YOUTH NEEDS AND SERVICES IN KABAROLE DISTRICT, UGANDA: A SITUATION ANALYSIS

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Abstract

Background: Youth is a stage in life characterised by numerous challenges. There are many new issues to explore, understand and get to terms with for the youth. Physiological changes, social norms and legal laws to comply with, and peer pressure all impact on the youth simultaneously. The youth need a lot of support in order to go through this stage unscathed and also educated to handle adulthood. Some of the challenges result in new learned behaviours which may put the youth at risk of disease, crime or even death. Often, they are misunderstood, taken to be stubborn and rebellious. Yet they get insufficient support and facilitation.

Purpose: To identify the needs of the youth in the rural Kabarole District, in western Uganda, and the services available to address them.

Methods: The descriptive cross-sectional study largely collected qualitative data through in-depth interviews with 76 youths in four categories of youths (in-school; out-of-school rural and single; out-of-school rural and married; and urban youth) and one key informant from the District Health Office.

Results: The needs ranged from basics (food, clothing, shelter) through attachment needs (parental care and guidance), health needs (medical care and counselling for self and family), protection needs (legal and social protection) to needs of desire (leisure, employment, respect in society, academic excellence, happy marriages, setting up developmental activities and to be successful citizens). Most needs of desire were above their current financial means. Their problems included sexual harassment, early and forced marriages, dropping out of school and lack of basic needs. Married youth had domestic conflicts and violence, rapid child bearing and unemployment. Service provision for their needs was very limited. They were government and private agencies, especially faith-based and NGOs. Their scope was limited to the protection, assistance, education and medical services for a few orphans and vulnerable children. Medical services were not always youth-friendly.

Recommendations: The paper recommends the design of a comprehensive multi-sectoral programme to address the needs of the youth; adequate financial support to the providers of youth-specific services; enhancement of child-parent dialogue; and expansion of the scope of services.

Introduction

The youth are a poorly understood group in the population, right from their definition through their needs to their behaviour. The age bracket of youth varies greatly by source. They may be defined as young persons aged 15-24 years (The United Nations, n.d) or 15-29 years (Commonwealth Youth Programme, 2006) or 12 to 30 years (MGLSD, Uganda, 2001). The youth form the majority of the population in most developing countries. In Uganda, going by their, more than 78% of Uganda’s population is made up of the youth.

Wherever they are, the youth have multiple needs and challenges, most of which are directly or indirectly related to their health. The transition from childhood to adulthood is associated with discovery of many new things about themselves and the world. They do not know everything that could put them in trouble in
order that they avoid it. Youth is associated with what adults would describe as “recklessness” or “risk-taking behaviour” for they always attempt to do what they want even when they have been warned against it. Due to this, they are often misunderstood and rejected. In turn, they reject anybody, especially an adult, who wants to control them to prevent them from exploration. Instead, they easily respond to either the example or pressure of their peers. Since every country’s future lies in the hands of the youth, it is important that the need of the youth are given attention so that they develop into good and useful citizens.

In Uganda, adolescent pregnancy is high, at 32% among 15 -19 year old females and 48% of these get pregnant while still in school (MOH Uganda, 2005). Protection against maternal and neonatal tetanus among non-pregnant women mainly in school is less than 10% (UBOS and Macro International Inc, 2007). The national HIV sero-prevalence rate has remained high at 7.2% and with 46% of those infected being between 18-24 years, the young people are the worst hit. This study was carried out in Kabarole District, western Uganda, in 2009, to find out the key health and growth problems faced by the youth. As baseline survey, it intended to determine the key interventions that are needed in order to kick-start youth-friendly services in the district.

