

Integrating GBV SBC interventions in last-mile IPC and Community mobilization activities not only facilitates enhanced community awareness and response but also effectively improves reporting, access to post-violence care services, and self-efficacy in addressing GBV.

Improvements in knowledge, risk perception, and action against GBV in rural Uganda: Result of a social and behavior change intervention

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INTRO AND OBJECTIVE

- Gender-based violence (GBV) continues to affect Ugandan communities significantly.
- USAID Social and Behavior Change Activity (SBCA) supported the Ministry of Health and partners in developing a GBV campaign dubbed “Let’s Change Our Stories” to contribute to reducing GBV in Uganda.
- Roll-out of the campaign was integrated into IPC and community mobilization last mile activities in 11 malaria-endemic districts in Uganda's Eastern, East Central, Northern and West Nile regions.
- SBCA conducted two cohort monitoring surveys to assess changes in intermediate and behavioral outcomes related to GBV over time.

METHODS

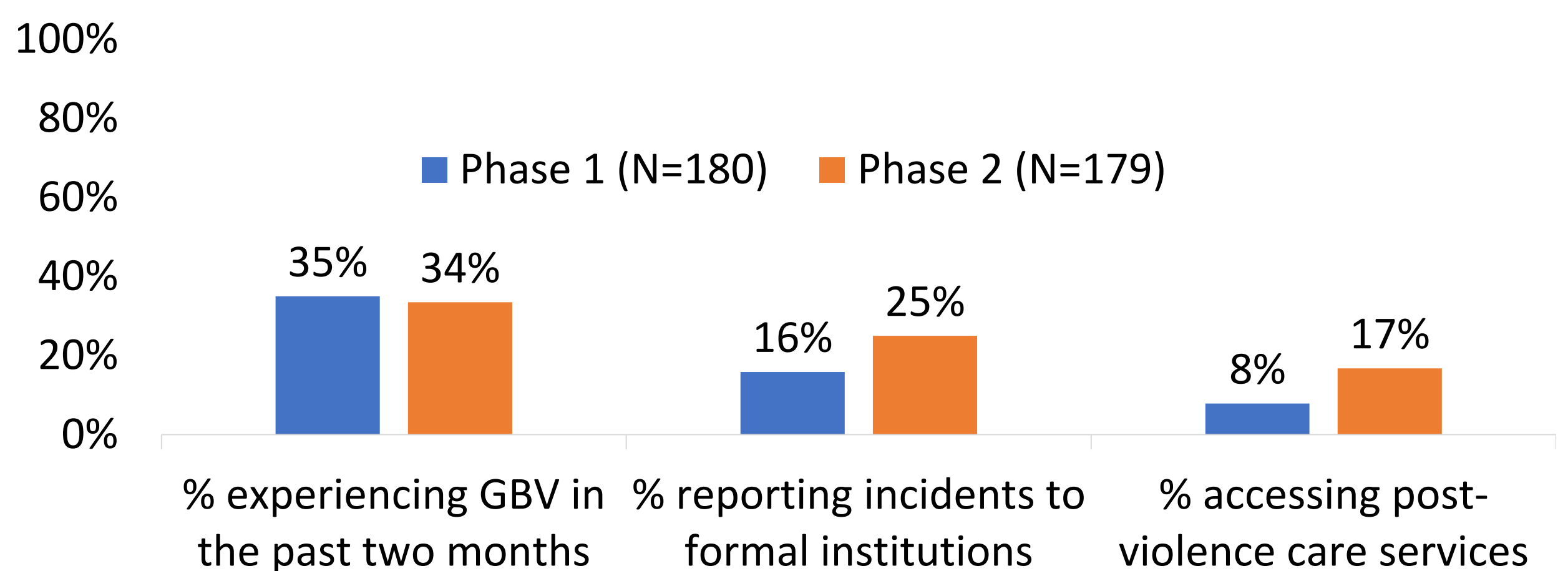
1. Longitudinal cohort monitoring
2. N, Round 1 = 180, Round 2 = 179.
3. Purposive sampling in Lamwo, Amuru, Dokolo, Oyam, Namayingo, Kaliro, Pader, Kaberamaido and Luuka
4. Structured questionnaire administered.
5. Used STATA 14 for quantitative data analysis.
6. Data collection conducted in February and April 2024.

