

African Centre for Treatment and Rehabilitation of Torture Victims (ACTV)

A WORLD FREE FROM TORTURE



Chairperson's Message



Eng. Dr. Moses Musaazi Chairperson, Board of Directors

I am glad to report that ACTV was able to surpass the 2015 Strategic Plan target of registering new survivors of torture who received our services.

African Centre for Treatment and Rehabilitation of Torture Victims (ACTV) is pleased to bring to you the 2014 Annual Report. The aim is to share what we have been able to achieve in our effort to provide holistic quality treatment and rehabilitation to survivors of torture at both our centres located in Gulu and Kampala as well as the lessons we have learnt, the challenges and our future plans in the effort to attain our strategic objectives.

First and foremost, I wish to express my heartfelt thanks to all staff of ACTV who contributed their knowledge, experience and time to ensure that survivors of torture receive quality treatment and rehabilitation services as a way of restoring their hope and productivity for the benefit of their families and of society at large. I also wish to thank our development partners, especially the Democratic Governance Facility, the European Union, Sigrid Rausing Trust, the Fund for Global Human Rights, the Open Society Initiative for Eastern Africa, the International Rehabilitation Council for Torture Victims, the United Nations Voluntary Fund for Victims of Torture and the Centre for Victims of Torture, for the financial and technical support. I must acknowledge the role of the strong systems that we have been able to put in place to ensure that the organisation achieves her core objectives.

In 2014, we achieved major milestones. I am glad to report that ACTV was able to surpass the 2015 Strategic Plan target of registering new survivors of torture who received our services. The cumulative total of the served survivors of torture reached 5,286, surpassing the Strategic Plan target of 5,000 by 286 (5.7%). In 2014, 1,694 clients received rehabilitation services: physiotherapy (463); psychotherapy (427); legal advice and support (322); psycho-social support (324); and referrals (158).

Advocacy also continues to be a critical area of our engagement. In that respect, community awareness campaigns were carried out among prison personnel and inmates, members of the security forces, medical and legal professionals and communities.

Despite these achievements, torture continues to be a major challenge. The Uganda Human Rights Report (2014) shows a 30.76% increase in reported cases of torture in 2014 as compared to 2013. Government institutions charged with the protection of human rights continue to lead the list of alleged perpetrators, which is disquieting.

This has informed our increased focus on sensitisation and training of the Uganda Police Force, the Uganda Prisons Service and the Uganda People's Defence Forces. There are also challenges posed by insufficient resources to increase our outreach programmes and client reviews, which have also contributed to inadequacy in staffing in critical areas, especially psychiatry, physiotherapy and psychotherapy among others. With enhanced resource mobilisation strategies and support from development partners, as well as central and local governments, ACTV hopes to overcome these challenges.

I wish you enjoyable reading of this report and welcome any positive and constructive criticisms that you may have.

Eng. Dr Moses Musaazi Chairman, Board of Directors

Chief Executive Officer's Message



Samuel Herbert Nsubuga Chief Executive Officer

the treatment and rehabilitation capacity of ACTV staff has been strengthened, especially in the area of mental health, to deal with interventions in the area of psychological treatment of survivors of torture.

Let me begin by thanking all of you for the support you gave in your diverse capacities in 2014 that enabled ACTV to realise its mandate.

The focus was on creating awareness about the Anti-Torture Law so that it is implemented effectively, including continuing treatment and rehabilitation of survivors of torture, not only Ugandans but also refugees from neighbouring countries, the majority from the eastern region of the Democratic Republic of Congo.

As we approach the tail end of the ACTV 2011-2015 Strategic Plan, the impact of our interventions is now being strongly felt. Proof of this is that torture is now the second most reported human rights violation after detention beyond 48 hours, as attested by statistics presented by the 2013 and 2014 Annual Reports of the Uganda Human Rights Commission. This illustrates that our advocacy has taken root and the Prevention and Prohibition of Torture Act, 2012(Anti-Torture Law), which principally says that every perpetrator will be liable, makes them conscious of their actions.

In addition, the treatment and rehabilitation capacity of ACTV staff has been strengthened, especially in the area of mental health, to deal with interventions in the area of psychological treatment of survivors of torture.

Last but not least, a simplified, easy-to-read English version of the Anti-Torture Law with illustrations is now available to target everyone in creating awareness of this law. This will greatly assist the general public in knowing about the Anti-Torture Law, which plans are underway to translate into a number of local languages, to enable us to utilise it in our collective quest towards our Vision of a 'World free from Torture'.

We thank all our stakeholders, namely the development partners, members of the Coalition against Torture, the Uganda Human Rights Commission, civil society organisations, members of the Justice, Law and Order Sector and government entities we have worked with in our continued quest to get rid of and prevent torture. We remain eternally grateful to you all.

Last but not least, I thank the Board Members of ACTV for the wisdom and guidance accorded to me and the organisation and also remain eternally grateful to the staff for an excellent job done in 2014.

Samuel Herbert Nsubuga Chief Executive Officer

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Abbreviations and Acronyms

ACTV	African Centre for Treatment and Rehabilitation of Torture Victims
CAT	Coalition Against Torture
CAR	Central African Republic
CSO	Civil Society Organisations
CVT	Center for Victims of Torture
DGF	Democratic Governance Facility
DRC	Democratic Republic of Congo
EU	European Union
FDLR	Forces for the Liberation of Rwanda
FGHR	Fund for Global Human Rights
HIV	Human Immuno-deficiency Virus
IRCT	International Rehabilitation Council for Torture Victims
JLOS	Justice, Law and Order Sector
JRS	Jesuit Refugee Service
LASPNET	Legal Aid Service Providers' Network
LRA	Lord's Resistance Army
MIS	Management Information System
MoJCA	Ministry of Justice and Constitutional Affairs
NGO	Non-Governmental Organisation
PPTA	Prevention and Prohibition of Torture Act
PTSD	Post-Traumatic Stress Disorder
RRU	Rapid Response Unit of Police – now the Special Investigations Unit (SIU)
SOT s	Survivors of Torture
UGX	Uganda shilling

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- UHRC Uganda Human Rights Commission
- UPF Uganda Police Force
- UPS Uganda Prisons Service
- UPDF Uganda People's Defence Forces
- UNCAT United Nations Convention against Torture
- UNNGOF Uganda National NGO Forum
- UNOHCHR United Nations Office of the High Commissioner for Human Rights
- UNVFVT United Nations Voluntary Fund for Victims of Torture
- VCCU Violent Crime Crack Unit

Executive Summary

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The report presents the various activities that were implemented in 2014 under the four strategic objectives, namely: providing quality holistic treatment and rehabilitation services to survivors of torture; advocating the prevention of torture and provision of services to survivors of torture; gathering information on torture and documenting best practices in the delivery of services; and strengthening the organisational and institutional capacity of ACTV to deliver on its mandate.

During 2014, ACTV has been able to meet the five-year(2011-2015) strategic plan targets, reaching a total of 5,286, against the strategic plan target of 5,000. Accordingly, 1,694 clients received rehabilitation services: physiotherapy (463); psychotherapy (427); legal advice and support (322); psycho-social support (324); and referrals (158). Advocacy also continues to be a critical area of our engagement. Community awareness campaigns were carried out among prison personnel and inmates, members of the security forces, medical and legal professionals and communities.

Through the use of the management information systems (MIS) it has been confirmed that ACTV activities have led to great improvements in the lives of survivors of torture, with indications of a significant decrease of symptoms of post-traumatic stress disorder, depression and other clinical concerns. Psycho-social services provided by the ACTV social workers, such as counselling, have led to improvements in the general functionality of the clients' lives. ACTV has increased public awareness against torture in the country through the various media campaigns.

