

SKILLING YOUTH FOR EMPLOYMENT IN AGRIBUSINESS (SKY) PROJECT

AN ENDLINE REPORT FOR THE LIFE SKILLS COMPONENT

DECEMBER, 2019



ACKNOWLEDGEMENTS

Special recognition goes to the Embassy of the Kingdom of the Netherlands (EKN) through AVSI Foundation for providing the financial support for the implementation of this project and the associated M&E activities. Without your support, the study would not have been accomplished.

Furthermore, we are extremely grateful to the youth, coordinators/instructors, principals and farm managers of the participating institutions for their collaboration throughout the entire project.

Lastly, we would like to appreciate and thank the following LGIHE staff for their contribution: John Mary Vianney Mitana (Ph.D); Mauro Giacomazzi; Monica Fontana Abad (Ph.D); Martin Ariapa; Edimond Serwanga; John Muhangyi; Daniel Angulu; Ivan Mukibi Kimpanga; Immaculate Namuli; Christine Nassanga; and Jean Mary Wendo. Also, we extend our gratitude to Simon Opio, Pius Aporu and Esther Nelima who together with the LGIHE team conducted the data collection; and Esther Amito and Alex Kakumirizi who performed the data entry.

Table of Contents

ACKNOWLEDGEMENTS	i
LIST OF TABLES	iii
LIST OF FIGURES	iv
LIST OF ACRONYMS	v
EXECUTIVE SUMMARY.....	vi
CHAPTER ONE: INTRODUCTION	1
1.1. About Skilling Youth for Employment in Agribusiness (SKY) project.....	1
1.2. About AVSI Foundation.....	1
1.3. About Luigi Giussani Institute of Higher Education	2
1.4. About the Life Skills Component.....	2
1.5. Objectives of the endline study	3
CHAPTER TWO: METHODOLOGY.....	4
2.1. Study design	4
2.2. Study scope and categories	4
2.3. Data collection methods and tools	4
2.4. Sample sizes and sampling strategies.....	5
2.5. Data management and analysis.....	6
2.6. Data Quality Control and Non-response.....	7
2.7. Ethical Considerations	7
2.8. Challenges faced during the endline study.....	7
CHAPTER THREE: PRESENTATION AND INTERPRETATION OF THE FINDINGS	8
3.1. Socio – demographic characteristics of the youth.....	8
3.2. EFFECTIVENESS OF LGIHE INTERVENTIONS	8
CHAPTER FOUR: CONCLUSIONS AND RECOMMENDATIONS	31
4.1. Conclusions.....	31
4.2. Recommendations.....	31

LIST OF TABLES

Table 1: Number of youth per institution.....	5
Table 2: Youth's highest education levels	8
Table 3: Youth who correctly responded to each of the statements about HIV/AIDS	9
Table 4: NFP methods that youth are aware of	11
Table 5: Youth's extent of agreement with statements on friendship and love	12
Table 6: HIV/AIDS preventative methods known to youth.....	14
Table 7: Other STIs known to the youth.....	14
Table 8: Main reasons why young people use drugs or substances.....	17
Table 9: Kinds of GBV in the youth's communities.....	19
Table 10: How youth responded to each of the statements about GBV	20
Table 11: Forms of sexual abuse on youth in the community.....	20
Table 12: How youth responded to statements about sexual health	22
Table 13: Non-natural family planning methods that youth are aware of	24

LIST OF FIGURES

Figure 1: Proportion of youth who are aware of at least one family planning method	10
Figure 2: How youth scored their knowledge and skills on life skills at endline	11
Figure 3: Proportion of youth's drugs and substances use before and after the life skills trainings.....	16
Figure 4: Proportion of youth who tried/used alcohol or tobacco/cigarettes	17
Figure 5: Main family planning method preferred for use by the youth.....	24

LIST OF ACRONYMS

AIDS	Acquired Immunodeficiency Syndrome
BTVET	Business, Technical, Vocational Education and Training
EU	European Union
FGD	Focus Group Discussion
FGM	Female Genital Mutilation
GBV	Gender Based Violence
HIV	Human Immunodeficiency Virus
HPV	Human Papillomavirus
ITC	Integrated Skills Training Centre
KII	Key Informant Interview
LGIHE	Luigi Giussani Institute of Higher Education
M&E	Monitoring and Evaluation
NDP	National Development Plan
NFP	Natural Family Planning
NGO	Non-Governmental Organisation
PEP	Post-Exposure Prophylaxis
PrEP	Pre-Exposure Prophylaxis
RA	Research Assistant
SDG	Sustainable Development Goals
SKY	Skilling Youth for Employment in Agribusiness
STD	Sexually Transmitted Disease
STI	Sexually Transmitted Infection
UNHCR	United Nations High Commissioner for Refugees
UNICEF	United Nations International Children's Emergency Fund
USAID	United States Agency for International Development

EXECUTIVE SUMMARY

LGIHE on behalf of AVSI Foundation implemented the life skills trainings under the Skilling Youth for Employment in Agribusiness project which aims to enhance sustainable creation of employment for youth in the agribusiness sector in the areas of Lake Kyoga, Elgon, Lake Victoria Crescent, and South-Western Uganda. Specifically, the Life Skills component was intended to capacitate youth with knowledge and skills relevant for attaining, managing and maintaining a job; and as well be able to respond to challenges that might pose a threat to their productivity at a workplace.

In order to learn the changes that have happened as a result of the life skills trainings, LGIHE conducted an endline study that aimed at: (i) ascertaining the extent to which the project results linked to the life skills component have been achieved; and (ii) assessing the outcomes of the life skills trainings on the beneficiary youth. The study adopted a one-group pretest–posttest design where measurements were conducted with the same group of youth both at baseline and endline utilizing both quantitative and qualitative approaches that included: documentation review, a survey with 160 youth, 9 focus group discussions, 2 group interviews, and 5 key informant interviews. The study population comprised of youth who participated in the life skills trainings between 2016 and 2018, Institution Principals, Farm Managers, and Coordinators.

The majority (95.6%) of the youth surveyed (95.0% of males and 97.4% of females) reported to have been motivated to go for voluntary counselling and testing of HIV/AIDS as a result of participating in the LGIHE life skills trainings. Furthermore, apart from HIV/AIDS, the majority (94.4%) of the youth (95.0% of males and 92.3% of females) were aware of at least 2 other STIs. Most (68.4%) of the youth were aware of at least 2 natural family planning methods (64.7% of males and 79.5% of females). Overall, in regards to the outcomes of the life skills trainings, there is a change in youth's behaviours, self-management, collaboration/teamwork skills as a result of the various trainings. The trainings have contributed to the transformation of the youth into responsible and respectable persons; and improved their chances of obtaining and maintaining jobs, a very useful aspect of the life skills component in connection with the SKY project goal and objectives.

Stakeholders interviewed commended the life skills trainings for contributing to an improvement in youth's knowledge and skills and therefore raised a request for the trainings to be extended to other institutions and youth.

CHAPTER ONE: INTRODUCTION

1.1. About Skilling Youth for Employment in Agribusiness (SKY) project

Skilling Youth for Employment in Agribusiness project aims to increase employability of youth aged 15 to 35 years in the agribusiness sector and strengthened agro-institutions. The SKY project was designed in line with Skilling Uganda strategic plan (BTVET Strategy and Plan, 2012)¹, an integral part of the Uganda National Development Plan II theme: “Strengthening Uganda’s Competitiveness for Sustainable Wealth Creation, Employment and Inclusive Growth” (NDP II, 2015)² and the Sustainable Development Goals (SDGs)³. SKY works with public and private sector agri-skilling to enhance competitiveness and trade as one of the fundamental determinants of wealth creation, production and increasing the skills base.

The overall goal of the SKY project is to improve the relationship among young adults, business communities, BTVETs, private skills providers, government agencies and leaders to create a youthful labour market with relevant skills, and to promote the change of current business models and behaviours. It was designed to strengthen the skilling gaps provided by the BTVET institutions and other vocational colleges and higher institutions. Needs assessment by AVSI Foundation Uganda and experience in the implementation of a similar skilling program in Northern Uganda revealed that youth lack the skills required for the job market in Uganda and yet many lack innovation and creative skills and mindset to start-own business.

The project is being implemented by AVSI Foundation in Uganda with funding from the Embassy of the Kingdom of Netherlands for a period of five years from 2015 to 2020, in the areas of Lake Kyoga, Mt. Elgon, Lake Victoria Crescent, and South-Western Uganda, focussing on three components that include: (i) Agricultural skills training; (ii) Business skills training; (iii) and Life skills training.

1.2. About AVSI Foundation

AVSI Foundation is an international NGO, founded in 1972, with its headquarters in Italy and operating in at least 30 countries globally. Its mission is to support human development in developing countries according to the social teaching of the Catholic Church, with special attention to education and promotion of the global dignity of every person. AVSI has been working in Uganda since 1984 starting in the Northern Uganda region and quickly expanding to at least 70 districts. AVSI’s sectors of operation in Uganda include health, food security and nutrition, agriculture, disability, education including early childhood care and development, protection including child protection and psychosocial support programs, economic recovery and livelihoods, water and sanitation, environment and energy. AVSI’s donors in Uganda

¹ Republic of Uganda Ministry of Education and Sports [2012], Skilling Uganda: BTVET strategic plan: 2012/13 to 2021/2.

² Uganda National Planning Authority (2015): Second National Development Plan (NDP II), 2015/16-2019/20.

³ UN General Assembly, Transforming our world: the 2030 Agenda for Sustainable Development, 21 October 2015, A/RES/70/1.

include USAID, the EU, the Italian and Dutch Government, UNICEF, UNHCR, the private sector and other individual donors.

1.3. About Luigi Giussani Institute of Higher Education

Luigi Giussani Institute of Higher Education (LGIHE) was contracted to implement the component of life skills. LGIHE is an institution of higher learning accredited and mandated by the Uganda National Council for Higher Education in September 2013 to offer recognized programmes in teacher education. Broadly, LGIHE focuses on three major areas: (1) offers a Diploma in Primary Education, Diploma in Early Childhood Development, Certificate in Early Childhood Development and Certificate in School Leadership and Management; (2) offers continuous professional development trainings for school leaders, teachers, social workers, medical personnel and workshops for students and parents; and (3) offers monitoring, evaluation and learning services both internally and to external agencies through a network of specialized consultants.

1.4. About the Life Skills Component

This component was proposed to equip youth with skills relevant in attaining, managing and maintaining a job. Specifically, the trainings were aimed at responding to the main challenges that obstruct youth's productivity at the work place and threaten their long-term employment/self-employment such as early pregnancies and high prevalence of sexually transmitted infections.

