IMPACT EVALUATION RESULTS 2022
Implementing a Holistic Approach to Improve Children’s Learning, Growth and Future Success
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The full report can be found at https://bit.ly/nyakarpt22
Celebrating Our Children’s Learning, Growth And Success

Since our establishment in 2001, we have been working with communities to nurture and protect children so that they can learn, grow, and thrive.

Our 2022 impact evaluation results demonstrate two decades of hard work and commitment towards improving the future prospects and success of thousands of rural children, as well as their grandmothers and communities.

Our four thematic program models comprising; Education, Grandmothers, Health and Nutrition and, Sexual and Gender-Based Violence (SGBV), have helped us provide the much-needed response to the devastating deprivation factors that exist among Orphans and Vulnerable Children (OVCs) in south west Uganda; while building a methodology with an investment blueprint that surrounds each child with holistic care and support.

Program Impact Overview

**GRANDMOTHER PROGRAM**

The grandmothers reported a significant increase in their daily income and earnings, from **$1.06 at baseline to $2.70 in 2022**. Out of the 254 Nyaka grandmother-led groups, 53 (21%) will graduate from our microfinance project in 2023. Annual income from business profits, sale of agricultural crops, formal and informal employment, remittances, gifts, and sale of livestock significantly contributed to the household income and earnings raised in 2022.

The grandmother microfinance program reached **75% of the 254 grandmother groups in Nyaka’s operative districts of Kanungu, Rukungiri, and Rubanda**. More groups will benefit in 2023. The Nyaka program has had a significant impact on women-headed households, as 64% of the grandmothers in the program are either widowed or single.

The Orphans and Vulnerable Children (OVCs) under the care of the grandmothers reported a **well-being rating of 83%**, compared to their peers who reported a well-being rating of 72%. This demonstrates that the economic well-being of the grandmothers translates into the overall well-being of their grandchildren and the other household members.

**EDUCATION PROGRAM**

Students across our three schools and in our scholarships program reported a **well-being rating of 93%**, reflecting our unique and robust education system that has maintained excellent rates of **learner retention (98%)**, **learner attendance (97%)**, and **learner completion (94%)** over the last 10 years. Nyaka will support 775+ students at all levels to stay in school during the 2023 academic year.

**HEALTH AND NUTRITION PROGRAM**

Nyaka's health program and clinics continued to respond to the health access barriers faced by rural families. In 2022, **54% of the consultations were for children**, while 25% were for adults aged 51 to 90 years, majority of whom (81%) were grandmothers. Our 2022 **client satisfaction rating was 91%**, and demand for Nyaka’s health services by children, grandmothers, and the wider community has grown by 145% compared to 2011 when the clinic was established. Keeping children and their grandmothers healthy remains our top priority.

**SGBV PROGRAM**

The demand for services supporting SGBV survivors was evident throughout 2022. Impact results from our SGBV program revealed a **concerning 69% increase in the number of monthly SGBV cases** reported compared to 2021. With your support, Nyaka will continue to fight against sexual and gender-based crimes targeting boys, girls, and women.

**ACKNOWLEDGEMENTS**

Your incredible support has made all this possible. We sincerely thank you for trusting and believing in us and our work for the sake of our children. We hope to count on your continued partnership as we journey towards achieving our mission objectives.
## Topline Outcomes

### COMPREHENSIVE CARE FOR ORPHANS AND OTHER VULNERABLE CHILDREN (OVCs)

<table>
<thead>
<tr>
<th>Category</th>
<th>Index</th>
<th>Comparison</th>
</tr>
</thead>
<tbody>
<tr>
<td>Overall well-being index</td>
<td>84%</td>
<td>compared to 72% by peers</td>
</tr>
<tr>
<td>Education well-being index</td>
<td>83%</td>
<td>72% by peers</td>
</tr>
<tr>
<td>Economic well-being index</td>
<td>82%</td>
<td>56% by peers</td>
</tr>
<tr>
<td>Health well-being index</td>
<td>92%</td>
<td>83% by peers</td>
</tr>
<tr>
<td>Shelter well-being index</td>
<td>94%</td>
<td>88% by peers</td>
</tr>
</tbody>
</table>

Results indicate continued progression in all the 10 well-being domain indices, compared to 2021. This progression is dependent on the increased economic wellness of the caregiving grandmothers.