Key lessons have been learnt through experience in the course of implementing activities related to the treatment and rehabilitation of torture victims. The outreach service delivery approach to prisons and communities and the referral systems are key to increasing access by torture survivors to ACTV services. Many of the torture survivors who are Ugandan nationals are in prisons, hence the need to expand the prison outreach programme. Most of the female clients who accessed ACTV services were urban refugees and most reported to have experienced sexual gender-based violence.

Despite the achievements presented in this report, there exist a number of challenges that need to be addressed. The major challenges include inadequate follow-up services to survivors of torture in the prisons, inadequate staffing within the mental health units, which affected the ability of ACTV to offer psychotherapy services to survivors of torture, especially at the Gulu centre, and high operational costs registered during the reporting period partly as a result of using the old project vehicle, also at the Gulu centre.

1.0

INTRODUCTION

Torture continues to be a major human rights challenge in Uganda. Various strategies have been put in place to reverse or eliminate torture, as evidenced by the passing of the Anti-Torture Bill into law. This law is the Prevention and Prohibition of Torture Act (PPTA), 2012, which stipulates that any person convicted of an act of torture faces up to 15 years in prison, a fine of UGX 7.2 million (\$2,860), or both. The penalty for aggravated torture is life imprisonment. Serious cases of torture continue to be reported and state agencies, namely the Uganda Police and the UPDF, are the alleged major perpetrators. The challenge is that the majority of cases of torture allegedly perpetrated by the state agencies are not prosecuted through the judicial system because these agencies argue that they have internal disciplinary mechanisms to handle torture allegations. In 2014, ACTV continued to play an important role in the treatment and rehabilitation of torture survivors. This report highlights our key achievements in the four thematic areas of holistic care, advocacy, research and documentation, and organisational strengthening. The report further documents key challenges and lessons learnt.

1.1 Our Work

ACTV is the pioneer provider of services to survivors and victims of torture in Uganda. ACTV is accredited by the Ministry of Health to operate a medical referral centre that provides physical and psychological care that supports the process of rehabilitation of survivors of torture by security agencies or by rebels in Uganda and the neighbouring countries.

1.2 Our Vision

A World free from Torture

1.3 Our Mission

Provision of quality holistic care to survivors of torture from the state, security agencies and armed groups.

1.4 Our Programmes

Our work is organised in four thematic areas:

- a) **Holistic care:** Providing quality holistic treatment and rehabilitation services to survivors of torture.
- b) **Advocacy:** Advocating the prevention and end of torture internationally, regionally and nationally.
- c) **Research and documentation:** Gathering information on torture and documenting best practices in the delivery of services through research work and surveys. This thematic area is also charged with monitoring and evaluating services to survivors of torture for improvement in service delivery.
- d) **Organisational strengthening:** Strengthening the institutional and organisational capacity of ACTV to deliver on its mandate.

2.0 QUALITY HOLISTIC TREATMENT AND REHABILITATION

To provide quality holistic treatment and rehabilitation services to survivors of torture

ACTV committed itself to providing quality holistic treatment and rehabilitation services to at least 5,000 new torture survivors between 2011 and 2015. ACTV is glad to report that it was able to meet all the targets/commitments for this strategic objective which included:

- i. Receiving and treating 1,000 new survivors of torture by the end of 2014.
- i. Providing physiotherapy treatment to 500 new survivors of torture.
- ii. Providing psychological rehabilitation to 500 new survivors of torture.
- iii. Providing psycho-social support to 180 new survivors of torture.
- iv. Providing legal assistance to 200 new survivors of torture.

2.1 To Receive and Treat 1,000 New Survivors of Torture by the End of 2014

In 2014, ACTV's target was to receive and treat 1,000 new survivors of torture but it was able to serve 1,154 new survivors (115.4%) and the strategic plan target of 5,000 SOTs was surpassed with a year to go. Table 1 presents the breakdown of survivors received.

Gender						Ка	mpala	Kampala Centre	¢					
	Jan	Feb	Mar	Apr	May	unc	Jul	Aug	Sept	Oct	Nov	Dec	Total	%
Male	9	30	71	62	53	19	20	Ħ	20	17	5	4	318	56
Female	4	35	43	26	27	25	13	10	19	20	27	£	254	44
Total	10	65	114	88	80	44	33	21	39	37	32	ດ	572	100
							Gulu centre	entre						
Male	21	80	43	15	44	36	48	93	00	13	43	45	489	83.2
Female	26	0	ო	0	23	0	0	19	-	12	0	თ	93	16.8
Total	47	80	46	15	67	36	48	122	6	25	43	54	582	100
Grand Total	57	145	160	103	147	80	81	143	48	62	75	63	1154	100
Source: ACTV MIS, 2014	MIS, 20	<u>)</u> 14												

The Gulu centre registered the biggest number of torture survivors, at 582 (50.4%), while the Kampala centre received 572 (49.6%). The majority of the survivors at both centres – 802 (69.4%) – were males. There was a decline in the number of new clients registered in 2013 by 30.6%. This was attributed to relative stability in the Great Lakes region and the defeat of the Lord's Resistance Army (LRA) in Northern Uganda.

Graph 1 below shows that ACTV has been able to surpass the annual targets of 1,000 survivors every year since 2011. In 2014, the cumulative total of the served survivors of torture reached 5,286, surpassing the strategic plan target of 5,000 by 286 (5.7%). This was a great achievement and is attributable to ACTV's multi-approach response of combining community outreach, prison outreach and walk-ins. The use of community awareness and media campaigns has also been of great significance in enabling many torture survivors to access ACTV holistic services.



Graph 1: Trends in registration of new torture survivors

Figure 1 above shows that ACTV has been able to surpass the annual targets of 1,000 survivors every year since 2011. In 2014, the cumulative total of the served survivors of torture reached 5,286, surpassing the strategic plan target 5,000 by 286 (5.7%). This was a great achievement that resulted from ACTV's multi-approach response of combining community outreach, prison outreach and walk-ins. The use of community awareness and media campaigns has also been of great significance in enabling many torture survivors to access ACTV holistic services.

Source: ACTV MIS, 2011, 2012, 2013, 2014

2.1.1 Age stratification of new clients

The youth continue to be the most affected age group, with 19-35 years being the most susceptible age group. In 2014, ACTV registered 1,154 new clients, of whom 931 (80.7%) were in this bracket. This age group is the most affected by socioeconomic factors related to unemployment, which forces the youth on the streets, thus participating in riots and engaging in vices such as theft.

Age	0-9	10-18	19-25	26-35	36-45	46-55	56-65	66-75	76-85	DK	тт
Male	3	47	206	299	143	70	23	8	1	2	802
Female	5	20	76	125	82	28	11	3	0	2	352
Total	8	67	282	424	225	98	34	11	1	4	1,154

Table 2: Age stratification of new clients

Source: ACTV MIS, 2014

2.1.2 Nationalities of clients

The majority of the clients served were Ugandan nationals and refugees mainly from the Great Lakes region, including Congolese from the DRC, Ethiopians, Eritreans, Kenyans, Tanzanians, Burundians and Rwandese. The community outreach programme for urban refugee centres together with the effective referral system between ACTV and partners such as HIAS Refugee Trust of Kenya (HRTK), Jesuit Refugee Services, Refugee Law Project and Bondeko, has continued to ensure that urban-based refugees who are survivors of torture access ACTV services.

Table 3: Nationalities of clients

N/s	Country	Number of new survivors registered	%	Ugandans made the
1	Uganda	804	69.7	biggest number of
2	DRC	316	27.3	new clients (69.7%
3	Somalia	13	1.1	registered), followed by DRC (27.3%) of the
4	Rwanda	6	0.5	registered new clients.
5	Burundi	5	0.4	This trend has been the
6	Ethiopia	4	0.4	same for the last two
7	Eritrea	2	0.2	years owing to mainly the instability in the
8	Sudan	2	0.2	Great Lakes Region
9	CAR	1	0.1	which has impacted
10	Kenya	1	0.1	primarily the eastern
Total		1,154	100	part of the DRC.