The youth were provided with life skills trainings, to effectively and efficiently handle emerging issues related to their work place and as well be able to help fellow youth with similar challenges in their communities. The trainings employed participatory methodologies such as group discussion and plenary sessions whereby participants were encouraged to freely ask, contribute and share views and experiences about a particular topic. The trainings were conducted in two phases:

First Phase: This was a three days training covering 5 topics. The topics include:

- **Human Dignity: Human Entitlements/Rights.** This session aimed at creating awareness of one's infinite value, human rights and the responsibilities attached to the enjoyment of the various rights.
- **Human Development: Sexual Reproductive Systems.** Through this session, youth were sensitized about the changes that occur among boys and girls as they transition from childhood to adulthood as well as the appropriate ways of embracing those changes.
- **Personal hygiene:** This session focused on creating awareness of the need, importance and the ways of maintaining both the body and the surrounding clean.
- **Sexual Transmitted Infections:** This aimed at creating awareness of the different sexually transmitted infections besides HIV/AIDS, their signs and symptoms and the ways of

preventing such infections as well as clearing the misconceptions and myths around such infections.

- **True Friendship, Love and Sexuality:** This aimed at highlighting the distinction between love and sex and the meaning of friendship. Additionally, this session emphasized the need for youth to repel peer pressure and make rational and independent decisions about their lives.

Second Phase: This was a two days training covering 4 topics. The topics include:

- **Tradition and Culture:** This session aimed at creating awareness of the true meaning of tradition and sensitizing youth about the traditional practices linked to sexual health and human dignity. It was also envisaged that as a result of this awareness, participants would retain the meaning of tradition while modifying the harmful traditional practices.
- **Fertility Awareness:** This session aimed at equipping participants with knowledge of the positive aspects of fertility awareness. Furthermore, the session covered the various ways of family planning under the broad categories of natural and non-natural methods.
- **Drugs and Substance Abuse:** This aimed at creating awareness of the various forms of drugs and substances that are always abused by the youth, reasons for abuse, the associated dangers and the different steps towards avoiding drugs and substance abuse.
- **Love that Hurts: Gender Based Violence (GBV);** this session aimed at creating awareness of the different types of GBV, contributing factors and the various ways through which GBV could be eliminated or reduced in society.

During the course of the project, the life skills trainings were conducted in over 23 institutions across the project regions. Before the various trainings, youth were tasked to complete a survey questionnaire designed around the stated objectives so as to understand their baseline situation. Since the project is ending, LGIHE and AVSI conducted an endline study that could be used to learn what has happened as a result of the life skills component.

1.5. Objectives of the endline study

This endline study aimed at:

- i. Ascertaining the extent to which the project results linked to the life skills component have been achieved.
- ii. Assessing the outcomes of the life skills trainings on the beneficiary youth.

CHAPTER TWO: METHODOLOGY

2.1. Study design

The study adopted a concurrent mixed methods design where qualitative and quantitative data were collected at the same time. Specifically, the quantitative component followed a one-group pretest–posttest design where measurements were conducted with the same group both at baseline and endline while the qualitative component followed a phenomenological design that is used to describe, in depth, the characteristics of the phenomena that the participants have experienced or lived in.

2.2. Study scope and categories

The study focused on the following project areas: Mt. Elgon area, Lake Kyoga basin, Lake Victoria Crescent, Lango sub-region, and South-Western Uganda regions. It involved these categories:

- Youth In-school (Secondary schools with school farms)
- Youth attached to Agribusinesses
- Youth in Agro- institutions such as BTVETs or Agricultural colleges
- Youth attached to learning farms or local resource skills providers

Specifically, beneficiary youth who participated in the life skills trainings conducted in the period 2016-2018, were considered for this endline study. This meant an allowance of at least 1 year for the beneficiary youth to internalize, appreciate and apply the knowledge and skills gained from the trainings.

2.3. Data collection methods and tools

- ❑ **Document Review:** It was deemed important to review documents related to youth's life skills interventions, and sexual and reproductive health issues, during the tool development and report writing stages.
- ❑ **Youth's survey:** A survey with a representative number of beneficiary youth was conducted. A questionnaire was designed for this. The developed questionnaire contained both open- and closed-ended questions so as to generate rich data useful for making practical recommendations.
- ❑ **Key Informant Interviews (KIIs):** Interviews with purposively selected participants who included: the heads of the institutions and/or coordinators/instructors of the Agribusiness course, were conducted. A KII guide was developed and used.
- ❑ **Focus Group Discussions (FGDs):** Discussions with beneficiary youth around life skills and employability (one's ability to gain initial employment, maintain employment, and obtain new employment if required) related themes were conducted in the target institutions.

2.4. Sample sizes and sampling strategies

❑ For youth's surveys

In computing the desired sample size for this study, youth who received trainings in 2016-2018 and completed the baseline survey questionnaires were considered. These youth were from the project institutions. Applying the formula below with known population size:

$$s = \frac{Z^2 N p(1-p)}{d^2 (N-1) + Z^2 p(1-p)}$$

Where S = required sample size; N = 2,255 youth who participated in the trainings and also filled the baseline survey questionnaires in the years 2016-2018; Z= value at the desired confidence level (1.96 for 95% confidence level); d = degree of accuracy expressed as a proportion (0.05); p = population proportion (assumed to be 0.5*0.5 since this would provide the maximum possibility of variance of the study variables of interest). This gave us a sample size of at least **350** youth for this study.

The first stage in the sampling process was to categorize the 23 institutions in 2 groups: (i) BTVET/Agricultural colleges and Secondary schools which had 6 institutions; and (ii) Agribusinesses or learning farms/local resource skills providers – which had 17 institutions. Then from group (i) 3 institutions were randomly selected while in group (ii) 9 institutions were selected. This allowed us to have over 50% of the institutions constituting the sample.

The other step in the sampling process was to ensure that, at least 1 institution (in group ii) from each region was selected. This was to ensure that youth were being selected from all the regions to cater for regional differences. In each of the sampled institutions, desired youth were selected through simple random sampling, using the baseline dataset.

Out of the **350** youth who were targeted, 160 youth from 12 institutions participated in the study, which is about **3%** of all the youth trained by LGIHE on life skills (as of November, 2019) in the SKY project. The majority of the youth were unable to participate in the endline survey due to reasons such as: residing very far from the training institutions; inaccessible due to loss/change of contact details; and tight schedules at their respective places of work that could not permit them to participate in the study. Therefore, the number of target youth and those who participated in the endline study per institution and sex were as below.

Table 1: Number of youth per institution

Institution	Target number	Actual number		
		Male	Female	Total
Jeka Poultry Farm	25	14	04	18
Awoja Riverside Farm and Leisure	30	05	01	06
Agromax Uganda Limited	35	06	01	07
St. Padre Pio ITC	10	11	06	17
Bwasandeku Mixed Farm	10	09	01	10
St. Joseph Don Bosco	125	28	12	40

Anchor Foods Limited	5	02	04	06
Kyera Agricultural Training College	35	07	00	07
Bamwe Agro-technologies	50	06	03	09
Agdi Dairy Farm	20	05	00	05
Horticulture Youth Group	20	19	03	22
Lindjeri Farm	25	09	04	13
Total		121	39	160

This realized sample size limits the Research Team to disaggregate the findings by region (or area of focus) and therefore combined results are presented. Furthermore, the quantitative findings should be used as indicative (or a pointer) to the situation of the youth at endline and not taken as a generalization of all the beneficiaries of the SKY life skills trainings due to the achieved small sample size.

❑ For Key Informant Interviews

Interviews were conducted with the heads of the institutions and/or coordinators/instructors of the Agribusiness course. These interviews were conducted with either one representative or both, depending on the participants' availability. These respondents were selected purposively due to their participation or awareness of the project and the roles that they play in their institutions. A total of 5 KIIs were conducted. However, KIIs in some institutions were not conducted because the key persons were not available on the days of the endline study.

❑ For the focus group discussions

A total of 9 FGDs with 6-15 participants (1 FGD in each institution, mix of males and females) and 2 group discussions with 4-5 participants were conducted. The participants of the FGDs were among those selected for the surveys.

2.5. Data management and analysis

- ❑ **Data collection process and field coordination:** Before the data collection date in any institution, a list of sampled youth was shared with the Project Coordinators from LGIHE and the sampled institution, for mobilization of the youth. During the data collection day, the sampled youth were invited to the institutions to complete the survey questionnaires. The youth were interviewed by the recruited and trained data collectors.
- ❑ **Data entry process:** Filled questionnaires were captured into the pre-designed system- Epidata (Version 3.1) that controls for data input errors and safeguards data integrity, and also eases the process of export to the analytical packages.
- ❑ **Data analysis:** Quantitative data analysis was performed using STATA (Version 13) that allows for merging, editing and cleaning. Data was analysed in terms of proportions and percentages while displaying the results in frequency distribution tables and graphs. In most cases, disaggregation by sex was considered. Furthermore, the results of the endline were compared with those of the baseline so as to ascertain the changes that have happened in the beneficiary youth as a result of the life skills trainings.

Qualitative data was manually analysed by reading respondents' texts line-by-line to identify aspects that explained the respondents' perceptions, attitudes and practices in relation to the training themes/topics. The topics/themes included: human dignity; sexual reproductive systems; personal hygiene and sanitation; sexual transmitted infections; true friendship, love and sexuality; tradition and culture; fertility awareness; drugs and substance abuse; gender-based violence. To reflect the respondents' voices, several of their quotes 'verbatim' were used to support the findings.

2.6. Data Quality Control and Non-response

- ❑ **Checks by the M&E Officer:** The M&E Officer regularly checked that the recruited Research Assistants and LGIHE personnel were following the study protocol. In addition, any missed interview was reported to the supervisor before leaving the institution.
- ❑ **Training of the Research Assistants:** Three (3) Research Assistants (RAs) were recruited by LGIHE while considering those who have experience in interviewing different categories of stakeholders for both qualitative and quantitative research. All recruited RAs were invited and facilitated for a one day training on study objectives, interviewing skills, research ethics, tool administration and, informed consent administration, among others.
- ❑ **Data collection process:** During data collection, spot checks were conducted by the LGIHE M&E personnel to ensure that the Research Team is following the study protocol.
- ❑ **Working with project coordinators:** This helped to increase on participation of the various respondents in the study.

2.7. Ethical Considerations

LGIHE developed and utilize approaches that address ethical considerations in dealing with youth. This was followed by all the persons involved in the study.