### POSITIVE SHIFT IN HOUSEHOLD INCOME AND EARNINGS

- **Average daily income and earnings**, from $1.06 at baseline: $2.67
- **Returns on investment** within 36 months, for every $40 invested in a grandmother-led household of 5 members: 285%
- **Earned within 36 months** for every $40 invested into a Nyaka grandmother-led household: $462
- **Grameen progress out of poverty index**, an improvement from 34.2 at baseline and below the national average of 20: 17.9
- **Annual household wealth value**, an increase from $453 at baseline, and $952 the previous year: $1,139
- **Nyaka grandmother-led households**, including 14,904 (75%) that have accessed Nyaka’s microloans: $20,066

Nyaka grandmother-led households continued to progress economically despite the recent global economic disruptions, impacting the well-being of the OVCs under their care.
In 2022, the average Nyaka grandmother-led household increased their daily income and earnings by 152%, lifting them above the extreme poverty threshold of $2.15, despite experiencing unprecedented global economic shocks.

In 2022, the average grandmother-led household earned 36% ($0.71) more in daily income and earnings than their peers.

The net worth of Nyaka grandmother-led households has increased 2.5 times compared to the baseline and is 32% higher than that of their peers.

Over a three year period, households reported an average ROI of 285%, with an annual investment of $40 per household. Nyaka invests in improving household access to savings and credit, training, child care, and SGBV prevention, which leads to women’s economic empowerment while increasing their capacity to care for Orphans and Vulnerable Children (OVCs).

Livestock asset value for Nyaka grandmother-led households has increased by 144% since the baseline in 2016, from an annual average of $67 to $164. This represents a 16% increase compared to their peers.

The welfare and well-being status of Nyaka grandmother-led households have improved 3.5 times faster than their peers.

Compared to the baseline, Nyaka grandmother-led households have a Poverty Probability Index (PPI) that is 9.8 points lower and 2.1 points below the national average of 20. In contrast, the PPI of their peers is 27.7, down from the 33.6 reported at the baseline.

Nyaka uses the OVC Well-being Measurement Tool (OWT) to assess the overall well-being of a child across ten domains. High self-reported indices suggest better overall well-being for the child.

Nyaka’s grandmother-led OVCs reported a 90% well-being rating for FOOD and NUTRITION, which is 18% higher than their peers. This highlights the effectiveness of Nyaka’s efforts in promoting household food security, nutrition, and income.

The self reported well-being rating for EDUCATION is 83%, which is 11% higher than their peers. This demonstrates the positive impact of Nyaka’s grandmother program on children’s access to education.

They also reported a 94% well-being rating for SHELTER, which is 6% higher than that of their peers. Access to safe and decent physical shelter contributes to better health outcomes, improved educational performance, and overall well-being for children.

PROTECTION was 35% higher than that of their peers, as measured by how children perceive their treatment within their communities, schools, and households. Nyaka’s SGBV program ensures that children are protected from sexual and domestic violence and crimes.

They further rated HEALTH 9% higher than their peers because they believe that they are healthy and doing as well as other children of their age.

