write letters either by mail or use boda bodas and make phone calls to the District Chairperson, Resident District Commissioner, District Health Officer, District Community Development Officer, Chief Administrative Officer, Local Council III, sub county chiefs, Community Development Officers and Health Centre in charges in Kabale and Rukiga districts to inform them about the project and how it will be implemented
* Conduct radio talk shows and radio spotstargeting young people, women and the community to create awareness on how to access sexual and reproductive health services during the COVID-19 crisis.
* Advocacy for inclusion of personal protective equipment (PPE) for health workers (gloves, masks, gowns, soaps, hand sanitizers, etc.) for clinical management of COVID-19.
* Conduct follow up visits with health facilities to monitor stock levels of contraceptives to ensure continued availability of an adequate contraceptive method mix.
* Use of mobile technology and social media platforms to inform clients, young people and the community about the benefits of SRH services and the need to continue using them
* Production of IEC materials like Posters, stickers and fact sheets (all translated in the local language)
* KWID shall work with selected boda boda riders and health workers for commodity distribution in the community.
* Conduct quarterly implementation morning of the project by KWID BOD members
* Conduct end of project evaluation

**Intended results**

* Women and girls who are enrolled on FP continue accessing the services and those in need of the FP services access to the services and availability of an adequate contraceptive method mix.
* Pregnant mothers get access to antenatal services, deliver under trained care and get access to post-natal services
* Clear and consistent messages that are informed by current and up-to-date information on COVID-19
* Clear information about where and how to access available sexual and reproductive service

**13. Who is your target group? Please use the following variables, if applicable, or indicate your own: age group (for example, young women); location (for example, Rural/Urban focus); sexual orientation/gender identity (for example trans\*, bisexual); vulnerable groups (IDPDs, vendors, sex workers); other (please describe).**

We are targeting women and girls in rural communities of Kabale and Rukiga districts in South Western Uganda.

**14. Will you collaborate with other groups at the local, regional, or international level to carry out this action? If yes, which groups? Can you explain their roles and provide their contact information?**

Yes. KWID shall work with the district COVID-19 task force of Kabale and Rukiga, Community champions and focal persons for Sexual and reproductive health at healthfacilities to make follow up with pregnant mothers with appointments for ANC, clean and safe delivery and post natal care services and those on FP methods to ensure they access the services in a safe manner.

**15. What is the amount of the request? Please provide a detailed budget.**

UGX 63,468,000 equivalent to $ 17,154

Exchange rate 1$ = UGX 3,700

**16. What other sources of support are available for this effort?**

N/A

**17. Should the information about this request be kept confidential? If yes, please indicate why, to what extent and for how long?**

No