2.8. Challenges faced during the endline study

The challenges encountered during the survey include:

- Many youth could not be accessed for the survey mainly because their contact numbers were either unavailable or no longer on service during the mobilisation period.
- Some youth who were contacted did not turn up at the various institutions stating reasons such as being busy at their work places, lack of transport, and relocation to places very far away from the training institutions.
- Some coordinators were not cooperative and this led to missing of key informant interviews as they were unable to appear at the institutions during the survey period. Other key informant interviews were missed because the persons who were meant to be interviewed had other engagements on the days for data collection.
- Some coordinators anticipated incentives such as allowances and transport refund in order to participate in the interviews. On realising that nothing had been planned for them, they opted to shun the survey activities.

CHAPTER THREE: PRESENTATION AND INTERPRETATION OF THE FINDINGS

3.1. Socio – demographic characteristics of the youth

In order to ensure comparison between baseline and endline situations, only youth who completed the life skills questionnaire at both periods were considered for analysis. A total of 160 youth (75.6% of males) from 12 institutions participated in the endline study. These youth were of an average age of 24.4 years (24.6 years for males; 23.6 years for females) ranging from 18 to 38 years. More than 80% of the youth surveyed reported to have attained at least an Ordinary level of education.

Table 2: Youth's highest education levels

Education level	Male	Female	Total
	n(%)	n(%)	n(%)
Primary	14(11.6)	7(17.9)	21(13.1)
Secondary, O' Level	48(39.7)	14(35.9)	62(38.8)
Secondary, A' Level	10(8.3)	4(10.3)	14(8.8)
College Certificate	27(22.3)	11(28.2)	38(23.8)
College Diploma	16(13.2)	1(2.6)	17(10.6)
University Degree	1(0.8)	0(0.0)	1(0.63)
Apprenticeship	5(4.1)	2(5.1)	7(4.4)
Total	121(75.6)	39(24.4)	160(100.0)

3.2. EFFECTIVENESS OF LGIHE INTERVENTIONS

Study objective (i): To ascertain the extent to which the project results linked to the life skills component have been achieved

Two indicators were designed to track the effectiveness of the LGIHE life skills component.

⇒ **Indicator on Sexually Transmitted Diseases (STD):** % increase in the proportion of target youth who have comprehensive knowledge about HIV/AIDS

At endline, 38.1% of the youth had comprehensive knowledge about HIV/AIDS portraying an increase of 2.5% from baseline.

Comprehensive knowledge about HIV/AIDS is defined as correctly knowing that both consistent condom use and having only one uninfected sex partner who has no other sex partners can reduce the chances of getting HIV/AIDS, knowing that a healthy looking person can as well have HIV/AIDS and rejecting the most common misconceptions about HIV/AIDS transmission: that HIV/AIDS can be transmitted by mosquito bites or by sharing food with someone who has the virus (Uganda Bureau of Statistics [UBOS], 2011)⁴.

To ascertain youth's knowledge about HIV/AIDS, youth were asked to self-report the extent to which they agreed or disagreed with statements about HIV/AIDS prevention and transmission,

⁴ Uganda Bureau of Statistics (UBOS) and ICF International Inc. 2012. *Uganda Demographic and Health Survey 2011*. Kampala, Uganda: UBOS and Calverton, Maryland: ICF International Inc.

based on a 3-point Likert scale whereby: 1= I totally agree; 2= I partially agree; and 3= I do not agree. Youth who correctly responded to **all** the statements were labelled as having comprehensive knowledge about HIV/AIDS, otherwise not.

More than a third (38.1%) of the youth (38.8% of males and 35.9% of females) who participated in the endline survey had comprehensive knowledge about HIV/AIDS. This was slightly higher than the proportion at baseline which stood at 35.6% of the youth (36.4% of males and 33.3% of females). The proportion of youth who correctly responded to each of the statements about HIV/AIDS prevention and transmission are shown in the table below.

Table 3: Youth who correctly responded to each of the statements about HIV/AIDS

Statement	Baseline			Endline		
	Male n(%)	Female n(%)	Total n(%)	Male n(%)	Female n(%)	Total n(%)
A healthy-looking person can as well have HIV/AIDS (Yes)	100(82.6)	26(66.7)	126(78.8)	98(81.0)	31(79.5)	129(80.6)
Someone can get HIV/AIDS because of witchcraft or other supernatural means (No)	104(86.0)	33(84.6)	137(85.6)	109(90.1)	35(89.7)	144(90.0)
Someone can reduce their chance of getting HIV/AIDS by having just one uninfected sex partner who has no other sex partners (Yes)	107(88.4)	32(82.1)	139(86.9)	79(65.3)	25(64.1)	104(65.0)
Someone can get HIV/AIDS from mosquito bites (No)	84(69.4)	30(76.9)	114(71.3)	100(82.6)	31(79.5)	131(81.8)
Someone can reduce their chance of getting HIV/AIDS by using a condom every time he/she has a sexual union (Yes)	61(50.4)	22(56.4)	83(51.9)	51(42.2)	16(41.0)	67(41.9)
Someone can get HIV/AIDS by sharing food with someone who has the virus (No)	106(87.6)	35(89.7)	141(88.1)	108(89.3)	36(92.3)	144(90.0)

From **Table 3**, the endline results depict an increase in the proportion of youth with correct knowledge of how to prevent the spread of HIV/AIDS as well as rejecting the misconceptions about the transmission of the virus. FGDs with youth revealed a change in the youth's perceptions about HIV/AIDS transmission as a result of the life skills trainings. More specifically, youth have understood and now reject the common misconceptions about HIV/AIDS as one of the youth said:

[...] the trainings helped to clear the misconceptions I had about HIV/AIDS transmission. I used to believe that a person cannot get HIV/AIDS if circumcised but this was explained during the trainings. We also learnt various ways of HIV/AIDS prevention (Male youth, Agromax Uganda Limited).

Other youth also said:

On HIV/AIDS, my friends and I used to have a perception that if you share items such as cups, plates and clothes with someone who is infected, you would also get infected.

But after the training, we were able to understand the truth and I have been able to transfer the same knowledge to my friends (Male youth, Kyera Agricultural Training College).

I used to fear sharing food with those infected with HIV/AIDS until I attended the trainings and right now, I am a very good friend even to those who are infected (Male youth, St. Joseph Don Bosco).

⇒ **Indicator on Natural Family Planning (NFP) methods:** % increase in the proportion of target youth who are aware of at least 2 NFP methods

At endline, 68.4% of the youth were aware of at least 2 NFP methods attributing to an increase of 22.8% of the youth.

According to World Health Organisation (WHO)⁵, family planning refers to a conscious effort by a couple to limit or space the number of children they have through the use of contraceptive methods. Natural family planning is the method that uses the body's natural physiological changes and symptoms to identify the fertile and infertile phases of the menstrual cycle (Klaus, H., 2000)⁶. NFP methods are also known as fertility-based awareness methods and they include: abstinence, breast feeding and withdrawal (pull out). Family planning helps in the reduction of infant mortality, adolescent and unplanned pregnancies and prevents pregnancy health-related complications and risks among women.

During the life skills trainings, family planning methods (Natural and Non-natural) were discussed under the topic of Fertility Awareness. At endline, the majority 155(96.9%) of the youth (95.9% of males and 100.0% of females) reported to be aware of at least one family planning method. There is an increase in the proportion of youth who are aware of at least one family planning method from baseline as seen in the figure below.

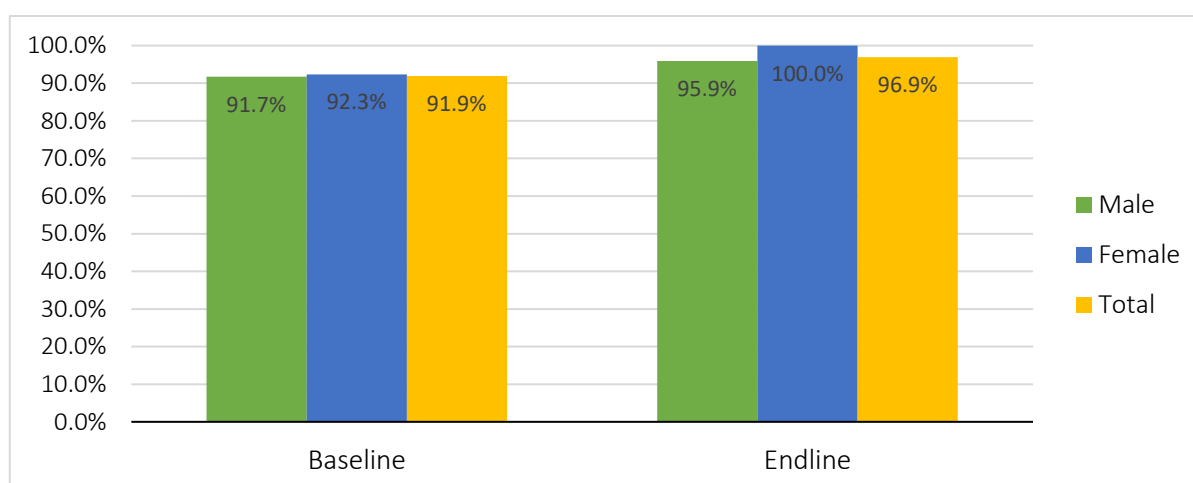


Figure 1: Proportion of youth who are aware of at least one family planning method

Furthermore, out of the 155 youth who reported to be aware of family planning methods, most (68.4%) of them were able to identify at least two natural family planning methods (64.7% of

⁵ <https://www.who.int/news-room/fact-sheets/detail/family-planning-contraception>

⁶ Klaus, H. (2000). Terminology in Natural Family Planning Revisited. The Linacre Quarterly, 67(1), 89–95

males and 79.5% of females). This proportion is 22.8% higher than the baseline level which was 45.6% (45.1% of males and 47.2% of females). This difference was statistically significant at 5% level ($Pr(|T| > |t|) = 0.0000$). Youth's awareness of each of the NFP methods is shown in the table below.

Table 4: NFP methods that youth are aware of

NFP method	Baseline			Endline		
	Male n(%)	Female n(%)	Total n(%)	Male n(%)	Female n(%)	Total n(%)
Abstinence	67(60.4)	21(58.3)	88(59.9)	87(75.0)	28(71.8)	115(74.2)
Breast feeding	37(33.3)	17(47.2)	54(36.7)	60(51.7)	26(66.7)	86(55.5)
Withdrawal	54(48.7)	15(41.7)	69(46.9)	68(58.6)	29(74.4)	97(62.6)

During FGDs with youth, it was reported that as a result of the life skills trainings, youth are now aware of the different NFP methods and have developed a positive attitude towards using such methods as one of them said: “[...] I learnt the natural methods of family planning that I will always use with my partner (Female youth, St. Padre Pio ITC).”