**Study area**
Since the study, there have been a number of changes in the administrative boundaries of local governments in the whole country. However, the findings reflect the district as it was at the time of the study. Kabarole district bordered with the districts of Kamwenge in its south-east, Kyenjojo in the east, Kibale in the north-east, Bundibugyo in the north and the west, and Kasese in the south. It had a population of 427,427 of which about 333,393 (or 78%) were youths. The health infrastructure of the district was as shown in the table below:

<table>
<thead>
<tr>
<th>Health Facility Level</th>
<th>Gov’t</th>
<th>Private Not for Profit</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hospital</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>Health Centre IV</td>
<td>3</td>
<td>0</td>
<td>3</td>
</tr>
<tr>
<td>Health Centre III</td>
<td>13</td>
<td>6</td>
<td>19</td>
</tr>
<tr>
<td>Health Centre II</td>
<td>18</td>
<td>9</td>
<td>27</td>
</tr>
<tr>
<td>Health Centre I</td>
<td>VHTs</td>
<td>VHTs</td>
<td></td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>35 (67%)</td>
<td>17 (33%)</td>
<td>52</td>
</tr>
</tbody>
</table>

*Source: Kabarole District Health Office, Health Profile 2007.*

In the district, teenage pregnancy was at 38% compared to 32% at national level. The unmet need for family planning services was at 41%. The HIV sero-prevalence rate was 11.3%, well above the national average of 7.1%. Though undetermined, there was also a visibly high level of orphan prevalence and destitution in the district. Health workers had a perception that the attention given to the needs of the youth needs was minimal whether in schools, homes, home villages, even by the government, and that there was a risk of losing many of them to HIV/AIDS, drugs, alcohol, prostitution etc.

The government of Uganda established a Youth Policy in 2001 (MGLSD Uganda, 2001). The goal of this policy was to provide an appropriate framework for enabling youth to develop social, economic, cultural and political skills so as to enhance their participation in the overall development process and to improve their quality of life. Its objectives were to initiate, strengthen and streamline all programmes and services targeting the youth; promote social and economic empowerment of the youth; build capacity and provide relevant training and information to the stakeholders; promote growth in the development of the youth through actions that protect; empower and prepare them for adulthood; provide psycho-social support and other services to youth in conflict situations, difficult circumstances and to the disadvantaged groups; increase youth involvement in decision-making, leadership, community based and other development programmes; mobilise resources for youth programmes and projects at all levels (MGLSD Uganda, 2001, p.19). However, it was observed that there was little action visible on the ground in the district to testify to the implementation of the policy.

This study set out to identify the needs and problems of the youth in Kabarole district, the services offered to meet these needs and to identify the service-providers. This was with a view to provide information to the relevant stakeholders in the district to establish the services if it was indeed confirmed that they were absent or to activate them if they were dormant.

**Literature review**
This section briefly looks at organisations providing services to meet the needs of the youth and studies on youth needs, problems and services.

**Needs and problems**
According to African Development Forum (ADF, 2006), the youth need health services, education, leisure time activities, protection, political participation, life skills, conflict resolution skills, economic development
and gender equality. In India, the key areas of youth concern are recognised as being education; training and employment; health and family welfare; preservation of environment; recreation and sports; arts and culture; science and technology; and civic and good citizenship (India, 2003). The Ugandan national youth policy mentioned above also emphasises that youth need to have access to and be involved in education and training; health; economic participation; safety, security and justice; welfare and community development; sports and recreation; arts and culture; environment; and science and technology. This was also confirmed by a survey carried out in Northern Uganda (AVSI and Unicef, 2007). Similarly, other national youth policies advocate for similar opportunities. For example, New Zealand emphasizes a healthy environment, mental health, physical health, involvement of youth in health policy formulation, youth health services and access to health services as being crucial to the proper development of the youth (Ministry of Health, New Zealand, 2002).

During the sixth Commonwealth Youth Forum in Entebbe, Uganda, consisting of more than 100 youth delegates from 48 Commonwealth nations, the youth were asked to state the constraints they face when starting business, their health issues, and their opinions about the impact of climate change. They mainly pointed out lack of capital and skills to start business, HIV/AIDS and drug abuse. On climatic change, they said that it results from environmental degradation and that it would lead to food insecurity and negatively affect people’s lives. They also pointed out the need for the youth to change their unhealthy lifestyles (The New Vision, 21st Nov., 2007).