Below is a sample of campaign materials disseminated

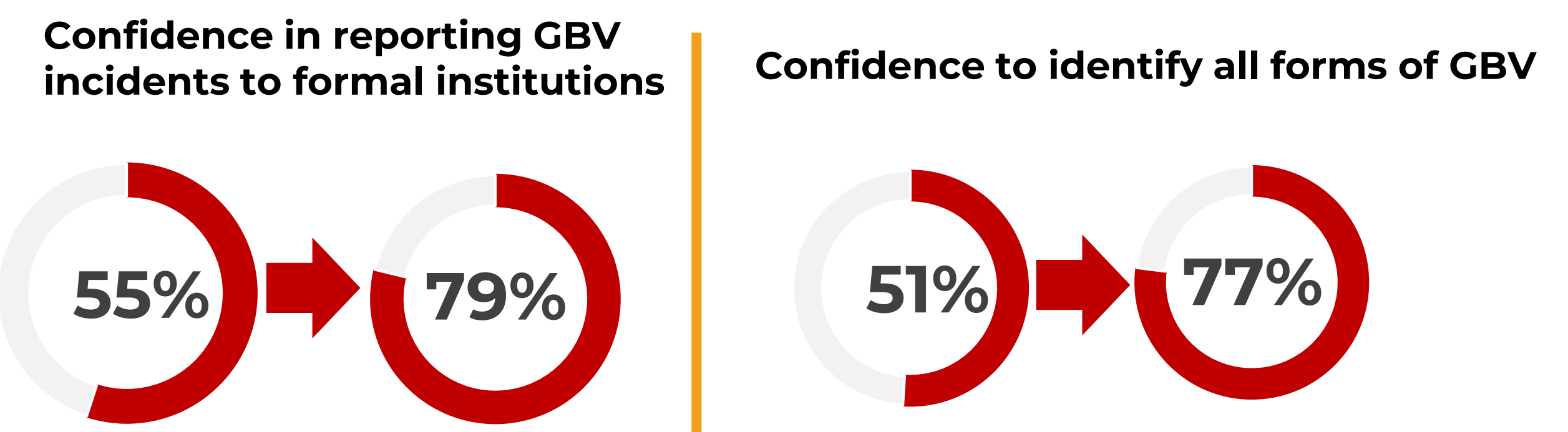


RESULTS

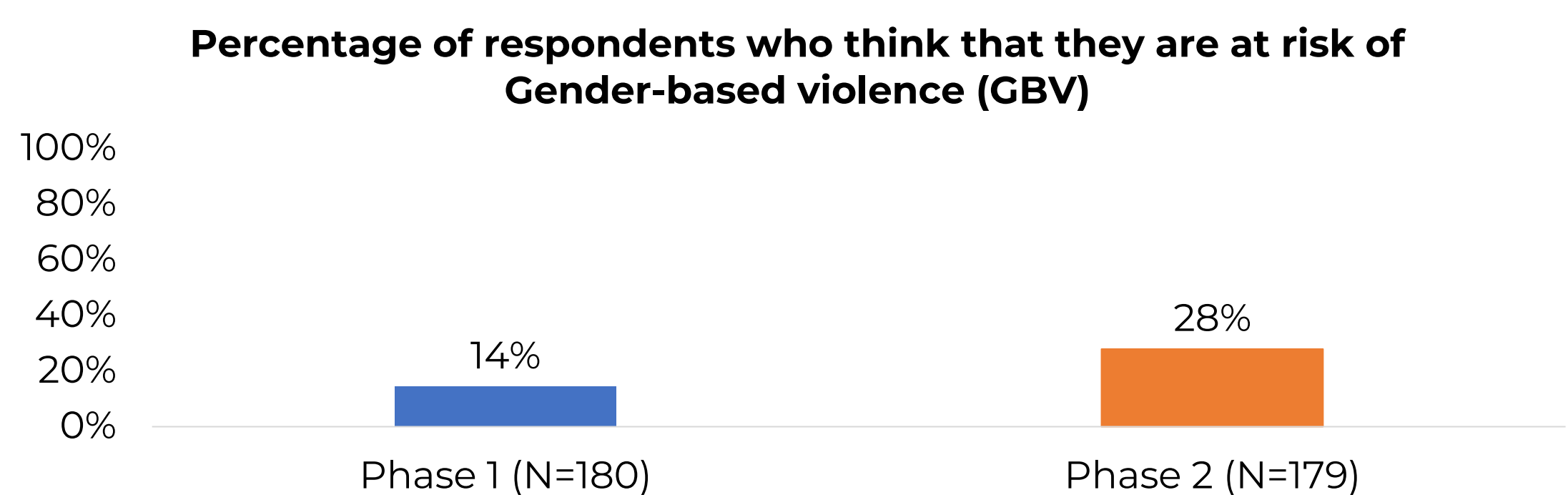
Behavior: While the incidence of GBV has remained relatively constant, there have been improvements in the reporting of incidents and access to post-violence care services between the two phases.