Study objective (ii): To assess the outcomes of the life skills trainings on the beneficiary youth

The outcomes of the life skills trainings on the beneficiary youth have been presented according to the key training topics: Friendship and Love; Sexually Transmitted Infections; Drug Abuse and Substance Use; Love That Hurts, Gender Based Violence (GBV); Sexual Health and Fertility Awareness; Human Dignity, Rights and Entitlements; Personal Hygiene and Sanitation; and Tradition and Culture.

Overall, the life skills trainings have contributed to an improvement in the youth's knowledge and skills. Moreover, more youth at endline (77.5%) than at baseline (60.6%) scored themselves to either have well developed or advanced knowledge and skills about life skills. Below is how the youth perceived their knowledge and skills regarding life skills at endline.

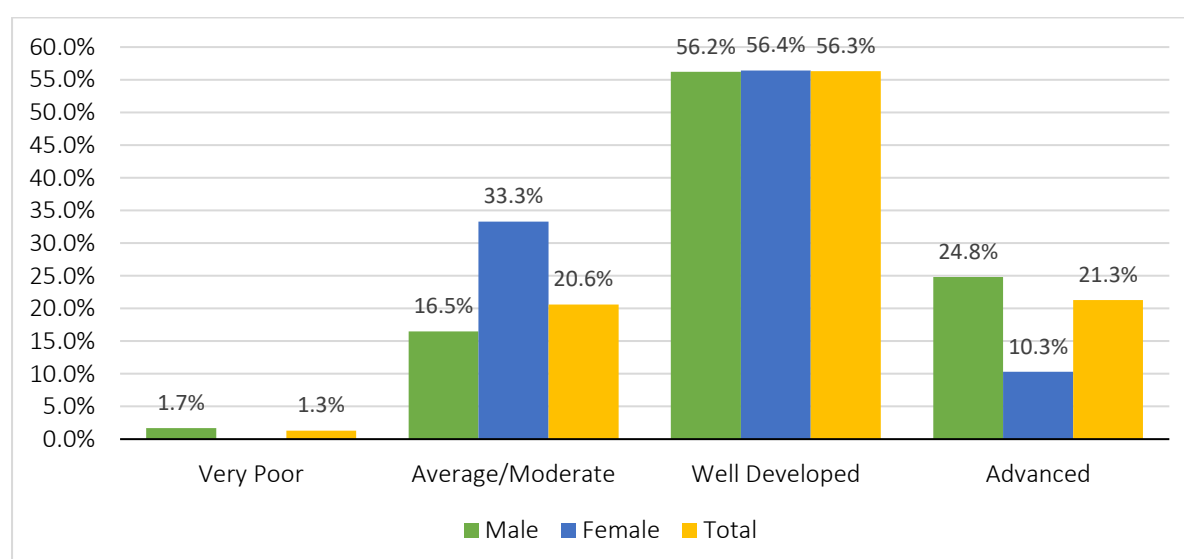


Figure 2: How youth scored their knowledge and skills on life skills at endline

Friendship and Love

The youth were asked to self-report the extent to which they agreed with each of the statements about friendship and love, on a 4-point Likert scale whereby: 1=Strongly Disagree, 2=Disagree, 3=Agree, and 4=Strongly Agree. During analysis, a new outcome variable for each statement was generated whereby youth's responses 1 and 2 were recoded as "Disagree" while responses 3 and 4 were recoded as "Agree". The extent to which the youth agreed with each of the 10 statements is as shown below.

Table 5: Youth's extent of agreement with statements on friendship and love

Statement	Disagree			Agree		
	Male	Female	Total	Male	Female	Total
	Number of youth (percent)					
I am aware of what can make me happy or unhappy.	3(2.5)	2(5.1)	5(3.1)	118(97.5)	37(94.9)	155(96.9)
I can always depend on a friend to solve my problems.	43(35.5)	19(48.7)	62(38.8)	78(64.5)	20(51.3)	98(61.25)
I know what the deepest desires of my heart are.	6(5.0)	3(7.7)	9(5.6)	115(95.0)	36(92.3)	151(94.4)
I know how to achieve the deepest desires of my heart.	7(5.8)	3(7.7)	10(6.3)	114(94.2)	36(92.3)	150(93.8)
I find it difficult to avoid risky situations where friends can easily exert pressure.	76(62.8)	22(56.4)	98(61.3)	45(37.2)	17(43.6)	62(38.8)
It is better for young people like my age-mates to wait until they are older to engage in intimate relationships.	30(24.8)	8(20.5)	38(23.8)	91(75.2)	31(79.5)	122(76.3)
It is acceptable for boys and girls to exchange sex for gifts.	104(86.0)	32(82.1)	136(85.0)	17(14.1)	7(18.0)	24(15.0)
Love and sex mean the same thing.	105(86.8)	31(79.5)	136(85.0)	14(11.6)	8(20.5)	22(13.8)
I can decide on my own about whether or not to have a sexual union with the opposite sex, without feeling any pressure from other people.	27(22.3)	14(35.9)	41(25.6)	86(71.1)	21(53.9)	107(66.9)
If my partner (<i>boyfriend/girlfriend/spouse</i>) wants to be intimate but I do not want to, I can refuse.	28(23.1)	10(25.6)	38(23.8)	92(76.0)	29(74.4)	121(75.6)

The majority of the beneficiary youth demonstrated ability to identify their own feelings based on the way they responded to statements such as: "I am aware of what can make me happy or unhappy" and "I know what the deepest desires of my heart are." Furthermore, most of the youth exhibited the understanding that *love and sex* do not mean the same thing and were able to reject the statement: "It is acceptable for boys and girls to exchange sex for gifts", as shown in **Table 5** above.

The findings of the qualitative approaches show how the life skills trainings have played a key role in helping youth identify the kind of people to keep as friends through highlighting the ways in which one can distinguish between the good and bad friend. One of the youth said:

When those [LGIHE] people came, they talked about relationships, the kind of friends someone should be with, a good friend and a bad friend. As they highlighted about bad friends, I was able to pick-up and know which group I should be able to go with and

which side to leave. It was from this training that I was able to know who I should have as a friend (Male youth, Kyera Agricultural Training College).

Furthermore, life skills trainings have helped youth to develop an understanding that girls and boys should not engage in sexual acts as a result of exchanging gifts. One of the youth said:

Before the trainings, I thought that whenever I give a girl a gift she has to pay me by having sex and in case she refused, I would even fight. But after the trainings, I realized that sex should not be attached to gifts (Male youth, Agromax Uganda Limited).

Another youth added: “Life skills trainings gave me strength not to depend on gifts from men/boys or have sex because of gifts. [...] I have also realised that I can work and provide for myself” (Female youth, Bwasandeku Mixed Farm).

The life skills trainings have fostered a sense of understanding that there is a clear distinction between love and sex as quoted from one of the youth.

I used to mix love and sex. After the training, I realized that love can be for everyone as a friend but not for sex. Sex is an act you engage in with your partner. Being in a relationship does not necessarily mean having sex with that person (Male youth, Agromax Uganda Limited).

Sexually Transmitted Infections

Sexually Transmitted Infections (STIs) are infections that can be transferred from one person to another through sexual contact (WHO/RHR & CCP, 2018)⁷. Previously, they were also called venereal diseases (VD) or sexually transmitted diseases (STDs) and can be caused by parasites, bacteria, fungal infections and viruses. Most STIs can be cured if diagnosed and treated on time, with the exception of viral infections. HIV/AIDS being one of the dangerous STDs affecting most youth in Uganda was a major focus, among other STDs, in the life skills trainings.

At endline, the majority 153(95.6%) of the youth surveyed (95.0% of males and 97.4% of females) reported to have been motivated to go for voluntary counselling and testing of HIV/AIDS as a result of participating in the LGIHE life skills trainings. This proportion was significantly ($\Pr(|T| > |t|) = 0.0003$) different from the proportion (83.1%) reported at baseline (81.0% of males and 89.7% of females). Additionally, the life skills trainings have contributed to an increase in the youth’s awareness of the various methods (abstinence; being faithful; using of condoms; and avoiding sharing sharp objects) through which the spread of HIV/AIDS can be prevented as shown in the table below.

⁷ World Health Organization Department of Reproductive Health and Research (WHO/RHR) and Johns Hopkins Bloomberg School of Public Health/Center for Communication Programs (CCP), Knowledge for Health Project. Family Planning: A Global Handbook for Providers (2018 update). Baltimore and Geneva: CCP and WHO, 2018.

Table 6: HIV/AIDS preventative methods known to youth

Preventive method	Baseline			Endline		
	Male n(%)	Female n(%)	Total n(%)	Male n(%)	Female n(%)	Total n(%)
Abstinence	92(76.0)	27(69.2)	119(74.4)	107(88.4)	35(89.7)	142(88.8)
Being faithful	100(82.6)	27(69.2)	127(79.4)	103(85.1)	36(92.3)	139(86.9)
Use of condoms	97(80.2)	30(76.9)	127(79.4)	107(88.4)	35(89.7)	142(88.8)
Avoiding sharing sharp objects	79(65.3)	27(69.2)	106(66.3)	93(76.9)	31(79.5)	124(77.5)

Other HIV/AIDS preventive methods as identified by the youth include: use of pre-exposure prophylaxis (PrEP) and post-exposure prophylaxis (PEP), testing for HIV/AIDS and informing the partner about ones' status, avoiding mother-to-child transmission through seeking for medical help and giving birth from the hospital.

A part from HIV/AIDS, the majority 151(94.4%) of the youth (95.0% of males and 92.3% of females) are aware of at least 2 other STIs. These included: Syphilis, Gonorrhoea, Candidiasis and Hepatitis Bas shown in the table below.

Table 7: Other STIs known to the youth

STI	Male	Female	Total
	n(%)	n(%)	n(%)
Syphilis	111(91.7)	34(87.2)	145(90.6)
Gonorrhoea	102(84.3)	33(84.6)	135(84.4)
Candidiasis	92(76.0)	29(74.4)	121(75.6)
Hepatitis B	43(35.4)	21(53.9)	64(40.0)
Human Papillomavirus (HPV)	14(11.6)	4(10.3)	18(11.3)
Chlamydia	8(6.6)	4(10.3)	12(7.5)

* Others included: genital herpes, and genital warts

FGDs with the youth revealed that the life skills training equipped youth with knowledge that has not only benefited the training participants but also other youth in the community. The trained youth have shared the knowledge and skills learnt with others as one of them said:

I used to see fellow girls with signs of STIs but with limited knowledge to guide them on what to do. After my participation in the life skills training, I was able to guide the youth in my neighbourhood with whom we share bathrooms to use vim and liquid soap to clean the washrooms/bathrooms in order to minimize the risks of contracting infections as a result of poor hygiene (Female youth, St. Padre Pio ITC).