The Orphans and Vulnerable Children (OVCs) led by Nyaka are receiving holistic support that is 13% better than that of their peers.
Topline Outcomes

**EFFECTIVE LEARNER RECRUITMENT AND ENGAGEMENT**

- **LEARNER RETENTION RATE**
  - Learner retention rate across Nyaka schools, compared to 89% for peer schools.
  - 98%

- **SCHOOL COMPLETION RATE**
  - School completion rate across Nyaka schools, compared to 87% for peer schools.
  - 94%

- **CLASS ATTENDANCE RATE**
  - Class attendance rate across Nyaka schools, compared to 81% for peer schools.
  - 97%

**A HOLISTIC EDUCATION SYSTEM**

- **OVERALL WELL-BEING INDEX**
  - Overall well-being index for OVCs across Nyaka schools, compared to 74% for peer schools.
  - 93%

- **EDUCATION WELL-BEING INDEX**
  - Education well-being index, compared to 77% for peer schools.
  - 99%

- **FOOD AND NUTRITION WELL-BEING INDEX**
  - Food and nutrition well-being index, compared to 78% for peer schools.
  - 99%

- **HEALTH WELL-BEING INDEX**
  - Health well-being index, compared to 77% for peer schools.
  - 87%

- **PROTECTION WELL-BEING INDEX**
  - Protection well-being index, compared to 64% for peer schools.
  - 100%

- **SCHOOL MEALS INDEX**
  - Of our learners have access to meals while at school, compared to 51% of their peers.
  - 100%

**2022 PROGRAM REACH**

- **NYAKA PRIMARY SCHOOL**
  - Male: 49%
  - Female: 51%
  - Students: 231

- **KUTAMBA PRIMARY SCHOOL**
  - Male: 36%
  - Female: 64%
  - Students: 216

- **NYAKA SCHOLARSHIP PROGRAM**
  - Male: 34%
  - Female: 66%
  - Students: 132

- **NYAKA VOCATIONAL SECONDARY SCHOOL**
  - Male: 46%
  - Female: 54%
  - Students: 189
Topline Outcomes

Our scholarship program’s goal is to provide Orphans and Vulnerable Children (CVCs), especially girls, with access to quality education and training, which will empower them socio-economically.

<table>
<thead>
<tr>
<th>NYAKA STUDENTS/GRADUATES SINCE INCEPTION TO 2022</th>
<th>PERIOD</th>
<th>TOTAL</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td># Nyaka alumni who have graduated with Bachelors Degrees</td>
<td>2018-2022</td>
<td>25</td>
<td>11%</td>
</tr>
<tr>
<td># Nyaka alumni who have graduated with Diplomas</td>
<td>2017 - 2022</td>
<td>17</td>
<td>7%</td>
</tr>
<tr>
<td># Nyaka alumni who have graduated with Certificates</td>
<td>2014 - 2022</td>
<td>192</td>
<td>82%</td>
</tr>
<tr>
<td>Total Graduates</td>
<td>2014-2022</td>
<td>234</td>
<td>100%</td>
</tr>
</tbody>
</table>

**The totals include only sponsored students/alumni**

Nyaka’s sponsorship program has empowered 234 students to become salaried workers, self-employed individuals, business owners, and agribusiness professionals. This has created opportunities for economic growth and stability for their children and families, and has also helped to reduce unemployment in the community.

Impact Drivers

To measure the impact of the scholarship program, we track and monitor our students’ progress. This helps us identify gaps, recommend solutions, and document best practices.

- 99% of the students view education as a significant foundation and long-term investment that can help them achieve their personal goals.
- 92% of the students attended all their classes whenever a lecturer or teacher was available.
- 86% of the students participated in STUDENT SELF-LED ACADEMIC GROUPS where they could share knowledge and support each other.
- 77% of the students accessed ACADEMIC RESOURCES such as laboratories, libraries and demo sites.
- 87% of the students engaged in HOME-BASED skill-building and extra activities such as computer literacy, poultry rearing, knitting and weaving, and bricklaying.
- 72% of the students took part in SCHOOL EXTRA-CURRICULAR activities and skill building, such as games and sports, data management and computer literacy.
- 89% of the students are SATISFIED with Nyaka’s mentorship, guidance and support program.
- 97% of the students are KNOWLEDGEABLE about SGBV (Sexual and Gender Based Violence) prevention and know who and where to report SGBV crimes.