Source: ACTV MIS, 2014

2.1.3 Alleged perpetrators

State agencies, security operatives and militia associated with the state continue to be the major perpetrators of torture, which has informed ACTV's effort to focus on creating awareness among the security agencies. According to the statistics in Table 4, the Uganda Police Force constituted 35% of the perpetrators. This shows that ACTV needs to invest more in sensitisation and creating awareness amongst the Uganda Police Force. There is a significant reduction in the reporting of LRA as perpetrators from 510 cases in 2013 to 223, which is attributed to continued inaction of LRA in Northern Uganda. It is now alleged that the LRA commits atrocities in the DRC and CAR. However, the new cases of SOTs continue to be reported, especially those related to long-term consequences that need psychological treatment and rehabilitation. The war in the DRC also continues to contribute significantly to the torture problem as 14.06% of the alleged perpetrators were DRC militia, 8.24% were M23 and 0.3% were related to the Nkunda militia. This is indicated in Table 4 below.

Alleged perpetrators	Frequency	%
Uganda Police Force	463	35
Lord's Resistance Army (LRA)	223	16.86
DRC militia	186	14.06
M23	109	8.24
Uganda People's Defence Forces (UPDF)	67	5.06
Local Defence Units	45	3.4
Prison warders/wardresses	42	3.17
Local Councils	32	2.4
RRU	29	2.2
Inmates/Katikiros	22	1.7
Mai Mai (DRC)15		1.1
Unknown group	14	1.06
Crime preventers	13	0.98
Democratic Forces for the Liberation of Rwanda (FDLR)	9	0.68
Rwandan government	8	0.6
Military Police	5	0.38
Chieftaincy of Military Intelligence	5	0.38
Security (unspecified)	5	0.38
Joint Anti-Terrorism Task Force	4	0.3
Nkunda rebels	4	0.3

Table 4: Alleged perpetrators, 2014

Burundian government	4	0.3
Sudanese militia	4	0.3
Ethiopian government	3	0.23
Kampala City Council Authority (KCCA) law enforce- ment officers	3	0.23
Private persons	3	0.23
Eritrean government	2	0.15
Wildlife Authority personnel	2	0.15
Interahamwe	1	0.08
Central Africa Republic (CAR) government	1	0.08
Totals	1,323	100
Courses ACTV MIC 2014		

Source: ACTV MIS, 2014

2.1.4 Client reviews

ACTV continued to carry out routine reviews of old and new clients. The reviews served to monitor progress and aid in the administration of appropriate corrective therapies physiologically and psychologically at different levels of treatment. Client reviews are carried out at the centre clinics and through the outreach strategy in the community, inclusive of community outreach and visits to client homes to improve access and aid full recovery. In 2014, 1,523 reviews were carried out, 906 at the Gulu centre and 617 at the Kampala centre compared to 1,772 clients reviewed in 2013. There is still need to enhance a follow-up outreach strategy to obtain more reviews. Currently, reviews are carried out co-currently with the registration of new clients and the number of reviews remains limited.

Table 5: Client reviews

Client reviews	Kam	pala	Gι	ılu	GT	%
	Reviews	%	Reviews	%		
Males	334	54.1	620	68.2	954	62.6
Females	283	45.9	286	31.5	569	37.4
Total	617	100	906	99.7	1523	100

Source: ACTV MIS, 2014

2.1.5 Client access to ACTV services

ACTV uses diverse approaches to reach out to SOTs that require our services. The main strategies used by ACTV are community outreach, prison outreach, referrals from partners and self-walk-ins to the two sites, Gulu and Kampala. Data shows that the majority of clients from the Gulu centre were accessed through prison outreach.

These constituted 73.9% of the clientele. These were followed by clients accessed through community outreach, who made up 23.4% of the clientele. For the Kampala centre, referrals from partners were the major site of contact, constituting 51.1%, followed by prison visits, which constituted 33.7%. Most referrals were made by HIAS, Refugee Law Project, Jesuit Refugee Centre and the Bondeko community centre. This trend was similar to that of 2013, where 290 out of 852 SOTs served at the Gulu centre were accessed through prisons while 476 out of 811 SOTs served at the Kampala centre were referrals.

The limited number of walk-ins is of concern because with community awareness, ACTV expects an increased number of SOTs to seek services. This state of affairs may be attributed to stigma and fear among the SOTs in the community, a result of the torture experience they went through, which prevents them from seeking services. ACTV will seek to strengthen the grassroots sensitisation regarding its services as well as building working relationships with various partners.



Graph 2: Distribution of client sites of contact for registered new clients

2.1.6 Prison visits

As indicated in Graph 2 above, 54% of the new registered clients were accessed through the prison outreach programme conducted by personnel from both centres. The Gulu centre was able to provide outreach services to seven prisons within

Source: ACTV MIS, 2014

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Northern Uganda, namely Gulu Central, Gulu (Female), Loro, Kinene Farm, Erute, Pader and Kitgum, while the Kampala centre reached three prisons – Bushenyi in Western Uganda, and Kigo and Nakasongola districts in Central Uganda. The general incidence of torture in prisons has greatly reduced and the majority of the survivors of torture (SOTs) were tortured prior to being committed to the various prisons, allegedly by the police and members of the public, who have recently taken up the practice of mob justice. However, in some of the prisons the team visited, they noted that there were still cases of torture by *Katikiros* and some prison warders, who administered corporal punishment in the form of caning. This matter was raised with the officers in charge of those prisons who, in turn, promised to investigate and take appropriate action.

2.1.7 Alleged reasons for torture

ACTV profiled the major reasons for torture. The majority (42.3%) of the SOTs who registered with ACTV were accused of engaging in criminal activity. Such people usually suffer from torture at different stages, beginning with mob justice at community level, then police custody and then in prison. Most of the tortured are suspects and the acts of torture are perpetrated by the community through mob justice, in police custody and in prisons. Survivors of rebel atrocities are the second most seriously affected category. Although the war in Northern Uganda has stopped, there are still survivors of torture coming up for service, primarily to deal with the psychological consequences of the war which at times take a number of years to manifest in the war survivors. Lack of stability in the DRC also continues to produce many survivors of torture.

Reasons	Kampala		Gulu centre		Total	0/
	М	F	М	F	Total	%
Human rights defenders	11	2	1	0	14	1.1
Political activity	41	15	2	0	58	4.4
Suspects	215	34	306	8	563	42.3
Rebels	81	101	84	96	362	27.2
Mistaken identity	12	14	26	0	52	3.9
Relationship with victims	38	109	6	0	153	11.5
Journalism	3	0	0	0	3	0.2
Sexual minorities	5	0	13	0	18	1.4
Engaging in public demonstrations	2	3	1	0	6	1.2
Rioting	6	0	0	0	6	1.2
Tribal conflicts	6	12	0	0	6	1.2
Religious conflicts	2	0	0	0	18	1.4
Land wrangles	36	0	35	0	71	5.3
Grand Total	458	290	439	104	1,330	100

Table 6: Reasons for torture in 2014

2.2 Quality Rehabilitation Services

ACTV provided five major quality rehabilitation services to SOT. New and old clients were able to access at least one or more rehabilitation service, namely: psychotherapy, physiotherapy, psycho-social support, legal advice and referrals. These are detailed in the graphs and tables below:



Graph 3: Number of clients offered rehabilitation services

Source: ACTV- MIS, 2014

2.2.1 Physiotherapy

Torture quite often results in life threatening impairments that necessitate corrective therapies to enable limb and other body-part movements function again. ACTV provided various physiotherapy services to 463 new and old clients, as compared to 694 SOTs in 2013. The services under physiotherapy include providing thoraclumbar corsets, lumbar sacral corsets, crutches, cock-up splints, knee braces, elbow crutches, auxiliary crutches and shoe raises.