Another youth added:

Before I joined this institution, back in the village we had a group where we would say that it's not good to have only one partner/girlfriend. We had a slogan "*kiss everyone near your area*, [KENYA]" and this prompted us to always look for as many girls as possible. So when I joined here, I learnt about sexually transmitted diseases through the life skills trainings. I learnt that if you jump from one girl to another, you risk getting

STIs. After getting this knowledge, I talked to my friends about all the dangers associated with “KENYA” and this helped to transform our behaviours (Male youth, St. Joseph Don Bosco).

As shown in **Table 7**, life skills trainings have increased youth awareness of other STIs besides HIV/AIDS as noted by one of the youth:

[...] whenever we wanted to have sexual pleasure, our only worry was getting infected with HIV/AIDS. We used to think that it's the only dangerous infection in that we would go for HIV testing only. During the trainings, we learnt other STIs such as gonorrhoea and syphilis that we need to always screen for (Male youth, Horticulture Youth Group).

Youth are now more responsible about their lives through avoiding risky behaviours that might make them susceptible to acquiring and transmitting STIs. One of them said:

[...] before we had this training with people from Luigi, I had engaged in unprotected sex but after learning about the sexually transmitted diseases, I was enlightened to stop going for live/unprotected sex (Male youth, Kyera Agricultural Training College).

Another youth added that:

Before the trainings, I was a womanizer and I always believed that if I have more than one girlfriend even if I am chucked by one of them I would still have a backup. But after the trainings, I realized the dangers of this habit and at the same time appreciated the beauty of having just one partner as it reduces the chances of getting STIs and currently, I have only one girlfriend (Male youth, Agromax Uganda Limited).

The life skills trainings have also contributed to the youth's positive attitudes towards voluntary counselling and testing of HIV/AIDS as one of them said:

I learnt about knowing my HIV/AIDS status. Before the trainings, I didn't know my status, but I learnt that it is very important to know my status and went for testing (Male youth, Bwasandeku Mixed Farm).

Another youth said:

I thought testing for HIV/AIDS was for elderly people who frequently engage in sex. I thought I was safe since I am young. But after the training, I learnt that routine testing is good for every person not only for HIV/AIDS, but also for other STIs (Male youth, Agromax Uganda Limited).

In addition to creating awareness of the different methods of preventing HIV/AIDS besides condoms use, life skills trainings were fundamental in creating awareness of the possibility of giving birth to a child free of HIV/AIDS even though the parents are infected. One of the youth said:

[...] I used to know that the only way to prevent HIV/AIDS was by using condoms but through the trainings, I learnt other ways such as being faithful. Also, the training

equipped me with knowledge that even with a partner who has HIV/AIDS, we can still have healthy babies. I learnt to go to the hospital and seek for advice from the doctor (Male youth, Lindjeri Farm).

Additionally, life skills trainings were commended for equipping youth with knowledge on how to effectively use some of the contraceptives. One of the youth said:

Before attending to this training, I thought that using one condom for many sexual encounters (times) was ok. But after the training, I learnt that if condoms are not used in the proper way, you can still get infected with STIs. I learnt that after every ejaculation, one should change the condom [...] (Male youth, Agromax Uganda Limited).

Drug Abuse and Substance Use

World Health Organisation (WHO) defines substance abuse as the harmful or hazardous use of psychoactive substances, including alcohol and prohibited drugs. Drugs and substance use negatively contributes to the youth's wellbeing, subjects them to higher risks of contracting HIV/AIDS and other STIs, unwanted and unplanned pregnancies, school dropout and addiction puts a heavy financial burden to the individual, family and society.

In the 3 months prior to the endline survey, less than a fifth (15.0%) of the surveyed youth (19.0% of males and 2.6% of females) tried/used drugs or substances during the same period. The proportion of youth who reported to have tried/used drugs or substances before and after participating in the life skills trainings is shown in the figure below.

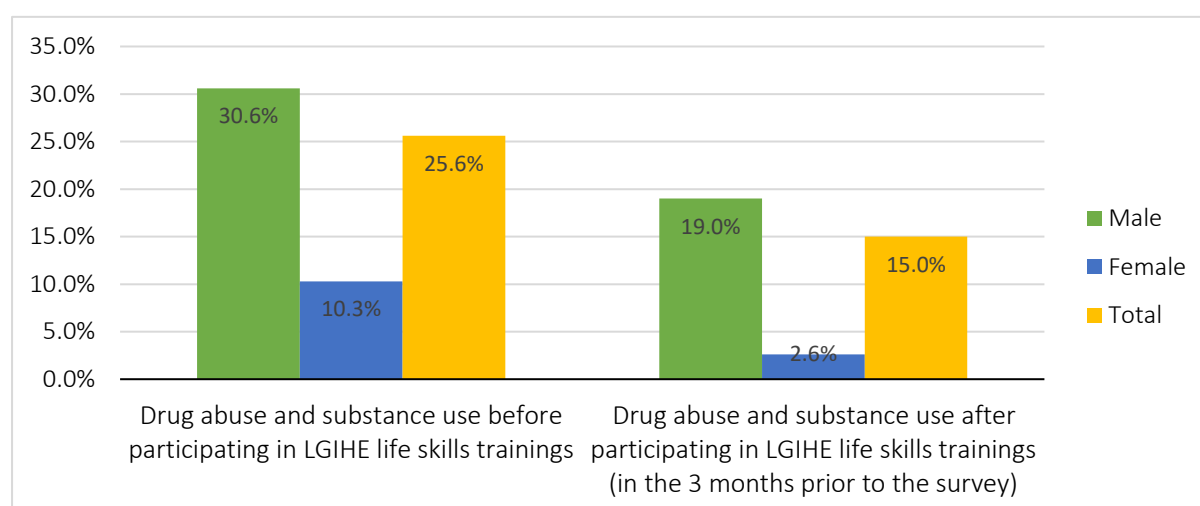


Figure 3: Proportion of youth's drugs and substances use before and after the life skills trainings

There is a significant difference at 5% level, in the proportion of youth who reported to have tried/used drugs and substances before and after participating in the LGIHE life skills trainings ($Pr(|T| > |t|) = 0.0003$).

Furthermore, more than a half (56.3%) of the youth (62.0% of males and 38.5% of females) have friends who had tried or used drugs or substances during the 3 months prior to the survey.

Moreover, (68.8%) of the youth (71.1% of males and 61.5% of females) reported to have ever complained about their friends' drinking or smoking habits.

Alcohol consumption

Only 1.3% of the surveyed youth had consumed alcohol and only 0.6% of the youth stated to have smoked tobacco or cigarettes within less than a day to the time of the survey, as shown below.

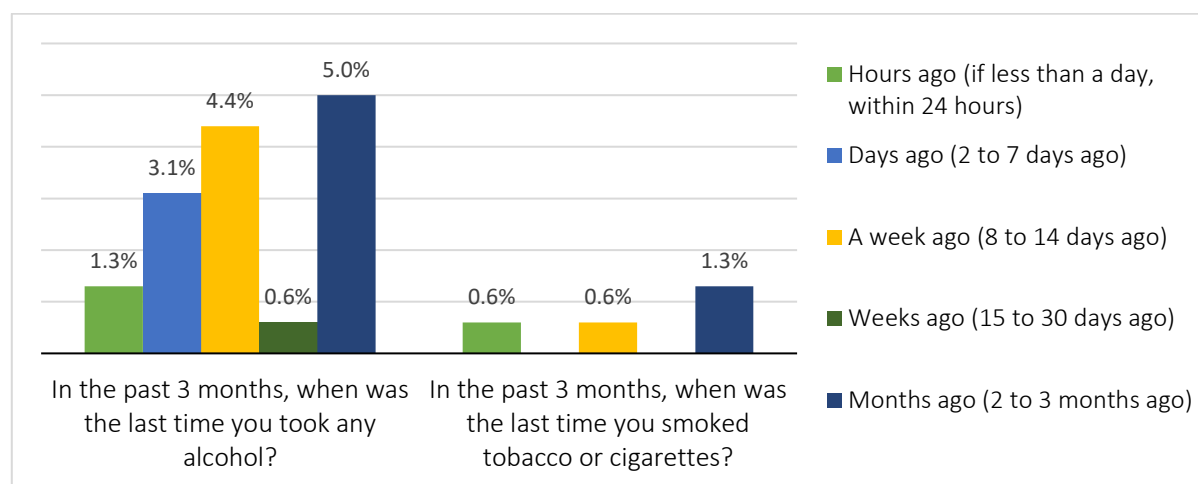


Figure 4: Proportion of youth who tried/used alcohol or tobacco/cigarettes

Reasons why youth use drugs or substances

According to the surveyed youth, the main reasons why young people use drugs or substances in the community include: because of peer influence (93.8%); to forget problems (81.9%); because they think it makes them feel better (80.0%). Other reasons are as below.

Table 8: Main reasons why young people use drugs or substances

Reason	Male	Female	Total
	n (%)	n (%)	n (%)
Because of peer influence	112(92.6)	38(97.4)	150(93.8)
To forget problems	98(81.0)	33(84.6)	131(81.9)
Because they think it makes them feel better	97(80.2)	31(79.5)	128(80.0)
To relax and to have fun	93(76.9)	30(76.9)	123(76.9)
Because some of their family members use it	87(71.9)	30(76.9)	117(73.1)
Because of idleness	86(71.1)	29(74.4)	115(71.9)
To feel energetic	84(69.4)	30(76.9)	114(71.3)

FGDs with youth revealed that as a result of the life skills trainings, some youth have quit drugs and substances use as one of them said:

Before participating in any life skills training, I was just among those people who always liked and consumed a lot of alcohol. But after the training, we sat down with one of my friends and said that this habit of taking alcohol is trash [...]. From that time up to now,

I cannot take any alcohol since I realised that it was a waste of my money (Male youth, Kyera Agricultural Training College).

As a result of quitting the use of drugs and substances, attributed to the life skills trainings, youth's productivity at the workplaces have greatly improved as one of them said:

Before the trainings, I used to take alcohol and this always resulted in a lot of mistakes at work. After the trainings, I stopped taking alcohol and I have seen a great change in the way I execute my tasks at the workplace. I no longer have those issues (Male youth, Jeka Poultry Farm).