As a child of a single mother, my school fees and basic needs, along with those of my four siblings, were a financial struggle. After completing high school, I worked as a waitress in a local restaurant for three years since there was no money to pay for my university education. Today, thanks to the Nyaka Scholarship, I am able to pursue a degree in Business Administration.

–Maureen Mararungu
Student, Nkumba University

I am studying at Makerere University to become a teacher. My dream is to promote gender equality, especially in rural areas where girls are not valued except for early marriage. I am so grateful to Nyaka for giving girls a chance to learn, grow, and thrive.

–Maritina Ainembabazi
Student, Makerere University

S2 students from Nyaka Vocational Secondary school showcase their recycled basket and paper bags, a project that aims at preventing land and water pollution.
ACCESS TIME AND DISTANCE EFFICIENCIES

Patients save 4.5 HOURS per visit due to the efficient service and strategic location of Nyaka clinics, which represents a 225% reduction in travel time compared to other distant health facilities in the area.

Patients travel 5km LESS per trip, thanks to the strategic location of Nyaka clinics within the community, which is 125% shorter than the distance patients travel to reach a distant peer health facility.

Cumulatively from 2011 to 2022, households gained $485,225 worth of cost savings. Of this amount, $364,772 was saved on treatment expenses, and $120,453 was saved on travel expenses.

In addition to keeping their children healthy and productive, households led by Nyaka save about $158 annually on health-related expenses, which represents 16% of their annual income. These savings can be used to meet other household needs such as education, food, clothing, and other related expenses.

SAVING ON FAMILY HEALTHCARE BILLS

Patients save $4.8 on TREATMENT EXPENSES per visit at Nyaka’s free and low-cost healthcare service, which is 506% less than the cost of a similar peer clinic.

Patients save $1.5 on TRAVEL EXPENSES per visit to Nyaka clinics, which is one-third the cost of travelling to a similar clinic.

INCREASED HEALTH OUTREACH PROGRAMS

- Nyaka health workers conducted 85% MORE COMMUNITY OUTREACH sessions and reached 122% MORE PEOPLE during these programs, compared to the previous year.
- Nyaka health workers conducted 24% MORE HOME VISITS, compared to the previous year.

FOSTERING CLIENT SATISFACTION

- Nyaka clinic services have a Net Promoter Score (NPS) of 77%.
- 91% of clients are satisfied with Nyaka clinic services and other health initiatives.
- 89% of clinic patients prefer a referral to a government health facility for advanced treatment instead of a private facility as a referral destination because it offers free health services.
Topline Outcomes

**AFFORDABLE HEALTHCARE FOR CHILDREN**

Access to quality healthcare is challenging worldwide, particularly for those living in rural areas who may struggle to afford treatment and travel costs. This can have a particularly negative impact on children and older people, who may face long distances and wait times to receive care. Since 2011, Nyaka has been providing free and affordable healthcare to families and communities, leading to a positive impact.

In response, Nyaka improves access to affordable healthcare for children, promoting physical and mental health, enhancing learning, growth, and overall well-being.

**ANNUAL CLINIC CONSULTATIONS RISE**

- In 2022, we registered a 145% growth in Nyaka’s clinic’s consultations, compared to when the clinic was established in 2011.
- 61% of Nyaka clinics visitors were from the Community, with grandmothers (16%), Nyaka school students and staff (19%), Persons Living With HIV People Living With HIV (PLWHIV), and others making up the remainder.