2.2.2 Psychotherapy

Torture also poses grave mental challenges to the survivors. ACTV prioritises psychotherapy in order to address such mental challenges as a means of comprehensive rehabilitation. In 2014, ACTV provided 427 SOTs with psychotherapy services such as psychological counselling, family therapy sessions and occupational therapy in various areas, as compared to 401 served in 2013.

Psychological counselling

All new clients were assessed for psychological problems in one or more sessions. They were taken on for psychological counselling through the reviews. The main psychological ill health symptoms included depression, sex-related deficits, anxiety and PTSD. The clients whom the trauma counsellor counselled presented psychological issues such as nightmares that were occurring frequently, intrusive thoughts, flashback, mood swings, hopelessness, sex abuses in the form of rape, psychosomatic stress disorders, anxiety disorders and lack of basic needs that was disabling them mentally. The majority of the clients were refugees from Ethiopia, Congo, Eritrea and Rwanda.

Group psycho-education

ACTV, in collaboration with HIAS Uganda, conducted a one-day psycho- education workshop for a group of 50 clients at HIAS Uganda. The purpose was to provide education to survivors of torture living with cognitive, emotional and behavioural disturbances. The sessions targeted clients who were survivors of torture and trauma. The four sessions addressed the following: Introduction to the concept of trauma; coping strategies; social support; and yoga. After benefiting from the support, some of the clients had this to say:

'The training has helped me get inner peace....and how to get out of self-pity...I will go and help others' – Mama Nicole Kabale

'The stress we go through as survivors of torture is tremendous...I have learnt how to relieve my stress through yoga but I will also go back and help other women who are in the Somali Community Women Volunteers since I am the vice president of the group and we meet every Sunday...' – **Sofia Mire Jimale**

Family sessions

Two family therapy sessions were conducted by ACTV for two clients and their families who had been tortured. The first family therapy was for a couple who had been tortured and the wife raped. The couple had seven children and the entire family was traumatised as a result of what they had gone through in the DRC. The second family therapy session was organised for a family of 18 members comprised of two brothers, their wives and children who had experienced torture in Rwanda. The family was experiencing conflicts amongst themselves resulting from such a big family living in a confined space, coupled with the trauma undergone in Rwanda. By the end of the sessions, the families were happy to start a new chapter in their lives and developed strategies to cope with the current and emerging challenges. During the sessions, the children were excited to see smiles in their parents' eyes, something that had not been common prior to the family sessions.

Occupational therapy

ACTV trained 15 female survivors of torture from the DRC in a six-month tailoring skills initiative at the Bondeko centre. This initiative has not only imparted skills to the trainees but also contributed to improvements in their psychological wellbeing and facilitated them in rebuilding their lives.



The ACTV Programme Manager handing over a certificate to one of the students who successfully completed the six-month tailoring course

Given the DRC after fleeing from conflict. Her home was attacked and the family members were not only tortured but fled in various directions. Gloria ended up in Uganda, where she lived with the wife of an uncle because she had separated with her parents while younger, and till now she does not know where they are. She never went to school, was always idle and in deep thought about the whereabouts of her parents.

One day in July 2014, a family friend told her about the tailoring course at the Bondeko centre and asked if she could be interested. She replied that she was because she was idle and learning a new skill would be good for her. When Gloria reached the school she saw that everything was good, and she was never asked for anything before she could start training.

Gloria joined the tailoring classes and was a regular student. She was required to attend three days a week for a period of six months. The class was made up of fellow Congolese women with similar challenges. She was trained in basic tailoring skills, designing and how to operate tailoring machines. Gloria says that the classes were very interesting and provided her with a place where she could stop worrying about her parents and engaged in a lot of fun.

After the six months of training, Gloria was able to make skirts, dresses and shirts, something she had not been able to do before. The training also ensured that she was occupied with something and took away the boredom she used to have. Gloria had got a job to make clothes in the town but was not able to maintain the job because it paid only 500/=, which was too little for her. Now she is looking for a better job as she looks forward to acquiring her own sewing machine to be able to set up her own business, a plan she had before she attended the training. Below is Gloria.



Gloria (above, left) giving a speech on behalf of fellow participants during the graduation ceremony

2.2.3 Psycho-social support

ACTV reached 324 survivors of torture with psycho-social services that included counselling, training of 10 peer support workers, the formation of social support groups, PSW support supervision and group follow-up.

Training 10 peer support workers (PSWs)

ACTV trained 10 peer support workers to offer basic counselling to victims and survivors of torture. These PSWs were carefully selected and equipped with skills to enable them to receive and offer guidance in addition to basic counselling to those in need within the refugee centres. Apart from basic counselling skills, the participants were also empowered to manage their own recovery but also that of other survivors of torture in their localities. As a result of this training, the peer support workers have been able to create groups in their communities and provide support to other survivors of torture within the communities.

Healing daughter using basic counselling skills

Through the training Client X was able to acquire the knowledge and skills required to help victims of torture and sexual violence. After the training she was able to help many of the survivors who presented with psychological symptoms that needed attention, one of whom was her daughter, aged 20, who had been gang-raped by six men in the DRC in 2011.

This young woman had been living with her uncle; and the sexual attack resulted in pregnancy. When the woman came to Uganda in 2014, she joined her mother. Because Client X had gone through the peer support worker training, she was able to recognise that her daughter had a problem and she started engaging her. The daughter presented with signs of depression, she could confine herself inside the house for long periods of time because she feared seeing men, and she hated the child that had resulted from the rape, had a tendency to wake up in the night shouting and also phobia for the dark.

Client X was able to start holding sessions with her daughter and also made a referral to qualified counsellors to come and intervene in her daughter's situation. She regularly held two counselling sessions a week with her for six months and a change was realised in her. Currently, though she still fears the dark, she no longer hates her child and has no fear of men. She is also now able to go out and wash clothes for the neighbours to earn a living.



Client X, a Peer Support Worker (PSW) with daughter in Black Blouse.

Formation of social support groups

As a means of providing psycho-social support to survivors of torture, the peer support workers formed three social support groups, with each group comprising 10 members. The groups have provided social support to each other and have also established a savings scheme to boost their incomes. These groups have been provided with psycho-social counselling by the social workers on a monthly basis.



An ACTV social worker facilitating formation of social support groups in Kampala

2.2.4 Legal services

The legal department of ACTV provides legal support to clients, both nationals and refugees, but does not litigate for clients in court. ACTV provided legal support to a total of 322 SOTs, including 251 from the Gulu centre and 71 from the Kampala centre. In 2014, the legal department attended 28 tribunal cases in the capacity of expert witness in the Kampala regional office of the Uganda Human Rights Tribunal, and one tribunal case, which is still at the hearing stage, in the Jinja regional office. ACTV is supporting three public litigation cases with the help of an advocate in private practice. The first court case is *Jasper Natukunda v. Attorney General & Ruhunde Christopher*, a police officer, HCCS 1/14 at Kampala Civil Division, which moved to Mbarara as HCCS 1/14 at Mbarara, then to Kabale as HCCS 2/15 at Kabale. The second case is HCMC 77/14 *Ahimbisibwe Moses*, a civilian, and it is before the General Court Martial. The third case is HCMC 78/14 and HCMC 79/14 *Mutsunga Ali & Lubega Patrick*. All these matters are still ongoing and before court and we anticipate a positive outcome from this cause.