Services offered to the youth elsewhere in Uganda
At national level, the department of youth affairs in the Ugandan Ministry of Gender, Labour and Social Development is responsible for the formulation of a youth policy, setting standards for youth training programmes, quality assurance and actual training of youth in the country. It is mandated by the government of Uganda to lead, manage and coordinate programs and services for youth. The National Youth Council organises the youth for socio-economic development. The council has structures covering all the council units in the country. There are many organisations in Uganda that provide youth services and only a few key ones will be mentioned here. The Uganda Youth Development Link (UYDL) conducts drug prevention activities for urban youth, mainly in Kampala. Their activities comprise provision of counselling, skills training and sports activities. These activities are carried out in schools and informal settings like slums and for street children (URCNN, 2007). Kids in Need (KIN) provides rehabilitative services to street children and youth involved in drug abuse. Several Remand Homes provide formal education and vocational skill training to the youth below 18 years who conflict with the law.

Active Vision Youth Foundation (ACVIYOF), operates in Kitgum district in northern Uganda. It is a youth-founded non-profit community-based organisation, aiming at streamlining the emancipation of young people in and out of school from the risk and consequences of HIV/AIDS, poverty, unemployment, illiteracy, lack of practical skills in education, improving moral values and developing their talents. ACVIYOF is also focuses on improving the education performance of the youth in the district. African Medical and Research Foundation (AMREF) empowers young people in Kabale district, south west Uganda, to demand for and access youth-friendly services including health care. It improves young people’s understanding of poverty reduction and their role in the community. It also improves young people’s participation in decision-making processes that affect their lives; their understanding of health issues and how to avoid disease. It improves information distribution and sharing among young people in the district in order to strengthen their ‘voice’. This study wanted to find out the efforts within Kabarole District.

Methodology
This descriptive cross-sectional study was carried out in Kabarole District in January 2009. Qualitative data were collected through in-depth interviews with four different categories of youth in the district. One key informant from the district Health Office was also interviewed. The youth categories included: youth in school; unmarried rural youth out of school; married rural youth and youth in urban areas. In total 76 youths were interviewed. Almost half (34/76) of the respondents were from the rural areas while 42 were from urban areas of the district. More than one quarter (27/76) of the respondents were females while the rest were males. Kabarole District was selected for this study for convenience due to ease of access. The two counties of the district and the municipality were all included in the study. From each county, one sub-county was randomly selected from the list of sub-counties. Only youths in secondary schools were studied. One secondary school was selected per sub-county. For sub-counties with more than one secondary school, one school was randomly selected. The youth in school were interviewed at school, during break time after getting permission from the school authorities and informed consent from the respondents. The researchers interviewed any student they came across randomly during break time, carefully avoiding repeat interviews.
Out-of-school married and unmarried youth were selected from the villages near the schools. They were found at their home or work places while urban street youth were selected from those met on the streets and who were regular residents of Fort Portal town. The study focused on youth needs and problems, services provided to the youth and the organisations providing services to the youth.

Findings
The needs, problems and services offered to the youth in Kabarole district the service provider organisations are presented in this section.

Needs
The needs are presented in general to eliminate repetitions because most of them are similar for the different categories.

Basic needs
The youth needed good food for breakfast, break tea, lunch and supper. This need was expressed by all categories of youth. The youth in town needed expensive food like chicken and chips, pork, yoghurt etc. All the categories of youth liked to be smart and as such they expressed the need for good clothing and good shelter. They all needed clothing in modern fashions. One youth said;

“We need good and attractive clothing so that we can fit in society. Unfortunately we cannot afford them” [Male youth, Fort Portal town]

The married youth needed suits which could earn them respect “like married people” but their financial status could not allow them to have the suits.

Parental care and guidance
The youth required parental care, love and guidance. They wanted their parents to give them enough pocket money, pay their school fees, visit them on visiting days and show them love. Girls needed money to buy personal requirements like sanitary towels.

Leisure
They liked to have entertainment like games, sports, watching movies, watching football, attending clubs at night and playing friendly football matches. They wanted to socialise with others through youth clubs and youth masses at church. They liked external discussions where they got to know each other especially by getting friends with similar academic index numbers. However, due to the demand for high academic performance, the youth in school had little time for leisure. The youth out of school and the married youth wanted to interact with each other socially but they were limited by their domestic activities.

Stable income/Employment
The youth out of school and married youth expressed the need for employment. They wanted good and well-paying jobs where they could earn good income to meet their needs. The youth living in urban settings preferred white collar jobs. They expressed dislike for laborious jobs.