The life skills trainings have helped youth to realise that the use of drugs and substances does not solve any of their problems and neither does it make them forget them [problems]. One of them said:

[...] we used to think that alcohol is the solution to our problems, like when you are thinking about something really terrible, you go and get all drunk and everything is done. But we were introduced to the realization that it does not because you only fall asleep and when you wake up, the problem still remains. This has saved a lot and personally, I used to consume a lot of alcohol but as a result of the life skills trainings, I quit this habit [...] (Male youth, Horticulture Youth Group).

The life skills trainings have equipped youth with knowledge about the dangers of drug abuse and substance use which has enabled them to effectively advise other youth in the community. One of the youth said:

I am a youth who has ever engaged in the use of drugs and other substances. The trainings gave me a skill of quitting drug abuse and helping my friends not to go in that aspect of taking drugs and substances. I have learnt how to approach those people [who use drugs and substances], talk to them and try to bring their heads together and leave the issue of taking these drugs and substances (Male youth, Kyera Agricultural Training College).

The beneficiary youth also acknowledged that it is their responsibility to curb the use of drugs and substances in their communities through offering guidance and counselling to those who misuse drugs and substances. One of them said:

As a youth who is knowledgeable about the dangers of drugs and substances, I have to live as an example to other youth by not engaging in their [drugs and substance] use since most of the youth use them due to peer influence. Also, we need to sensitise all youth about the associated dangers of drug abuse such as lung cancer, brain damage, etc. and offer guidance and counselling to those who are already using drugs and substances so that they can stop (Male youth, Agromax Uganda Limited).

The beneficiary youth have also collaborated with other stakeholders and authorities to sensitize other youth in their communities on the dangers of drugs and substance abuse as can be seen from this quote:

As a youth ambassador in our district, I have used the knowledge from life skills trainings to relay a message to fellow youth in the community in collaboration with other people and organisations. For instance, last month we had a dialogue with stakeholders at the sub-county level and the OC Police on how to sensitize young people regarding issues of drug abuse. During gatherings such as community policing, we are always given an opportunity to communicate to the youth concerning drug abuse (Male youth, Anchor Foods Limited).

This was also noted by one of the Coordinators: “[...] and some of them have even become youth’s ambassadors. They work with different organisations to train and empower other youth with the knowledge they acquired through life skills trainings” (Coordinator, Anchor Foods Limited).

The institution heads and the coordinators also commended the life skills trainings for addressing the challenge of drugs and substances abuse in their institutions. To them, most youth have greatly improved in their behaviours regarding drug and substance use. One of them said: “[...] we had challenges with our students actually when it came to moral behaviours. We had a lot of drunkards and it was a disaster. But as result of the life skills trainings, there is a great improvement (Principal, Kyera Agricultural Training College).”

Love That Hurts, Gender Based Violence (GBV)

Gender-based violence refers to violence that is directed against a person on the basis of his/her gender or sex. It includes acts that inflict physical, mental or sexual harm or suffering, threats of such acts, coercion and other deprivations of freedom.

The majority (88.8%) of the youth (87.6% of males and 92.3% of females) reported to have rampant cases of GBV in their community. The kinds of GBV as reported by these youth are shown below.

Table 9: Kinds of GBV in the youth's communities

Kinds of GBV	Endline		
	Male n(%)	Female n(%)	Total n(%)
Sexual violence	84(79.3)	31(86.1)	115(81.0)
Physical violence	88(83.0)	29(80.6)	117(82.4)
Economic violence	89(84.0)	29(80.6)	118(83.1)
Psychological violence	71(67.0)	28(77.8)	99(69.7)

The main perpetrators as reported by the youth include: parents (69.0%); friends (49.0%); husbands (72.5%); wives (56.3%); strangers (48.6%); youth (62.0%); drunkards (79.6%); and teachers (52.1%).

Additionally, to establish the impact of LGIHE life skills trainings on the youth’s mindset about GBV, youth were asked to rate their extent of agreement with statements about GBV, on 3-

point Likert scale whereby: 1= I agree; 2= I partially agree; and 3= I do not agree. The youth's responses on each of the statements were as shown below.

Table 10: How youth responded to each of the statements about GBV

Statement	Response	Baseline			Endline		
		Male	Female	Total	Male	Female	Total
		Number of youth (percent)					
A man should have the final word about all decisions in a home	I totally Agree	25(20.7)	13(33.3)	38(23.75)	33(27.3)	8(20.5)	41(25.6)
	I partially agree	47(38.8)	7(18.0)	54(33.8)	38(31.4)	9(23.1)	47(29.4)
	I do not agree	48(39.7)	18(46.2)	66(41.3)	50(41.3)	22(56.4)	72(45.0)
A woman should tolerate violence for the sake of her family	I totally Agree	28(23.1)	5(12.8)	33(20.6)	14(11.6)	4(10.3)	18(11.3)
	I partially agree	47(38.8)	10(25.6)	57(35.6)	17(14.1)	12(30.8)	29(18.2)
	I do not agree	45(37.2)	22(56.4)	67(41.9)	90(74.4)	23(59.0)	113(70.6)
It is acceptable for a boy to slap or kick his girlfriend if she does not follow his orders	I totally Agree	28(23.1)	3(7.7)	31(19.4)	13(10.7)	2(5.1)	15(9.4)
	I partially agree	30(24.8)	12(30.8)	42(26.3)	22(18.2)	4(10.3)	26(16.3)
	I do not agree	62(51.2)	23(59.0)	85(53.1)	86(71.1)	33(84.6)	119(74.4)

Overall, there is a change in the youth's mindset about GBV as a result of LGIHE life skills trainings since the percentage of youth who correctly responded to the statements about GBV at endline was higher than at baseline, as seen in **Table 10** above.

Furthermore, in order to explore more about the existence of sexual violence cases in the youth's communities, youth were asked to respond to statements about sexual abuse. More than a half (55.0%) of the surveyed youth reported early marriages among young people (mainly females) less than 18 years as a very common form of sexual abuse in the various communities. The extent at which other forms of sexual abuse on youth happen in the various communities as reported by the youth is as below.

Table 11: Forms of sexual abuse on youth in the community

Form of sexual abuse	Not common			Somewhat common			Very common		
	Male	Female	Total	Male	Female	Total	Male	Female	Total
Number of youth (percent)									
Intercourse without consent	43(35.5)	12(30.8)	55(34.4)	52(43.0)	16(41.0)	68(42.5)	26(21.5)	11(28.2)	37(23.1)
Intercourse exchanged for gifts	18(14.9)	3(7.7)	21(13.1)	52(43.0)	19(48.7)	71(44.4)	51(42.2)	16(41.0)	67(41.9)
Intercourse in exchange of other favours e.g. jobs/promotions	20(16.5)	5(12.8)	25(15.6)	53(43.8)	19(48.7)	72(45.0)	47(38.8)	15(38.5)	62(38.8))

Early marriages among young people (females) less than 18 years	14(11.6)	3(7.7)	17(10.6)	39(32.2)	16(41.0)	55(34.4)	68(56.2)	20(51.3)	88(55.0)
Early marriages among young people (males) less than 18 years	43(35.5)	14(35.9)	57(35.6)	49(40.5)	17(43.6)	66(41.3)	27(22.3)	8(20.5)	35(21.9)

As a result of the life skills trainings, youth perceive their knowledge about GBV to have improved as one of them said:

“We looked at the forms and causes of gender-based violence and how they could be avoided. From this training, I came to understand that forced sexual intercourse is a form of GBV. [...] we used to think that if you have a girlfriend or a wife, you can use her any time you feel like without her consent. I learnt that sexual intercourse can be an abuse if not agreed upon by both parties (Male youth, Horticulture Youth Group).”

Additionally, the life skills trainings have helped youth understand the likely effects of GBV if not curbed. One of the youth said: “[...] and the training on GBV made me understand that if someone is subjected to GBV, it may result into psychological effects and physical GBV can even result into death of the victim (Female youth, Lindjeri Farm).”

In communities where early marriages among young people below 18 years are very common, the youth reported to be applying the acquired knowledge and skills to sensitize parents on the dangers of early marriages. One of them said:

Early marriages before 18 years are very common in my community. I always talk to parents about the dangers of allowing children to get married before 18 years. I inform them about dangers such as giving birth to a dead child, getting infections and others. Also, I tell them that early marriage deprives the young people of the chance to continue with their education (Male youth, St. Joseph Don Bosco).

Furthermore, youth acknowledged a change of mindset about the dynamics at their homes in relation to responsibilities and decision making. One of them said:

I used to think that a man is a king (boss) in the home and everything should be done according to how he wishes and what he decides. After the training, I learnt that even a woman just like a man can also take part in the decision-making process on different issues within a family (Male youth, St. Joseph Don Bosco).

Principals and coordinators also appreciated the life skills trainings for addressing issues relating to GBV. To them, the life skills trainings have reduced cases of GBV and have also empowered youth to talk about issues affecting them as shown in the quote below:

Before the trainings, we used to have a lot of cases of sexual harassment and in most cases, the victims would fear to report such issues. After having the trainings, there has been a great reduction in such cases and the trainings have empowered youth

especially the female trainees to talk about issues affecting them so that they can be addressed (Coordinator, Bwasandeku Mixed Farm).

Sexual Health and Fertility Awareness

❑ Sexual health

According to World Health Organisation, Sexual health refers to an individual's state of physical, emotional, mental and social well-being in relation to sexuality.

A quarter (25.0%) of the youth (23.1% of males and 30.8% of females) reported to have a sexual health issue(s) that they needed help on with the majority (82.5%) of them to have ever sought for help on those issues. Furthermore, most (53.1%) of the youth (57.0% of males and 41.0% of females) felt comfortable sharing their sexual health issues with a responsible adult. Those youth who reported not to feel comfortable sharing their sexual health or share only sometimes, stated reasons such as: fear that the adult might disclose their issues to other people; fear of stigmatisation; and shyness on matters concerning sexual health.

In order to ascertain youth's knowledge about sexual health issues, youth were asked to rate their extent of agreement on two items relating to sexual wellbeing. At endline, the majority (83.8%) of the youth (80.2% of males and 94.9% of females) affirmed that "Both boys and girls are responsible for preventing pregnancy if they have sex" and 74.4% of the youth (74.4% of males and 74.4% of females) affirmed that "Early childbearing and pregnancy before age 18 years puts a girl at risk of disability such as fistula and maternal death."