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ACTV is also funding *Mulindwa Mukasa v. Julius Caesar Tusingwire* in the High Court – Civil Division for purposes of legal advocacy on torture and the case is at the hearing stage. ACTV, through its legal office, has been able to create linkages to enable easy accessibility of legal representation to the clients who access our office for assistance as a form of rehabilitation.

2.2.5 Referrals

During the reporting period, 158 clients were referred for specialised treatment to other medical centres. ACTV uses referrals to ensure that the SOTs served receive services that cannot be obtained from ACTV centres owing to being an out-patient facility and some cases, requiring specialised interventions.

Services	Kampala centre	Gulu centre	То	Total	
Laboratory investigations	20	1	21	13.3	
Radiology	80	-	80	50.6	
ENT	6	-	6	3.8	
Psychiatry	2	2	4	2.5	
Gynaecology	1	0	1	0.6	
Neurology	1		1	0.6	
Dentist	-	1	1	0.6	
Orthopaedic	-	1	1	0.6	
HIV	7	-	7	4.4	
Scan	-	2	2	1.3	
Psychological	7	-	7	4.4	
Small operations	2		2	1.3	
Surgeon		7	7	4.4	
X-ray		12	12	7.6	
Physician	2	4	6	3.8	
Total	128	30	158	100	

Table 7: Referrals for specialised care

f the referrals made, 50.6% clients were for radiology services, followed by 13.3% who were referred for laboratory investigations. Most of the referrals (128) were made by the Kampala centre. It should be noted that some of the services are expensive and impact greatly on the resources tagged to medical treatment.



One of the clients referred for orthopaedic services at CORSU Medical Centre

3.0 ADVOCACY AND NETWORKING

To advocate the prevention of torture and provision of services to survivors of torture

ACTV implemented various advocacy and networking activities in 2014 under strategic objective two – To advocate the prevention of torture and the provision of services to survivors of torture. The ACTV commitments for 2014 under advocacy and networking were: to increase the number of security officers trained in the prevention of torture; to influence the enactment of laws and policies advocating against torture and for services to survivors of torture; and to increase access to legal remedy for survivors of torture.

3.1 Community Awareness and Sensitisation

Community awareness and sensitisation is an important strategy in the prevention of torture and rehabilitation and treatment of survivors of torture. ACTV organised various awareness and sensitisation sessions. A total of five sessions targeting 100 community members were planned for 2014 but we were able to surpass that since six sessions were conducted, reaching 1,550 community members who were sensitised in the districts of Kampala, Gulu, Pader and Mubende. This is summarised in Table 8 below:

Location	Category of persons	Persons reached
Kasokoso community – Kampala	Leaders and resource persons	30
Manyogaseka community – Mubende district	Leaders and resource persons	35
Gulu Central Prison	Prison inmates	972
Loro Prison	Prison inmates	146
Kinene Prison	Prison inmates	126
Kilak-Pader district	Community members, NGOs, resource persons	191
Grand Total		1,500

Table 8: Community awareness and sensitisation activities

Owing to these awareness and sensitisation sessions, an increase in the number of people seeking ACTV services has been realised.

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Community awareness session for community resource persons in Kasokoso – Nakawa division, Kampala

In addition to the community awareness sessions, ACTV was also involved in other community awareness activities, mainly the UN International Day in Support of Torture Victims and community dialogues on torture.

3. 2 Security Awareness-Prevention Session for Alleged State Perpetrators

The ACTV-MIS and the Uganda Human Rights Reports have continued showing that security agencies are the major perpetrators of torture in Uganda. ACTV, therefore, strongly values creating awareness within security agencies regarding torture and the existing laws against torture.

2014 Targets

- Conducting six human rights training sessions targeting 240 police officers.
- Conducting two human rights training sessions targeting other security agencies, mainly the army, CMI and the Uganda Prisons Service.
- Conducting three refresher monitoring and evaluation training sessions.

By the end of 2014, ACTV was able to conduct three awareness information workshops for security personnel drawn from the Uganda People's Defence Forces (UPDF) and

the Uganda Police Force, reaching 208 personnel (178 male and 30 female) in total. The officers' knowledge about the concept of torture and its consequences, including key provisions in the PPTA, 2012, was enhanced.

Location	Category of persons	No. of persons reached
Silver Springs Hotel – Kampala	UPDF Officers drawn from the Directorate of Human Rights, Political Commissars, intelligence officers, legal officers, and administrators from Central region	47
Kabalye Police Training School in Masindi	CMI recruits and new recruits of the Special Field Force Brigade (SFFB)	108
Moroto Barracks – UPDF 3rd Division Moroto	UPDF officers	54
Gulu Central Prison	Prison officers	54
Total		263

Table 9: Summary of security awareness sessions on torture conducted in 2014



ACTV staff facilitating one of the sessions during a security awareness workshop for the UPDF 3rd Division in Moroto Barracks

3. 3 Training of Legal and Medical Professionals in the Documentation of Torture Cases (Istanbul Protocol)

ACTV works closely with legal and medical professionals in the treatment and rehabilitation of torture survivors. One five-day training workshop was conducted in Gulu with the objectives of:

- i. equipping participants with knowledge of and skills in the documentation and investigation of torture.
- ii. raising awareness of the Istanbul Protocol guidelines on documenting and investigating torture.
- iii. facilitating the development of inter-professional working mechanisms and systems on torture.

ACTV employed the participatory approach while conducting this training which involved the administration of questionnaires to gauge levels of knowledge, lectures and presentations, group work and plenary discussions as a platform to synthesise information and 14 professionals (eight legal and six medical) were trained from various districts of Northern Uganda.



Medical and legal professionals during the Istanbul Protocol guidelines training in Gulu

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3. 4 Training of Magistrates

Judicial officers such as magistrates play an important role in the prevention of torture through giving punishments that serve as a deterrent to the torture perpetrators. ACTV, therefore, organised training for 31 magistrates (13 male and 18 female) from 30 July to 1 August 2014 at Ridar Hotel, Seeta, Mukono district, on the Anti-Torture Law and other international and regional law provisions on torture which complement Ugandan law. The training provided a platform for the dissemination and better understanding of the legislation on torture and related provisions in the constitution, UNCAT and its operational protocol. The training not only helped the participants to understand the legal provisions on torture but also the psychological component where the Istanbul Protocol was addressed. Both international and national instruments were reviewed and the magistrates were helped to better understand the PPTA, 2012. From the pre-workshop assessment, it emerged that none of the magistrates had ever been inducted into the PPTA, 2012 and had thus never used it in their work. The magistrates, therefore, appreciated the training and the copies of the Act which they were provided with.



Group presentations during the magistrates' training

3.5 Training of Health Workers

ACTV trained 19 health workers (five male and 14 female) from the districts of Luwero and Wakiso in a two-day refresher training session at Wakiso. The training was organised to enhance advocacy for services for torture survivors in the communities through refreshing the participants' knowledge on the following topics: concepts of torture and its consequences; skills of handling survivors of torture; skills of documenting torture; and the referral pathway.



A torture survivor sharing his experience with participants during health workers refresher training

3.6 Production of Information, Education and Communication Materials

Information, education and communication (IEC) materials play an important role in increasing awareness. ACTV embarked on a strategy of developing and distributing IEC materials concerning prevention of torture as well as the treatment and rehabilitation of survivors of torture.

Table 10: IEC materials distributed in 2014

SN	Item	Quantity
1.	Banners	7
2.	Calendars	150
3.	Branded pens	400
4.	Branded notebooks	400
5.	Branded badges	100
6.	Fact sheets	2,000
7.	Posters	2,000
8.	Brochures	2,000
9.	ACTV 2013 annual reports	1,000
10.	PPTA (Anti-Torture Law) booklets	3,500
11.	Simplified version of the PPTA	1,100

The distribution of IEC materials has increased community awareness, resulting in increased cases of torture being reported and survivors seeking treatment and rehabilitation from ACTV centres.