**ANNUAL CONSULTATIONS REPORTED AT NYAKA CLINICS FOR THE PERIOD 2018–2022**

<table>
<thead>
<tr>
<th>AGE GROUP</th>
<th>MALES</th>
<th>FEMALES</th>
<th>TOTAL</th>
</tr>
</thead>
<tbody>
<tr>
<td>0–4 yrs</td>
<td>7%</td>
<td>8%</td>
<td>15%</td>
</tr>
<tr>
<td>5–9 yrs</td>
<td>5%</td>
<td>7%</td>
<td>12%</td>
</tr>
<tr>
<td>10–14 yrs</td>
<td>6%</td>
<td>10%</td>
<td>16%</td>
</tr>
<tr>
<td>15–19yrs</td>
<td>5%</td>
<td>6%</td>
<td>11%</td>
</tr>
<tr>
<td>20–30Yrs</td>
<td>2%</td>
<td>5%</td>
<td>7%</td>
</tr>
<tr>
<td>31–40yrs</td>
<td>2%</td>
<td>5%</td>
<td>7%</td>
</tr>
<tr>
<td>40–50yrs</td>
<td>2%</td>
<td>5%</td>
<td>7%</td>
</tr>
<tr>
<td>51–60yrs</td>
<td>2%</td>
<td>7%</td>
<td>9%</td>
</tr>
<tr>
<td>60+ years</td>
<td>3%</td>
<td>13%</td>
<td>16%</td>
</tr>
<tr>
<td>AVERAGE</td>
<td>34%</td>
<td>66%</td>
<td>100%</td>
</tr>
</tbody>
</table>

Over half (54%) of the consultations were children 0–19 years old, and the majority (57%) were girls. 25% of the consultations were with adults aged 51–90. Of these, 83% were females, many of whom were grandmothers.

The fact that 66% of the consultations were for female patients suggests that the provision of healthcare services is particularly significant to girls and women.

Our health program aims to increase access to healthcare for children and females in underserved communities.

- 87% of NYAKA STUDENTS PASSED their Nutritional Assessment (MUAC) Score in GREEN.
- 91% of HOUSEHOLDS rated Nyaka’s health programs as very helpful to their children’s health and well-being.
Topline Outcomes

MORE SURVIVORS SEEKING HELP: A CALL FOR INCREASED SUPPORT

Nyaka’s successful 3-part model to prevent, respond and advocate against SGBV was implemented 2015, aiming to mitigate negative impacts on children’s growth, education, and future success, especially for girls.

- In 2022, the number of survivors accessing Nyaka’s SGBV services grew by 406% compared to 2018 and 3,375% compared to the baseline year of 2015.
- Over the same period, monthly enrollment grew by 69% compared to 2021, with 243 survivors reported.

PROTECTING CHILDREN FROM SGBV

<table>
<thead>
<tr>
<th>AGE(YEARS)</th>
<th>AGE (%)</th>
<th>CUMULATIVE SGBV REACH</th>
</tr>
</thead>
<tbody>
<tr>
<td>0-5</td>
<td>7%</td>
<td></td>
</tr>
<tr>
<td>6-10</td>
<td>11%</td>
<td></td>
</tr>
<tr>
<td>11-15</td>
<td>35%</td>
<td></td>
</tr>
<tr>
<td>16-18</td>
<td>21%</td>
<td></td>
</tr>
<tr>
<td>19-20</td>
<td>4%</td>
<td>79%</td>
</tr>
<tr>
<td>21-25</td>
<td>4%</td>
<td></td>
</tr>
<tr>
<td>26-29</td>
<td>3%</td>
<td></td>
</tr>
<tr>
<td>30-35</td>
<td>5%</td>
<td>12%</td>
</tr>
<tr>
<td>36-40</td>
<td>2%</td>
<td></td>
</tr>
<tr>
<td>41-50</td>
<td>4%</td>
<td></td>
</tr>
<tr>
<td>51-60</td>
<td>2%</td>
<td></td>
</tr>
<tr>
<td>61-80</td>
<td>0.6%</td>
<td>8.6%</td>
</tr>
<tr>
<td>80+</td>
<td>0.4%</td>
<td>0.4%</td>
</tr>
<tr>
<td>TOTAL</td>
<td>100%</td>
<td>100%</td>
</tr>
</tbody>
</table>

The fact that 79% of the Sexual and Gender-Based Violence (SGBV) cases reported in 2022 involved children aged 0–20 underscores the critical importance of child protection for their healthy growth and development.

Sexual and gender-based violence (SGBV) harms children emotionally and physically, which can negatively impact their education, health, growth, and future success. It’s important to give them prompt support and intervention to help them heal and recover.