Respect/Recognition
All the categories of the youth wanted to be respected in society. They felt their contributions should be recognised and rewarded.

Legal and Social Protection
All youth mentioned the need for legal and social protection especially where their rights were infringed on.

Happy Marriage
Most of the respondents said that they considered marriage to be a necessity since they were expected to have families in future. Some in school youths pointed out that sexual intercourse was inevitable since they intended to marry when they are grown ups. Female youths wanted to marry in order to get someone to cater for their needs. Married youth wanted love and affection from their partners and parents and they intended to have children. They looked forward to having peace and harmony in their families. They wanted blessed marriages which were stable economically and spiritually, and with well-groomed children.

Medical care and Counselling
Medical care, counselling and guidance also came up frequently as needs. The in-school youth wanted to be healthy so that they can complete their studies. They wanted youth-friendly medical services where they would be free to express their medical conditions. They wanted to be counselled on their personal problems.

Time and Academic excellence
School-going youths needed sufficient time to read their books and prepare for their future needs. They wanted to study hard and excel in academics so that they get good jobs in future.

Transport
Affordable means of transport were also expressed as a need by the youth in day schools. Some of them came from far and they often arrived at school late. They also often reached home late and too tired to read their books.
Success
The youth wanted to be successful. They wanted good jobs and stable families. They wanted to be job creators, famous and innovative. They wanted to prosper. Even the street youths dreamed of having good families, children, owning cars etc. They wanted to provide good education for their children. Some married youth and youth out of school wished to go back to school and get better qualifications.

Decision making
The youth wished to be involved in decision making. In particular the married youth wanted to be decision makers at household and government level.

Sensitisation on developmental issues
The youth out of school and married youth wished to be sensitised on developmental issues like how to improve household income, income generating activities like poultry keeping. They also wished to be trained in conflict resolution and sensitise about domestic violence.

Problems
The unique problems of each group are presented separately.

Problems for school-going youth

Sexual harassment
This was mainly reported by girls. The common perpetrators were the boda boda (motorcycle taxi) cyclists who were fond of offering lifts to the girls but ended up assaulting them sexually. The most common form of indecent assault was touching them inappropriately. They reported some cases of rape and defilement on their way to and from school. The girls in mixed schools also reported being sexually harassed by their male fellow students.

Early and forced marriage
Some girls reported that their parents were forcing them to get married, because of interest in dowry.

Dropping out of school
They reported a risk of dropping out of school because of financial constraints at home. The financial problems also led to lack of sufficient materials to use at school.

Lack of basic needs
They were not able to get all their basic needs. This forced them to engage in sex with sugar mummies and sugar daddies to get money.

Problems for youth out of school

Youth out of school reported that they had problems of relating well with their parents. They were not liked by their family members especially if they dropped out of school on their own. Their parents and guardians looked at them as already spoilt and useless. They had problems meeting their financial needs. They also had problems of getting employment.

Problems for married youth

Domestic conflicts
They complained of misunderstandings in families from time to time. Some thought that may be it was because they were too young to stand the challenges of marriage. They reported having experienced some level of violence from their spouses. This was reported by both male and female married youth.

Rapid child bearing
They reported that they were having children very close to each other which made the women very weak. To them, family planning methods were not easy to use.

Heavy work load
Most of the females reported that they were being subjected to manual work, which was not bearable. Such work included digging, harvesting, fetching water from long distances, house work etc. They had discovered that even looking after children was difficult.

Confinement
Females reported that they had no freedom to go where they wanted or do what they wanted. Their husbands wanted them to remain at home. Some were allowed to have income generating activities.

Meagre income
Their income was not enough to sustain their families. Besides that, it was not easy to get a job. They were being forced to work long hours to improve their income, but it did not make any difference.
Problems for youth on streets
The youth on streets were harassed by authorities and chased from place to place. They lacked parental love and care, shelter, food and education. Whenever they got opportunity to work for money, they were given heavy work to do for little pay. One of them said, “We act as lorries and tractors”.

They had problems with unfavourable weather conditions especially at night and during rainy seasons.