Examples of IEC materials that were developed, produced and disseminated to a wide range of stakeholders

3.7 Dissemination of the Prevention and Prohibition of Torture Act (PPTA), 2012

A popular version of the PPTA, 2012 was developed. A validation exercise was held with multiple stakeholders at a workshop held in Kampala. After a series of meetings, the simplified version was printed and up to 1,000 copies distributed to security officers, partner civil society organisations (CSOs), magistrates and medical practitioners.



3.8 The UN International Day in Support of Torture Victims, 26 June 2014

ACTV actively participated in the UN International Day in Support of Torture Victims that took place on 26 June 2014. Various activities were carried out in support of torture victims. Some of the activities carried out were:

Media campaigns: The media remains a strategic partner in the implementation of ACTV activities. A number of media activities were carried out in 2014 which are summarised in Table 11 below:

Table 11: Media activities conducted in 2014

SI	l Item	Quantity
1.	Radio talk shows	26
2	News/press releases	6
3	TV talk shows	3

NTV media campaign on torture: A three-week media campaign on torture and the law on torture was successfully conducted on NTV. This campaign was in response to the media coverage of the inter-tribal clashes in the Rwenzori region, which showed incidents of torture being perpetrated allegedly by the security agencies. The media campaign was aimed at sensitising the public to the vice of torture, providing information vital to accessing services from the state and civil society in the event of torture and other human rights violations as well as urging all stakeholders to implement the PPTA. The immediate result of the campaign was the new referral cases to ACTV from new sources, such as community-based organisations (CBOs) operating within Kampala. Secondly, many potential partners inquired for further details regarding our services.

Press conference: A press conference was held on 23 June 2014 at Nakasero Market, Kampala where a joint statement based on the 2014 theme, 'Fight Torture, Implement the Law', was conveyed in two languages (English and Luganda) by the acting chairperson of the Uganda Human Rights Commission (UHRC), Mr Agaba Maguru. The press conference was aimed at raising awareness about the day among the general public and journalists and to encourage them to fully engage in the planned activities to commemorate the day.

Commemoration and survivors' exhibition: A commemoration and survivors' exhibition were held at the Kampala railway grounds and Kaunda grounds in Gulu on 26 June 2014. The Kampala and Gulu events were led by the police and prisons brass bands respectively, and the commemoration events presided over by the Hon. General Aronda Nyakairima, Minister of Internal Affairs, and Mr Denis Awany, the Deputy Resident District Commissioner, Gulu, as chief guests in Kampala and Gulu, respectively. The Ambassador of the Netherlands to Uganda and the Resident Representative of the UN High Commissioner for Human Rights (UNHCHR) in Uganda represented the development partners. A cross section of participants were in attendance, ranging from government officials, representatives from CSOs, the media, faith-based organisations, to policy-makers, among others. The UHRC and other Coalition against Torture (CAT) member organisations exhibited their services highlighting their contribution to advocacy against torture in Uganda.



A cross section of stakeholders led by the Minister of Internal Affairs marching through the streets of Kampala during the commemoration of the torture survivors' day on 26 June 2014

Public dialogues on torture: ACTV conducted five public dialogues on torture in Kampala, Kitgum, Pader, Amuru and Lira districts with the aim of eliminating torture from their mindset and practices and ensuring that everybody gets to know that it is illegal, inhumane and undesirable. The police was represented by the community liaison officers and division police commanders. While undertaking the dialogue exercise, the CAT and its partners aimed at providing a platform for the citizens to dialogue with police through discussions on the rights of the citizens, responsibilities of police and how they can best work together in combating torture, getting feedback from the public and gauging the levels of knowledge in relation to human rights, and torture specifically.



Head of Delegation, European Union, Mr Kristian Schmidt officiating at the dialogue

RESEARCH AND DOCUMENTATION

ACTV values the importance of research and documentation as a vehicle of evidence-based planning and programme implementation and advocacy. The ACTV commitments under this thematic area are:

- 1. Effectiveness and efficiency in programme delivery.
- 2. High-quality and responsive programme delivery.

4.0

- 3. Information on torture trends consistently captured and reported.
- 4. An up-to-date database and operational management information system.

The major activities carried out under research and documentation in 2014 were a baseline study on a European Union project, programme monitoring and evaluation support visits, a service review meeting for partners and a continuous update of the management information systems (MIS).

4.1 Baseline Study for European Union Project

ACTV successfully completed a baseline study for a 30-month project. The project aims to strengthen and enhance torture prevention, rehabilitation and accountability in East Africa. The project, funded by the European Union and implemented collaboratively with the Independent Medico Legal Unit (IMLU) and the Centre for Victims of Torture (CVT), was conducted in Uganda and Kenya. The baseline information obtained throughout this study is being used to benchmark performance and the achievement of planned results relating to this EU-funded project.

4.2 Programme/Finance/Monitoring and Evaluation Support Visits

Six programme, finance and monitoring visits were conducted in 2014 by management officers, including the Monitoring Officer and IT Support Officer. These are regular support visits undertaken to support the programme, especially at the Gulu centre. One of the key outcomes of the support visits was the realisation of the need for ACTV to review its mandate to ensure that it is in tandem with the new law on torture.

The visits have also been very instrumental in aligning the activities being implemented at both the ACTV centres to ensure uniformity and consistency in the organisation's operations as it works towards achieving its mandate. ACTV was also able to obtain feedback from the partners and beneficiaries.

4.3 Service Review Meeting for Partners

One service review meeting for partners was held and eight partners that have a working referral system with ACTV participated. The purpose was to review and examine the working modalities, share experiences and generate resolutions to strengthen the referral system. For example, ACTV re-emphasised its current mandate and called upon the partners to sensitise clients to the services rendered by ACTV. As a result of this meeting, clear modalities of referring clients to and from ACTV were agreed upon and implemented. This has yielded a strengthened and better functioning client referral system between ACTV and its partners as well as an improvement in the collaboration between the organisations.

4.4 Documentation of Management Information System Usage

During the reporting period, new and old clients had their information captured both manually and electronically for purposes of gathering information about torture. Ideally, all client information should be captured electronically using the established database system. The database has not been updated 100% owing to inability to ensure that clients' information accessed during the outreach activities is captured while in the field because of lack of enough laptops. Training for all ACTV staff was also conducted to enhance their capacity in the use of this management information system (MIS). This MIS has improved the quality of client information at ACTV in terms of accuracy, consistency, reliability and security. The management and use of client information have also been made easier and this has helped in making informed decisions by ACTV while managing clients.

4.5 Assessing the Effects of Compensation to Survivors of Torture

Torture survivors have suffered effects that range from permanent physical disability to psychological impairment, which may deny them a chance to work and manage their compensation monies well. ACTV carried out a study in 2014 to assess the effects of such compensation on SOTs in the Eastern, Western, Central and Southern regions of Uganda. Both qualitative and quantitative methods were used in the collection and analysis of primary and secondary data by the staff of ACTV. In general, the research found that the effects of this compensation varied amongst survivors based on a number of factors, including how severely they were affected through torture, how much they received in compensation, how much they spent processing the compensation, how long it took for them to be awarded and paid, and also how well they managed and used the compensation money.

The research generally identified a positive effect on survivors of compensation, though the effect was short-lived since beneficiaries in many cases tended to misuse the money with time and, in some instances, payment of the compensation came when the survivors were already indebted with treatment bills and loans that they had acquired while trying to process the compensation. The study recommended that beneficiaries both be counselled on how best to manage their compensation and also be followed up to find out how they were faring after being paid. Lastly, the study suggested an improvement in the referral system between ACTV and partners, such as the UHRC, to enable the clients to be aware of and benefit from the services offered by both parties whenever required.