Table 12: How youth responded to statements about sexual health

Statement	Response	Baseline			Endline		
		Male	Female	Total	Male	Female	Total
		Number of youth (percent)					
"Both boys and girls are responsible for preventing pregnancy if they have sex"	I totally agree	103(85.1)	33(84.6)	136(85.0)	97(80.2)	37(94.9)	134(83.8)
	I partially agree	8(6.6)	4(10.3)	12(7.5)	21(17.4)	1(2.6)	22(13.8)
	I do not agree	9(7.4)	1(2.6)	10(6.3)	3(2.5)	1(2.6)	4(2.5)
"Early childbearing and pregnancy before age 18 years puts a girl at risk of disability such as fistula and maternal death"	I totally agree	101(83.5)	26(66.7)	127(79.4)	90(74.4)	29(74.4)	119(74.4)
	I partially agree	13(10.7)	10(25.6)	23(14.4)	29(24.0)	8(20.5)	37(23.1)
	I do not agree	6(5.0)	1(2.6)	7(4.4)	2(1.7)	1(2.6)	3(1.9)

The life skills trainings have enabled the youth to understand the importance of sharing sexual related issues with other people as it makes them feel relieved and also get help. This is evident in one of the quotes as below:

[...] and when it comes to sexual health related issues or concerns, the training made me to transform into a sensible person in that I had a mentality that sharing about my experience or my personal health status with a colleague was something bad. But then

after the trainings, I realised that a problem shared is halfway solved and in that process of interaction with another person, the advice you get from a colleague can make you feel somehow relieved unlike when you remained alone with a pressing issue and you fail to open up your mind. So, these days I feel very much flexible to share with a colleague on sexual health issues that make me feel uncomfortable (Male youth, Kyera Agricultural Training College).

Another youth said:

On sexual health issues, we always have a lot of issues which we cannot solve by ourselves. I learnt through these trainings that we should always share with elders or medical personnel so that we get help before the problem escalates (Female youth, St. Joseph Don Bosco).

Additionally, youth acknowledged to have learnt that it is their sole responsibility to prevent the spread of STIs and in fact have started using methods that prevent them and others from contracting STIs as quoted from one of them: “Through the trainings, I learnt how to guard against STIs since if I get them my job/work also gets affected [...]. I now use methods that help me to prevent STIs (Male youth, Bwasandeku Mixed Farm).”

Life skills trainings have equipped youth with knowledge about the dangers associated with early marriages and pregnancies among the youth which they have also shared with other members in the community. One of the youth said:

After the training, I learnt that girls can easily die when they get pregnant at a young age. When I went back home, I shared the same information with my sisters and advised them to avoid early marriages in order to avoid getting such complications (Male youth, Bamwe Agro-technologies).

Another youth added that:

I did not know that someone can get fistula before the age of 18 years but through the trainings I learnt that if you get pregnant before 18 years, you can get fistula and one can also die before delivery. This knowledge that I acquired and as a tutor, I have used it to sensitise the students especially those below 18 years on the dangers of early pregnancy. I always advise them to abstain from sex or use condoms to avoid pregnancies (Female youth, St. Joseph Don Bosco).

❑ Fertility awareness

Fertility awareness refers to a set of practices that allow couples to anticipate and attain their desired number of children, their spacing and the timing of their births, based on their physical, psychological, economic and social situations (Sultan, S., 2018)⁸.

⁸ Sultan, Sonia. (2018). The Effects of Education, Poverty, and Resources on Family Planning in Developing Countries. Clinics in Mother and Child Health. 15. 10.4172/2090-7214.1000289.

More youth at endline (total=96.0%; males=95.9%; females=100.0%) than at baseline (total=91.9%; males=91.7%; females=92.3%) reported to be aware of at least one family planning method. This difference was statistically significant at 5% level ($Pr(|T| > |t|) = 0.0452$). In addition to improved awareness of NFP methods (*as shown in Table 4*), these youth as well demonstrated improved awareness of the non-natural family planning methods as shown below.

Table 13: Non-natural family planning methods that youth are aware of

Family planning method	Baseline			Endline		
	Male n(%)	Female n(%)	Total n(%)	Male n(%)	Female n(%)	Total n(%)
Standard days/moon bead method	57(51.4)	18(50.0)	75(51.0)	79(68.1)	29(74.4)	108(69.7)
Condoms	89(80.2)	30(83.3)	119(81.0)	97(83.6)	35(89.7)	132(85.2)
Injectable	75(67.6)	27(75.0)	102(69.4)	91(78.5)	36(92.3)	127(81.9)
Pills	87(78.4)	32(88.9)	119(81.0)	87(75.0)	35(89.7)	122(78.7)
Surgery/permanent	35(31.5)	4(11.1)	39(26.5)	44(37.9)	17(43.6)	61(39.4)

Overall, there is an increase in youth's awareness of the various non-natural family planning methods at endline than at baseline, as in **Table 10** above. Other non-natural family planning methods cited by these youth include: intrauterine devices (IUDs) and implants.

Preferred family planning methods

The family planning methods that the surveyed youth would mainly wish to use, with their partner now or in the future included: standard days/moon bead method, condoms and injectables, among others as shown below.

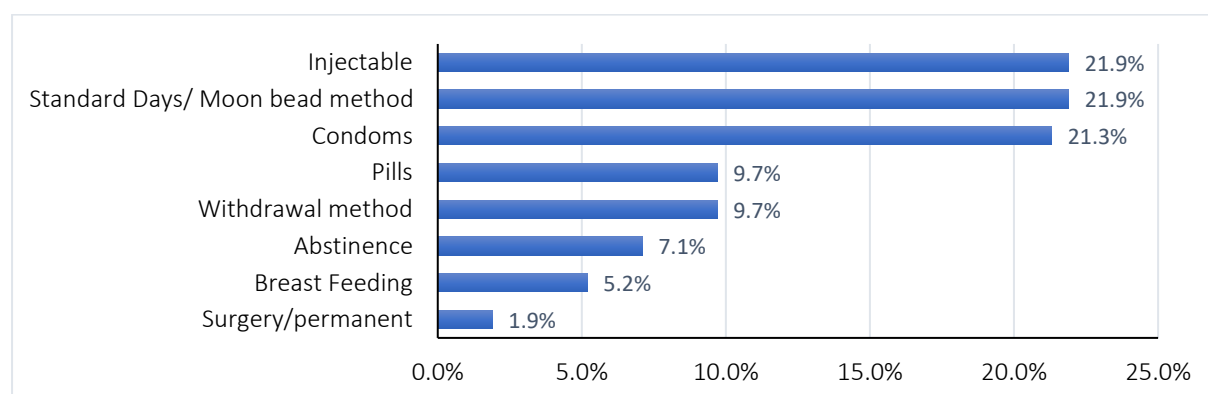


Figure 5: Main family planning method preferred for use by the youth

The youth have been empowered through the life skills trainings with knowledge and skills to sensitise fellow youth and the entire community on issues pertaining to planned and unplanned families. One of the youth said:

In our community, many people have a belief that 'every child comes with his/her own blessing' (*literal translation of 'buli mwana ajja n'omukisa gwe' in Luganda*). This is a motivation for them to produce more children with a superstitious belief of attaining

improved standards of living as a result of the born children. But after the training on fertility awareness, I have gained skills and informed many youth on the importance of having a planned family and at the same time informing them about the disadvantages of having an unplanned family (Male youth, St. Padre Pio ITC).

Furthermore, youth commended the life skills trainings for creating awareness of the various family planning methods: “before the training, I did not know the various methods of family planning but now I know very many therefore my knowledge about family planning methods improved” (Male youth, Agdi Dairy Farm).

As well as the appropriate procedures of practice for such methods: “through the trainings, I learnt how to calculate my menstrual cycle (safe days or standard moon and beads method) as a way of avoiding unwanted pregnancies” (Female youth, Bwasandeku Mixed Farm).

Human Dignity, Rights and Entitlements

Through life skills trainings, youth were empowered to discover who they are and their value as well as their responsibilities as they live their lives. One of them said: “I now know who I am and what I am supposed to do to achieve my dream” (Male youth, Bwasandeku Mixed Farm).

Another youth added: “having self-worth as a person was among the key things that I learnt during the life skills trainings” (Female youth, St. Padre Pio ITC).

Youth perceived life skills trainings as a platform that helped them to change their mindset with regard to living a positive, self-reliant and productive life as one of the youth said:

I observe a change in my mindset about how one should live. Those days before the trainings, I used to believe that I cannot sustain myself. Mainly, I had that mindset where I thought that I had to always depend on other people, everything I needed in life had to come from somewhere and then given to me. But after the trainings, I realised that I have to live my life with a purpose and take care of myself and these days, I am able to sustain myself through my own effort using my physical energy and my brain to achieve what I need (Male youth, Kyera Agricultural Training College).

Personal Hygiene and Sanitation

Life skills sessions were commended for creating awareness among youth on how they can easily avoid getting certain infections and diseases as a result of maintaining good hygiene and sanitation. One of the youth said: “During the session on hygiene and sanitation, I was impressed to realise that there are some infections/diseases that we can avoid if we maintain good hygiene and sanitation of our body” (Male youth, Horticulture Youth Group).

The attitude and practice of the youth towards hygiene and sanitation has also positively changed:

Additionally, I rarely used to wash my hands after visiting the toilet and in case I had washed, I would not use soap. But during the training, we learnt how to wash our hands

with soap and the benefits of doing so. I have used this knowledge to sensitise other youth who did not participate in the trainings on how to keep their body clean (Male youth, Horticulture Youth Group).

Additionally, the life skills trainings have helped youth to realise and appreciate the need for actively getting involved in maintaining good hygiene and sanitation of their environment. One of the youth said:

Personally, for a long time, I always had a challenge of maintaining cleanliness of the environment where I live. In the family where I was raised and in most of the schools that I went through, much of the cleaning of places such as the toilet, bathrooms and compound slashing was handled by casual workers. But when I came to this community [school], it was different as we had to do all the cleaning ourselves. [...] it was very difficult for me to adapt to this because I always perceived it as a punishment. After the training, I clearly understood the need for maintaining proper hygiene and sanitation and this helped me to change my perception. [...] I have carried on this knowledge to the place where I reside whereby I am actively engaged in the cleaning of the compound, toilets (public) and bathrooms without being reminded and in so doing, I serve as an example to the rest (Male youth, Kyera Agricultural Training College).

