

20.0 RECOMMENDATIONS

These recommendations are additional to those made elsewhere in the report.

1. That DGIS continue to support IPSER activities in Uganda. This recommendation is made because:

a) There is a manifest, though unquantified need for psycho-social counselling services of war-traumatised refugees in Uganda.

b) It is widely recognised among clients, those who have been trained, the refugee community, agencies and the local government organisations that IPSER's activities are necessary and effective in improving the mental health of refugees.

c) Psycho-social counselling is desirable on humanitarian grounds. It is also effective in helping achieve self reliance among the settled refugees.

d) In the opinion of the team, traumatic conditions do not ameliorate without treatment.

e) No other organisation that could satisfy the need which exists in northern Uganda.

f) Though IPSER has had a troubled history in Uganda, the team is satisfied that more recently their operation has been on a firmer footing, IPSER is becoming more professional and their effectiveness is increasing.

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However, this further support can be justified only if further progress is made in a number of areas listed below. To ensure that this progress has been made. It is recommended that:

2. A further brief mission investigates IPSER's organisation and activities in (say) three months time.

3. IPSER should seek quickly to negotiate a Memorandum of Agreement with UNHCR and the Government of Uganda.

4. IPSER's vision, policies, objectives and strategies need to be clarified and made more explicit, with the setting of short, medium and long term targets. The use of a logical framework analysis would be helpful in setting and achieving these targets.

5. The IPSER Project Director/Country Co-ordinator in Uganda should be provided with a contract long enough to allow the continuity of direction that has hitherto been lacking. This should be for one year in the first instance. In order to allow the development of the project, the Project Director/Country Co-ordinator should be supported in making significant decisions on the direction of the project.

6. IPSER should urgently address the issue of long term sustainability. The team acknowledges that to a considerable extent, sustainability involves factors outside IPSER's control, particularly in matters of funding. The team considers that it would be more appropriate to direct counselling activities towards social services than towards medical services, though of course referrals of severe cases to medical services for treatment is necessary. In this context, the location of an IPSER office in the proposed psychiatric wing of the Adjumani hospital would be undesirable. IPSER needs further discussions with local government in order to achieve a platform for sustainability.

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In particular IPSER needs to discuss with local government the possibility of counsellors achieving qualifications that would be recognised by the GoU.

7. Prospects for the sustainability of the project's activities would be enhanced by long term contracts and conditions of employment (say two years) for key expatriates, particularly the country Project Director and Child Psychologist. The latter is currently employed on a small volunteers allowance.

8. IPSER should continue to be involved in research in Uganda. However, the research should directly support IPSER activities in the field. Research results should be rapidly made available in an accessible form to the team at field level and the programme modified in the light of these results. Specific research is needed on the level of need in the community as a whole and in vulnerable groups within the community. Research is also necessary on the effectiveness of IPSER counselling activities.

9. IPSER should make greater use of group counselling, though continuing with individual counselling. IPSER should build on the success of some of the existing group counselling sessions and seek to make use of already existing community groups.

10. Further development of the skills of trainers and counsellors is necessary. This can be achieved by:

- a) Training in communication skills.
- b) Training in group mobilisation.
- c) Improvement to library resources at Kampala office and field offices.
- d) Improvement to pedagogic methods.
- e) Better provision of supplementary materials for trainees. Provision of computers to field offices should facilitate this.

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11. Recording and reporting of activities, while improving, are not yet of sufficient quality. In particular, records should allow detailed analysis of client caseload and analysis of the effectiveness of activities.

12. Storage of records should be improved by the use of lockable storage cabinets.

13. On ethical grounds, the storage of counsellors client records should be in cabinets accessible only to the counsellors.

14. Office organisation needs to be improved. This necessitates the provision of a small amount of additional office equipment. The team was informed that the field offices were to be supplied with computers and that training in the use of these computers would be provided. This is an urgent need. Small photocopiers should be provided for field offices.

15. The employment of a secretary at Kampala office is recommended. This is necessary to provide a permanently manned office and would allow the Accountant/Administrator to spend some time supervising and strengthening the organisation of field offices. This increase of responsibility for the Accountant/Administrator should be contractual and financially compensated.

16. Secure storage of drugs and effective in/out and monitoring procedures for drugs need to be established.

17. Transport needs to be strengthened. It is essential that each field office should have at least one functioning vehicle. IPSER should consider the provision of additional motorcycles for trainers and counsellors particularly those who have to cover large areas.

18. A small budget should be made available for the provision of materials to facilitate group work.

(End p60)