5.0 STRENGTHENING THE INSTITUTIONAL CAPACITY OF ACTV

5.1 Summary of capacity-building training for staff 2014

Sr No.	Name of staff	Course attended	Trainer/Training institution
1.	All ACTV Kampala staff	Group French lessons	John Chegera
		Database management skills	Kiyingi Simon Peter
		Research training	Dr Roscoe Kasujja
		Gender mainstreaming training	Beatrice Mugambe
		Time management training	Jesus Carzola Perez
		Swahili lessons	Mshilla Consultants Ltd
2.	All ACTV Gulu staff	Database management skills	Kiyingi Simon Peter
2.		Gender mainstreaming training	Beatrice Mugambe
		Time management training	Jesus Carzola Perez
3.	Faith Bothuwok	Child counselling training	Safe Heaven Child Counselling Centre
		Annual counsellors conference	Uganda Counselling Association
		EMDR training	Uganda Counselling Association
		Immigration detention	Immigration Detention Coalition
4.	Philip Kateeba	Human Rights National Action Plan capacity-building training	Ministry of Foreign Affairs
		Gender analysis and report training	LASPNET
5.	Kembabazi Lydia and Kateeba Philip	Supervisory skills training	Future Options Consulting Limited
6.	Wilberforce Ojiambo and Dan Lubinga	ICPAU annual seminar Taxation training	ICPAU
_	Peace Avola , Kembabazi	French training	Alliance Française
7.	Lydia and Dr Bagonza Kenneth	Interviewing and counselling skills	Kwikiriza Benson

8.	Kibirige Robinah	Management skills improvement	UMI
0.		Effective meetings management	HR & Management Agency
9.	Kibirige Robinah and Annet Nantume	Customer service training	Future Options Consulting Ltd
10.	Kizito Wamala and Faith Bothuwok	Family therapy training	UCPA
11.	Kizito Wamala and Alex Kigoye	Guitar training	Osire John
12.	Kizito Wamala	EMDR training	Uganda Counselling Association
13.	Michael Bamulangeyo	Monitoring and evaluation training	DGF
14.	Carol Kabatanya	Website design and management	Kaingroup

5.1.1 Learning French and Kiswahili

The staff members in Kampala and Gulu are currently undertaking French and Swahili lessons respectively to improve on their communication skills with the clients.

5.1.2 Management skills improvement

Additionally, 11 staff members have undertaken individual capacity-building training. The branch manager, Gulu centre, participated in a two-week training session in management skills improvement at the Uganda Management Institute (UMI).

5.1.3 Time management

Training in time management for ACTV Gulu branch was also conducted by the Center for Victims of Torture (CVT) psychotherapist/trainer on 12 August 2014. The training was made up of two components: provision of theoretical knowledge and practical exercises for time management. The training was successful and the staff made the following observations:

The training has been useful because I have learnt how to avoid procrastination. I have also appreciated that I need to allocate time to the various activities scheduled in order to achieve efficiency and have less stress.'

'It is useful because I have learnt the importance of time management and all the necessary steps for achieving the desired goal within an organisation.'

'It is useful because it helps us to identify the gaps in our planning and to get a way forward to make it better.'

5.1.4 Mental health capacity-building initiative

ACTV, in collaboration with CVT, is engaged in a one-year capacity-building initiative for the staff that offers psychological care services and is aimed at the development of practical skills to enable the staff to effectively provide psychological counselling (both individual and group counselling). This initiative is conducted through practical training, mentoring and modelling (co-facilitation) facilitated by a psychotherapist/ trainer from CVT. During the course of the year, the mental health staff have been able to achieve the following: i) Develop a draft organisational structure of the Mental Health Department at ACTV; ii) develop a new psychological care service delivery strategy for prison settings; iii) develop practical skills for providing psychological counselling (individual and group counselling); and iv) improve on their time management at work.



Capacity-building training for counsellors from ACTV and partners facilitated by CVT trainers

5.2 Human Resources

Board of Directors

ACTV is managed by a team of five competent and committed Board of Directors. The Board continued to provide strategic direction to the organisation through their quarterly meetings. Below is the current list of ACTV Board members.

Composition of the ACTV Board of Directors in 2014

No.	Name	Designation
1.	Dr. Moses Kizza Musaazi	Chairperson
2.	Ms. Judy Kamanyi	Member
3.	Hon. Livingstone Okello-Okello	Member
4.	Dr. Margaret Mungherera	Member
5.	Ms. Margaret Sekaggya	Member

Table 12: Human resource status 2014

No.	Designation	No. of staff	Location
1.	Chief Executive officer	Samuel Herbert Nsubuga	Kampala
2.	Finance and Administration Manager	Wilberforce Ojiambo	Kampala
3.	Programme Manager	Philip Kateeba	Kampala
4.	Branch Manager/Medical Officer	Dr Judith Aloyo	Gulu
5.	Monitoring and Evaluation Officer	Michael O. Bamulangeyo	Kampala
6.	Accountant	Dan Lubinga	Kampala
7.	Communications and Advocacy Officer	Carol Kabatanya	Kampala
8.	Project Officer	Esther Nabwire	Kampala
9.	Clinical Psychologist/Trainer	Jesus Miguel Cazorla	Kampala
10.	Legal Officer	Lydia Kembabazi	Kampala
11.		Simon Ocwa	Gulu
12	Physiotherapist	Samuel Kyaterekera	Kampala
13		Apollo Kinyera	Gulu
14	Medical Officer	Dr Kenneth Bagonza	Kampala
15		Dr Ronarld Lubega	Kampala
16.	Clinical Psychologist	Kizito Wamala	Kampala
17.		Isaac Ogwal	Gulu
18.	Clinical Officer	Opio James Ogwal	Gulu
19.	Social workers	Peace Avola	Kampala

20.		Leila Wakabi	Kampala
21.		Beatrice Acayo	Gulu
22.	Trauma Counsellor	Faith Bothuwok	Kampala
23.	Nurses	Alex Kigoye	Kampala
24.		Annet Nantume	Kampala
25.		Susan Labeja	Gulu
26.	Administration Assistant	Robinah Nabatanzi	Kampala
27		Grace Laker	Gulu
28.	Office Attendants	Robinah Kibirige	Kampala
29.		Benon Kanyanzira	Kampala
30.		Nancy Apio	Gulu
31.	Drivers	Steven Mukama	Kampala
32.		Ngobi Fred	Kampala

5.3 International Seminars/Conferences

The Chief Executive Officer had the opportunity to participate in two meetings during the reporting period. The first one was organised by Article 5 Initiative in the United Kingdom to address the implementation of the road map of the PPTA and the second meeting was the Annual International Rehabilitation Council for Torture Victims (IRCT) Council Meeting in Denmark. The Legal Officer also represented ACTV at the African Commission on Human and People's Rights (ACHPR) conference in Launda. Angola. ACTV also participated in the five-day Regional IRCT conference in Kigali, Rwanda, which was organised to contribute to the development of the new IRCT Strategic Plan.

5.4 Asset Acquisition

Eleven computers, office furniture (desks and chairs), a camera, printers and a four- wheel-drive vehicle were purchased during the reporting period to support programme implementation of especially the European Union project. These assets have improved the working conditions for staff and facilitated them in implementing ACTV activities as planned.