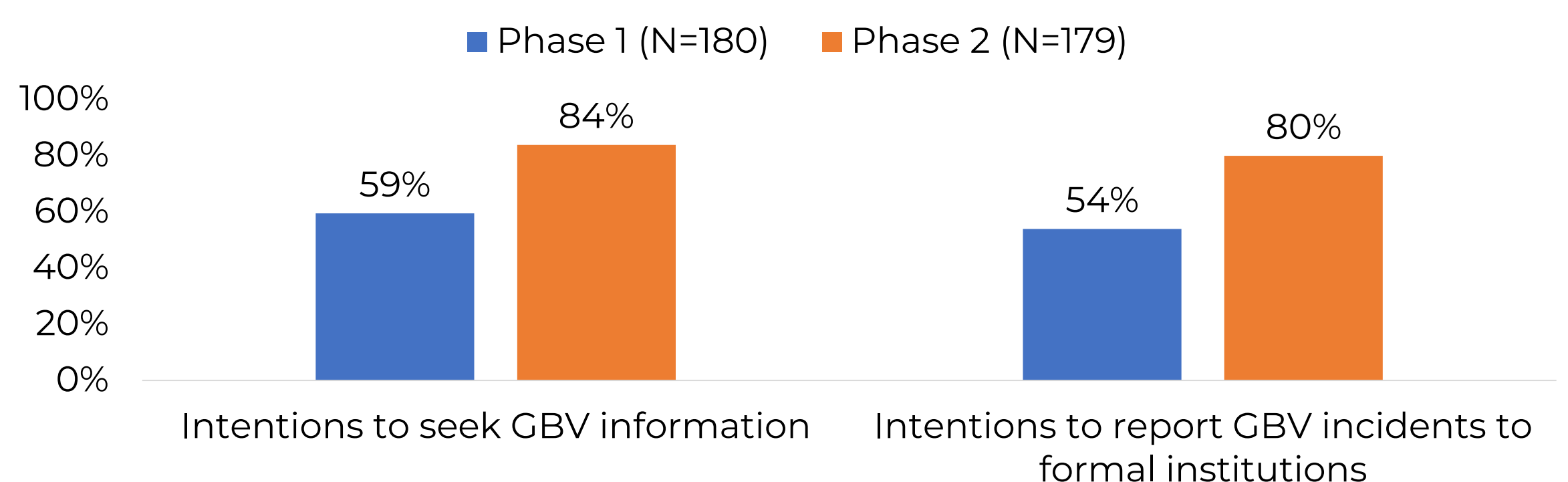
Self-Efficacy: Positive changes in self-efficacy related to GBV, with notable improvements in both the confidence to report incidents and the ability to identify all forms of GBV between the two phases. This increase in self-efficacy likely contributed to the higher rates of reporting incidents and accessing post-violence care services observed above.



Perceived risk: The percentage of participants who believe they are at risk of gender-based violence (GBV) increased significantly from 14% during Phase 1 and doubled to 28% in Phase 2.



Intention: There is a positive trend in intention to seek GBV information and report GBV incidents to formal institutions between Phase 1 and Phase 2.



CONCLUSIONS

- There was a positive shift in knowledge, risk perception, self-efficacy, intentions, and actions following the intervention. SBC practitioners should continue to provide information on GBV and capitalize on the emerging intention to report GBV incidents.

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