Active organisations and services offered to the youth in Kabarole District
Government health facilities provided the following free services for the youth: outpatient and in-patient diagnosis and treatment of common diseases; health education; antenatal care and deliveries where the pregnant youth could also access the services; tetanus toxoid injection for adolescent girls through school health programs; counselling for HIV testing, abortion, rape etc; and family planning services.

Non-governmental health facilities also provided similar health services except that a fee was charged for the services. There were, however, also some free services in non-governmental health facilities. These included antenatal care services, provision of antiretroviral drugs, and treatment for tuberculosis.

There were other organisations in Kabarole district which provided services to the youth. Some of these are described below:
Fort Portal Remand Home
The remand home provided legal protection, guidance and counselling to the youth, orphans and abandoned children received through the probation office. It also provided accommodation, counselling and rehabilitation of problematic children, especially those who had committed crimes. They were counselled, taught about the law on issues like rape and defilement. They were given health education.

Uganda Human Rights Commission
This is a statutory body which deals with child abuse and neglect, among its many functions. It also provides vocational training, legal protection and advocacy for neglected children.

Youth Encouragement Services (YES)
This was a non-governmental organisation with a major focus on support for orphans and vulnerable children. It provided rehabilitation, resettlement and educational sponsorship. It provided fees and scholastic materials, resettled the abandoned and vulnerable children and also provided them with medical and nutritional services. It also provided them with some vocational training in tailoring and computer lessons. It cared for and counselled HIV-positive children and helped the youth to start income generating activities.

Marie Stopes International
This is an international NGO which promotes sexual and reproductive health services. In the district, its services targeted people with disabilities, the youth, the poor and HIV-positive patients. It provided youth-friendly services in family planning, diagnosis and treatment of sexually transmitted infections, diagnosis, treatment and counselling for infertility.

Reproductive Health International
This organisation replaced the former Family Planning Association of Uganda (FPAU) in providing reproductive health services. It provided youth-friendly services in family planning, management of sexually transmitted infections and diagnosis, treatment and counselling for infertility.

Tooro Babies Home
This is a church-founded centre which takes care of abandoned children and orphans. As they grow up they are taken to school. Those who cannot go back to their homes are helped to complete their studies and become independent adults. Other organisations in the district took care of children, especially orphans.

Discussion
Lack of parental love and guidance can lead to the youth going astray. They will usually tend to only follow the guidance of their peers, who can mislead them. Failure of parents to provide sufficient funds to meet the needs of the youths could lead to temptation to engage in activities like theft and prostitution. On the contrary, having a lot of money can also spoil the youth. It may give them opportunity to engage in alcohol and drugs.

In this study, the youth expressed their need for basic needs of a good quality. The need for good food was mentioned very commonly, especially by the school-going youth. This is not surprising because one of the commonest reasons for student strikes in schools is the poor quality of food. The desire for expensive and fashionable clothing is very tempting, especially for girls, and puts the youth at risk of using dubious ways to obtain them. They might engage in transactional sex which puts them at risk of sexually transmitted infections, unwanted pregnancies, abortions and early marriage. Youths who seek marriage for the sake of
security, either from society or for financial protection, usually end up being too dependent on their spouses. They are and unable to obtain work to raise their own income. This negatively affects their married life and breeds domestic violence.

Many youths expressed the need for entertainment activities. Entertainment is good for the youth because it keeps them busy and healthy, especially if they participate in sports. However, some forms of entertainment may put them at risk if their involvement is unregulated. They are at risk of several dangers if they have their entertainment at night. Such dangers include fighting and injury, alcohol, smoking, premarital sex and even rape.

Many youths expressed their desire to have high levels of education. This is important and in line with their wishes to have well-paying office jobs, since such jobs require high qualification. The youth also expressed that they do not feel that their society expects or appreciates their contribution. Therefore, they feel discouraged from participating in community activities. Such lack of recognition can contribute to widening the gap between the youth and adults. It may then provide a loophole that can be exploited by negative forces to deviate the behaviour of the youth from the society’s norms.