The youth acknowledged a change in the way they look after their own bodies as a result of the life skills trainings. One of them said:

Before attending to the trainings, I would not mind about whether I have pubic hair and I would rarely wash my undergarments. I learnt through the training that one should always shave pubic hair, wash and sun-dry undergarments and iron before putting them on to prevent fungal infections and cleaning the places where we stay (Male youth, Agromax Uganda Limited).

Institution heads and coordinators also acknowledged a great change in the way youth perceive their personal hygiene. One of them said:

A number of youth used to have untidy/uncombed hair and some would spend days without bathing or washing their clothes. Most of these youth were among those who participated in the trainings. These trainings greatly contributed to a change in the way these youth regard the importance of personal hygiene and smartness now. They have really transformed into people who value their own hygiene and sanitation (Coordinator, St. Joseph Don Bosco).

Tradition and Culture

As a result of the life skills trainings, youth are now able to respect each other's traditions and cultures and are able to live in harmony within a multi-cultural setting. One of them said:

I always had a negative perception about other people's traditions and cultures and this proved a challenge in living with other students when I joined this institution [...]. After attending to the trainings, it helped me to get rid of the misconceptions I had

about other cultures and beliefs and now I know that every person is an individual regardless of their culture. [...] I now live freely with everyone without segregation based on cultures and traditions (Male youth, Kyera Agricultural Training College).

Another youth said:

I used to despise people because of their cultures and traditions and I would get angry at them even on very minor issues. But after the training on tradition and culture, I learnt to associate with people of different cultures. I learnt how to handle people with dignity even though our cultures are not the same (Female youth, St. Padre Pio ITC)."

The awareness of the need to respect each other's traditions and cultures has fostered a sense of belonging among the youth and this has resulted into improved collaborations among them: "As a result of the life skills trainings, we now work together as a team despite the difference in our beliefs" (Male youth, Jeka Poultry Farm).

Furthermore, life skills trainings were commended for creating awareness of the negative traditional practices that pose a threat to the wellbeing of the youth. The trained youth have taken steps to sensitize others about the dangers of such practices. One of them said:

Before attending to these trainings, there were some traditional beliefs that were practiced in my community but I did not know about the associated dangers especially regarding the transmission of HIV/AIDS. For example, during circumcision, a group of boys would be circumcised using the same razorblade. Another practice was the inheritance of a deceased's wife by the brothers which could easily lead to spread of HIV/AIDS. The training equipped me with knowledge that I have used to sensitise fellow youth and elders about the dangers posed by such practices (Male youth, Horticulture Youth Group).

Another youth added:

[...] and where I come from, there's female genital mutilation (FGM). Females are meant to be circumcised. When I heard of the government initiatives to stop FGM, I thought that the government was undermining our traditions but through the trainings, I learnt that this is a bad practice to the ladies as it affects their childbirth when they get pregnant. When I went back to village, I sensitized the fellows in my village about the dangers of FMG (Male youth, St. Joseph Don Bosco).

Other Outcomes

☐ Perceptions about life skills trainings

Institution heads and coordinators perceived life skills trainings as an important component the youth should be equipped with prior to graduation in any institution. One of them said:

Generally, the life skills trainings are really important because as our youth leave the college for the field of work, apart from the technical knowledge and skills, at least they

also need the other general knowledge that can help them in their field of employment. So, the trainings are very important to the students (Principal, Kyera Agricultural Training College).

Another participant said: “The life skills trainings have been beneficial to our students because it is life-long learning. [...] it has helped to create awareness among youth of what happens in the real world, their day to day decisions and other aspects of life” (Coordinator, St. Joseph Don Bosco).

Additionally, life skills trainings were commended by the institution heads and coordinators for having addressed some of the pressing challenges that were in their institutions. One of them said:

Life skills trainings have helped to improve relationships among the youth. Before the trainings, youth on the non-formal programs had a challenge of associating and disrespecting other students and even themselves, they would live in isolated groups of only a single sex (boys alone and girls alone). The trainings helped in making them appreciate the need of associating with everyone at the institution without demeaning each other (Coordinator, St. Joseph Don Bosco).

Another participant added that:

Youth’s behaviours in relation to sexuality were alarming yet they were less aware of the consequences resulting from engaging in sexual actions. The trainings have helped to empower them to make informed decisions about their sexual actions well knowing the consequences that come with their decisions (Coordinator, St. Joseph Don Bosco).

The institution heads and coordinators also reported to observe an improvement in the youth’s teamwork, self-confidence and self-awareness skills as a result of the life skills trainings. One of them said:

With teamwork I will say there is a great improvement because I am seeing some self-driven groups being formed especially when it comes to projects. We used to group them for certain activities but somewhere we decided to let them do individual work. But after participating in the trainings, some youth started forming groups amongst themselves where they even engage in income generating activities such as planting maize and our role is to apportion them land where they can start up their projects upon request. So teamwork is there amongst them (Principal, Kyera Agricultural Training College).

Another participant added that:

Low self-esteem especially among girls was a serious challenge in this institution. Because of the society setting, they always felt inferior but this has greatly improved as a result of these life skills trainings. Confidence and self-esteem among girls has greatly improved to extent that they even started contesting for leadership positions in school

which was not the case before their participation [...]. The trainings have awakened their thinking and self-belief (Coordinator, St. Joseph Don Bosco).

As a result of the benefits from the trainings, the institution heads and coordinators felt the need to continue having such trainings in their institutions. One of them said:

There is need for more trainings. At least every year, you could target mostly fresh entrants so that they can also learn something. Also, some instructors could be capacitated to help remind the youth on what they have learnt and even train those who may join the institution later (Coordinator, St. Joseph Don Bosco).

❑ Life skills and employability of youth

Youth acknowledged that the life skills trainings equipped them with knowledge and skills such as respect for others which are essential for them in thriving at their places of work. One of them said:

[...] sometimes you may find that you are having a job or you are in a position whereby if you are not respecting people, those people have to be against you and you find yourself losing that job. When you do not respect people, they end up doing things the opposite way and this means that you will not be able to obtain the required results which may result in loss of the job. Additionally, I work with different people who react to situations differently and sometimes I manage those who are even older than me, but using that skill of respect that I learnt from the training, I can always find a way of handling every person so that they feel happy and I also feel happy for the work well done (Male youth, Kyera Agricultural Training College).

Additionally, the skills and knowledge acquired through life skills trainings have helped youth to start-up and manage their own income generating activities.

Those trainings helped me to identify my goal and that motivated me to start a business. I started passion fruit farming and sometimes I hire other people to help me do some activities on the farm. The trainings helped to clarify on how one should behave and handle other people which has resulted in a smooth working relationship with those who help me (Female youth, Bwasandeku Mixed Farm).

The knowledge acquired from life skills trainings has also helped some youth to attain employment with different organizations through which they are transferring the learnt knowledge and skills to other youth in the community as one of the youth said: “I am currently employed with Reproductive Health Uganda as a peer educator and our work is to sensitize youth about family planning and STIs, where the knowledge and skills I got from the life skills trainings has helped me a lot” (Female youth, Anchor Foods Limited).

Through the life skills trainings, youth gained financial management skills which they have portrayed through saving from the little they earn and these savings would later be invested in other income generating activities as quoted from one of the youth.

During the trainings, I realised how I can put my money into good use rather than wasting it in drinking alcohol. I learnt that I can save this money and use it to do something meaningful from the savings even by beginning from the little stuff. So out of my savings, I have been doing something little, I started a goat rearing project which I am doing from within my dad's big project. I started with only one goat but as I speak now, I have around 10 goats (Male youth, Kyera Agricultural Training College).

CHAPTER FOUR: CONCLUSIONS AND RECOMMENDATIONS

4.1. Conclusions

The endline study revealed that the life skills trainings have remarkably contributed to an improvement in youth's knowledge and skills on the various topics covered: human dignity, sexually transmitted infections, sexual health, fertility awareness, and personal hygiene, among others. There is also a change in youth's behaviours, self-management and collaboration/teamwork as a result of the various trainings. The life skills trainings have also facilitated the youth to transform into responsible and respectable persons; and to have greater opportunities of obtaining a job, maintaining a job, and/or obtaining a new job where necessary.

Additionally, the knowledge and skills that the youth acquired through these trainings has been transferred to other youth and adults in the communities they live in. This has been done through sensitisation, partly in collaboration with other NGOs, community elders and the police with an aim of curbing unbecoming behaviours.

This study further revealed that in communities where the beneficiary youth live in, there are challenges that they still interface with. These include: early marriages and pregnancies, gender-based violence, sexual abuse, drug and substance abuse, among others. The life skills training sessions were able to address a number of challenges in youth and the various institutions, and for this, the institution heads, coordinators and the youth expressed a need to have such trainings continued in their institutions and also extended to others.

4.2. Recommendations

Based on the findings of this study, the following recommendations are made:

For AVSI and LGIHE

➤ Extending the training to other institutions and youth

There is need to extend the life skills trainings to other institutions as its benefits on youth have been highly commended by the various stakeholders. Moreover, as reported by the youth, the life skills trainings have positively impacted their lives in terms of employment – being able to get the jobs and maintaining the current opportunities. Therefore, extending life skills trainings to other youths and institutions would contribute to the reduction of the rampant issues/challenges facing youth in the various communities as well as facilitating them in the various income generating activities.

For LGIHE

➤ Follow-up of the trained youth

LGIHE in collaboration with AVSI should always update the bio-data of the beneficiaries when they are exiting the institutions and conduct routine follow-up in order to validate information that could be used for tracing them. This would also ease the mobilisation

process of the youth in case they are needed to participate in any post-training activities such as projects, trainings and M&E related activities. In addition to this, there is need for preparatory sessions with Principals, Coordinators and targeted beneficiaries such as students to clearly explain to them the phases of the project and the related activities such as baseline, midline and endline. The timing of these activities and what is expected of the participants need to be clearly explained during these sessions to ensure successful subsequent post-training follow-ups.

➤ **Improving data collection mechanisms**

In order to mitigate the mishaps encountered during the data collection process such as failure to conduct some KIIs, it would be a good practice, in the future, to always liaise with the targeted KIIs about their availability prior to scheduling of the interviews or related activities. Furthermore, possibilities of adopting sequential mixed methods designs where one data collection method follows after the other could be considered. This will ensure appropriate dates being scheduled for such interviews.

For Development Partners

➤ **Sensitisation of communities about the dangers of early marriages, early pregnancies and gender-based violence**

Despite the project's initiative to create awareness among youth for these dangers, cases of early marriages and early pregnancies were reported to be very common in some of the communities where the youth live in. Therefore, sensitisation of parents and the various community stakeholders would equip them with the relevant knowledge and skills to address this problem.