SGBV INCIDENCE #1

In June 2022, a 7-year-old female survivor got defiled and raped by a 19-year-old male (who was later arrested by police). She was on her way home from fetching water. After the incident, her mother rushed her to Kihihi Health Center III for emergency medical examination and support. Nyaka’s healing centre at Kihihi provides her with psychosocial support.

Survivor ID: 932-7-4142

SGBV INCIDENCE #2

The survivor (female), aged 14, got defiled by her uncle’s son in July 2022. Several months later, she was examined and confirmed to be pregnant. Nyaka enrolled her into the SGBV survivor program to ensure she received the much-needed psychosocial support and delivered safely. Today, she is a young mother to a baby girl.

Survivor ID: 205-14-940
Community Involvement: KAP Surveys

We used KAP [Knowledge, Attitudes, and Practices] surveys to engage with the community and to gather researched information on Sexual and Gender Based Violence (SGBV). Our KAP surveys targeted school-going children, households, and specific groups.

Our aim is to collect both quantitative and qualitative data on various SGBV domains, including misconceptions, misunderstandings, and divergent beliefs that could hinder Nyaka’s progress in combating SGBV.

KEY INSIGHTS FROM KAP

82% The willingness to report SGBV among school-going children has increased to 82% from 78% in 2021.

87% The willingness to report SGBV among community members has increased to 87% from 81% in 2021.

71% The awareness that boys are equally exposed to sexual violence has increased to 71% from 64% in 2021.

83% The awareness that SGBV survivors are victims of circumstance and not self-seekers has increased to 83% from 77% in 2021.

69% The percentage of locals who believe that sexual and gender-based violence exists in gender roles is still low at 69%.

Increased awareness can lead to improved prevention, response, and support for all survivors of sexual violence, regardless of gender. Additionally, it challenges harmful stereotypes and beliefs that perpetuate gender-based violence and promotes gender equality.

Looking Ahead

SGBV SERVICE REFINEMENT THROUGH KAP SURVEYS

Although KAP surveys have their limitations, we will continue to use them to evaluate the extent of known situations, confirm or disprove hypotheses, and enhance knowledge, attitudes, and practices (KAP) on SGBV-related topics.

Our KAP surveys will also help establish a baseline for future assessments and suggest intervention strategies that reflect local circumstances and cultural factors.

Our KAP tools and instruments are designed to record opinions and views from communities where Nyaka operates. We focus on enhancing knowledge, attitude, and practices related to various SGBV-related subjects.

In October 2022, the police in Bugongyi Subcounty, Kanungu District arrested a 32-year-old male for allegedly raping a 20-year-old female. “He found me alone at home and ordered me to enter the house without knowing that his intentions were to rape me. While in the house, he overpowered me, forced me onto my brother’s bed and raped me.” Our healing centre has continued supporting the survivor through her healing process.

Survivor ID: 343–20–1500

In 2022, we designed and rolled out a result-based digital data platform to track and manage data in real time for our SGBV program.

The platform collects data from multiple sources, including our four healing centers, school social work activities, community and media outreach, item distribution, training, and legal advocacy activities.

We maintain confidentiality, privacy, and data integrity, and our staff use data visualization dashboards to monitor case trends, survivor progress, implementation coverage, and program performance.
Understanding Our Impact Evaluation Instruments

At Nyaka, we take our impact evaluations and data management seriously. We only use tools and instruments that have been tested for validity, reliability, and effectiveness.

To assess the well-being of children, we used the CRS Orphans and well-being tool, which measures ten key domains including food and nutrition, education, shelter, economy, protection, mental health, family, health, spirituality and community. Higher self-reported scores indicate better well-being.

For grandmother households, we adopted the Household Economic and Welfare Survey to measure the impact on income and poverty reduction.

To track progress on SGBV knowledge, attitudes, and practices, we created an SGBV community engagement survey and a learner’s engagement tool, both deployed by SGBV prevention experts.