Several organisations in the district provide legal and social protection services to the youth. These are essential services because the youth are often a neglected category of society. As a result, their rights are often abused. Therefore, the provision of such services is timely. Moreover, society tends to abandon all people associated with crime and, often, the rights of offenders are trampled upon. Youth being among the commonest offenders against the law, they are among the people who most need justice and rehabilitation in case they commit crimes.

Availability and accessibility of medical care and counselling services in the district is very essential to the population. However, the youth need to be addressed in their specific context. Therefore, there is demand for the services to be youth-friendly, to enable them to freely expose their medical conditions to the medical staff. Apart from direct medical care, youth-friendly services can be used to provide counselling and life skills.

Some of the youths expressed the desire to read hard to prepare for their future through high academic achievement. Such youth, if given the necessary support, can attain high academic achievements and qualifications, thus improving their chances of obtaining well-paying jobs. However, some of them lack means of transport to be at school in time and this could affect their academic performance. Moreover, those who travel long distances to school face many risks e.g. rape, enticements into business, theft, prostitution etc.

The study noted that there are very few organisations providing services to the youth in the district. Moreover, the scope of services currently offered falls short of the self-expressed needs of the youth in the district. The geographical coverage of the services also seemed to be limited, with most of the population of youth having no access to their services. The district is still fertile ground for social work in support of the youth.

**Conclusion**

The study showed that needs and problems of the youth in Kabarole District are centred on good up-bringing, good health, survival to adulthood, good economy, conflict resolution, good education and legal protection. They also rotated around basic human needs like food, clothing, shelter, medical care and counselling. The youth also needed some recognition of their contribution from their society and a bit of ostentation. However, since they do not have the means to afford all their needs, they remain wanting and this puts them at risk of crime, exploitation, disease and death. Married youth had a problem of financial security to cater for their marital and parental obligations. This also put them at risk of domestic violence, among others. The service providers targeting the needs of the youth in the district were too few and covering a narrow scope of services. Moreover, their geographical scope was also limited.

**Recommendations**

Although there are many stakeholders who could play a role in the lives of the youth in Kabarole District, not all were active. This paper recommends that the youth, as the primary stakeholder in their own affairs, could take advantage of the available education and training opportunities, make deliberate efforts to avoid risky behavior and have a positive attitude towards work. However, to do this, they next a favourable context which can be provided by several other stakeholders. These include the central government of Uganda and the district local government in Kabarole. These could provide adequate financial support to the sectors that offer services to the youth. Agencies of the government such as the ministries of Health; Justice; Education; Gender, Labour and Social Development; and others like the Human Rights Commission could play their specific technical roles too.
For example, the Ministry of Health could ensure the availability of youth-friendly services at the health units. Key services to be prioritised are reproductive health and counselling. The Ministry of Justice and the Human Rights Commission could ensure the security of the youth by being vigilant in protecting their legal rights. The Ministry of Education could emphasise training of youth in courses that lead to future job markets. It could also consider introducing on a compulsory basis those subjects that improve the discipline and moral values of the students into school curricula from the lower levels. Vocational training could also be emphasised and made universal.

Parents and guardians also need to ensure that their children are given adequate parenting. This needs to start with child-to-parent dialogue at domestic level. Political leaders in the district and at national level need to have youth issues prioritised in planning for their areas.

Teachers also play an important role in the lives of the youth in schools, because they spend much more time with them than the parents. Therefore, the teachers need to be facilitated but also supervised to become correct role models for the youth. They can also be trained in counselling. Similarly, health workers need to ensure that the youth are provided with good quality services which are friendly to them. This builds the trust of the youth and encourages them to utilise the services early in order to avoid complications and disability. In addition, they need to provide health promotion at all opportunities. The basic package of youth-friendly services offered needs to take into account the expectations of the youth as outlined earlier. Such services need to be extended to in-school and out-of-school youth without discrimination.

Social workers
The social workers could play a big role in handling the social issues of the youth. They could give youth issues a priority, they could advocate for youth services in their areas of service.

Religious leaders of all denominations and sects could also help the youth to be morally upright. They could do this by having special programs specifically targeting the youth. Finally, non-governmental organisations have already started some work. They could expand the geographical and technical scope of their services. They could also consult the youth in formulating their programmes targeting the youth.

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