Our health survey collected patient data through our custom electronic medical records system, which is analyzed to inform our programs.

We conducted secondary data collection for our education program by interviewing teachers and administrators with our staff development, satisfaction, and welfare tool, and using the CRS OVC well-being tool for children aged 14-18 years.

In 2022, we collected over 7,000 data points using our digital data collection and reporting systems, which we use for tracking progress, accountability, program design, and impact reporting. We selected respondents through randomization, which allowed for precise and accurate impact outcomes compared to simple random sampling.

We seek consent from every respondent and obtain consent from minors through their parents, caregivers, or guardians to ensure data authenticity. We achieved a 99.8% response rate and validated 99.7% of the data collected. Invalid samples were discarded from the analysis.

HOW WE COMPILED OUR 2022 IMPACT REPORT

Our Theory of Change guides our approach to achieving impact and informs our results, indicators, and frameworks. The impact results presented in this report reflect Nyaka’s mission of working with the community to nurture and protect children so they can learn, grow, and thrive.

To ensure data integrity and independence from our surveys, we recruited and worked with 70 independent field data collection contractors for three months from mid-September to mid-December 2022. We also launched automated online data collection and reporting tools for our education, grandmothers, health, and sexual and gender-based violence prevention (SGBV) programs at the start of 2022. Our monitoring, evaluation, accountability, and learning (MEAL) team, established in June 2021, oversaw the technical needs of the entire process.

We trained all our contractors on digital data collection and pre-tested the tools with them before the fieldwork commenced. Our data cleaning, synthesis, analysis, and documentation of impact and narrative statements, as well as an internal and external review of the findings and outcomes, took four months to complete before publishing this report.

We standardized and adjusted income figures to account for inflation changes based on the 2022 average exchange rate of 3800 Ugandan Shillings to one US dollar and the consumer price index for Uganda.

We removed outliers from our datasets to keep them normally distributed. Data credibility is critical in all our surveys and impact evaluations, and we aim for high sample sizes, generating statistical power in excess of 99%.

Overall, we surveyed a total of 14,210 respondents, including 3,100 grandmother households, 1,575 Orphans and Vulnerable Children (OVCs) from the education and grandmother program, 740 households from the SGBV Prevention program, 200 households, and 8,430 patient records from the health program, and 165 teachers and administrators from 15 schools.

We reviewed our data and analytics with an independent third-party consultant, who provided an independent opinion on our results and the language used in the report.
Definition of Key Concepts

PEOPLE

Community: A group of families and caregivers supporting each other in raising healthy and happy children.
Grandmothers: In rural Uganda, grandmothers are women above 50 years looking after at least 2 grandchildren.
OVCs: Orphans and Vulnerable Children are a high-risk group facing multiple challenges.

MEASUREMENT

Household Income Surveys: Data collected on living conditions and income/expenditure patterns.
Household Income: Combined gross income received within a 12-month period by all members of a household.
Household Earnings: Includes household agricultural harvest, livestock assets, livestock consumed.
Impact: Long-term effects of an intervention on individuals or a group over time.
Net Promoter Score (NPS): Customer loyalty and satisfaction measurement based on the likelihood of recommending a product/service.
Progress out of Poverty Index (PPI): Measures multidimensional poverty progression based on welfare indicators.
SGBV: Sexual and Gender Based Violence.

OUTCOMES

Nurture: Provide a caring and supportive environment for optimal physical, emotional, and cognitive development.
Protect: Create a safe and secure space for children’s physical, emotional, and mental safety.
Learn: Absorb information through exploration, experimentation, and guidance from educators and parents.
Grow: Progress physically, emotionally, and mentally to develop into a healthy adult.
Thrive: Develop resilience, emotional intelligence, and well being for lifelong success and happiness.
Well-being: The state of being happy, healthy, and content in all aspects of life.
Welfare: The physical, social, and emotional health and prosperity of a child or individual.
Peers or Comparison Group: A group of people sharing interests or characteristics.