6.0 OUTCOMES, LESSONS LEARNT AND CHALLENGES

6.1 Outcomes

Recovery and functioning of SOTs: Examination of SOTs found that 50% of the clients exhibited a significant decrease in symptoms of PTSD, depression and other clinical concerns. Six clients, all female, terminated the psychological counselling services because they had attained psychological functionality and were able to live on their own without further professional psychological support. The rest continue to access psychological counselling.

n urban refugee female client who got pregnant after being raped by the M23 rebels from the Democratic Republic of Congo approached ACTV and on assessment mentioned that she suffered feelings of guilt about not disclosing the rape incident to her spouse and not wanting to have any sexual relations with him. She also felt stressed because she was not sure whether the pregnancy was her husband's or whether it was due to the rape. After she had been counselled by the social workers, the selfassessment reports indicated a general improvement in her wellbeing with reduced nightmares and improvement in her sexual relations with her spouse. She is also attending the antenatal clinic at Mulago Hospital. This indicates that she is positively coping and willing to look after herself and the unborn baby.

Mobility and productivity: Physiotherapy services have helped SOTs on mobility and productivity. Programme monitoring and evaluation activities and follow-ups have revealed that 90% of all the clients who received physiotherapy services – electrotherapy, manipulation and physiotherapy ointment – showed a reduction in pain and clients who were provided with the lumbar sacral corsets and thoracic lumbar corsets showed improvements in managing their daily tasks which had been slowed down owing to the physical injuries suffered as a result of torture. The appliances provided offered relief and support to the clients.

Case 1: Enhancing mobility and productivity

am Ayero Susan from Layibi Central. I first came to ACTV on the 14 September 2009. I was referred by an organisation called Empowering Hands where I was a member of a client group. I was abducted by the LRA group on 15 August 1994 when I was 11 years old. I was beaten non-systematically with sticks, a panga and wire lock, walked long distances, witnessed very bad torture methods on my friends when others died but God helped me and I survived. I was made to carry heavy loads like bullets. I stayed with the rebels for eight years and escaped on 30 October 2001. I was defiled by one of the LRA soldiers who even continued staying with me and we got a child, but later the soldier was killed during a fight.

I joined ACTV on the 14 September 2009 after getting information from the director of Empowering Hands. That time I had very bad pain that I could not do anything. The bones and my back would be rubbing against each other, my hips were paralysed and I could not walk properly with terrible pain. I was then taken for investigation by the ACTV Gulu Clinical Officer who treated me and then referred me to the physiotherapist to massage me. I kept on coming for treatment; it took time but I got better. I was progressing well but after some time the pain became even worse than before and I came back. However, when the second X-ray was done, they found that the lumbar region L4 and 5 were badly damaged and the position was not correct. I was then referred to Gulu Hospital to an orthopaedic surgeon. Unfortunately the surgeon had just passed away. I had to come back to ACTV where the physiotherapist had to massage me and give me a corset to support my lower back, and till now I am still getting assistance from ACTV Gulu.

After five months of treatment, I registered easing of the pain, I could now walk long distances, run a little distance, kneel well and do my work well. I can even lift water in a 10 litre-jerrycan and I can now work; I have also established an income-generating activity from making paper beads which earns me an income of approximately 250,000 shillings per month. This income is contributing to my house rent, children's school fees and feeding. I want to thank ACTV very much for the treatment that has enabled me to start this small business.



Improved livelihoods: The mid-term review and routine monitoring established that psycho-social support groups have enabled SOT to increase their savings and strengthen their credit scheme. The contribution of ACTV towards improving the livelihoods of SOT can be evidenced in Joyce's story below.

n early 2000, Joyce, together with her family members, were attacked by LRA rebels and she did not only have her homestead and property destroyed, but was also severally beaten on the chest and tortured by the rebels, sustaining serious injuries as a result. Her husband was also abducted during the attacks and taken to Sudan before being brought back and rehabilitated at World Vision. While her husband was away, she stayed with her in-laws in Gulu town together with her children, but life was very difficult as she could not afford the basic needs of life. She then got engaged in moving long distances to collect firewood for sale so as to generate some income. This, however, worsened her injuries. She later returned to their family land in Paicho. The torture she underwent led to her developing a mental illness as she was obsessed with miserable thoughts and emotions. While at Paicho, she joined Tookema livelihood group established with the help of ACTV in Kal-umu parish, Paicho sub-county, Arwot village. Through this group, she received psycho-social counselling from ACTV staff members during their outreach programme visits to the community. This counselling, coupled with medical treatment and physiotherapy services, played a big role in re-instating her mental and physical wellbeing so that she eventually fully recovered.

After her recovery, she borrowed UGX 200,000 from Tookema group savings scheme and used this money to open up three hectares of land for farming. She has routinely planted groundnuts and maize on this land for sale to enable her to afford the family's daily needs and pay school fees for her children. Currently, she has grown simsim on this land and expects a harvest of eight bags, which will earn her roughly UGX 5 million. She intends to use this money to open up more land, employ some casual labourers in the next season to boost her yields and pay fees for her daughter in S4 as well as improve the status of her house.

ACTV, through the livelihood groups, has helped Joyce fully recover and enabled her to start up a new life in which she is now engaged in farming as an income-generating activity to access the basic needs of her family. Her hope for a better life has been restored and she now works very hard in her garden to ensure that her family has enough food and slowly develops from one level of social life to another with time.



Joyce proudly showing her three hectares of simsim from which she hopes to make approximately UGX 5 million after selling the produce

Increased public awareness against torture: The level of public awareness against torture has generally increased in the country. The public has taken up initiatives to condemn torture-related acts whenever they have been aware about them and this is attributed to the sustained media campaigns against torture by CAT members, the vibrant media in the country and an enlightened public. Examples include the cover picture of a man tied to a UPDF truck in the 19 June 2014 issue of the *New Vision* newspaper and the story about the 'monster' maid who tortured a toddler, among other cases.



Articles like these in national newspapers is a clear indication that there is increased recognition of torture as a crime

Enhanced knowledge of the laws and regulations against torture among stakeholders: Training of key professionals, especially legal and medical practitioners, has increased awareness about torture and effective application of torture laws in Uganda. The evaluation of the Istanbul Protocol Training on Investigation and Documentation of Torture showed that most key practitioners lacked the required knowledge and skills and were grateful for the training.

Increased prosecution for torture

There are a number of reports showing that security officials are being arrested and charged with torture.

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NTRAL NEWS



CIID Bosses Caged Over Torture

ENTEBBE: TWO POLICE detectives attached to Kisubi Police station were on Tuesday caged for mercilessly torturing a suspect.

The detained police detectives are Sgt. Phionah Komakech and one Akampurira. The duo was arrested on the orders of Anatori Muleterwa, the in-charge community policing in Kampala metropolitan. The duo currently detained at Katwe Police Station is accused of battering a suspect identified

as Margaret Nansubuga, who was arrested on suspicion of stealing a laptop. The suspects who were the investigating officers in the matter are accused of descending on Nansubuga while in Entebbe police cells and clobbering her to pulp. Entebbe Divisional police boss confirmed the arrest of his juniors saying that the suspects were handed over to Katwe police regional headquarters where they are currently detained on accusation of abuse of suspects' rights.

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(By Sadique Bamwita)

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Reduced cases of torture: The 16th Annual Report of the UHRC to the Parliament of the Republic of Uganda indicates a general trend in the reduction of torture-related incidents in the country. The reduction in the SOT served in 2014 as compared to 2013 from 1,663 to 1,228 is an indication that torture cases are reducing.

6.2 LESSONS LEARNT

More torture survivors in prisons and communities access ACTV services and referral systems when the outreach service delivery approach is used.

Many of the torture survivors who are Ugandan nationals are in prisons, hence the need to expand the prison outreach programme.

The number of walk-ins is still limited, which calls for a new strategy to sensitise the masses at the grass roots to encourage more self-walk-ins.

There is increased access to ACTV services by SOTs owing to increased partnerships with other organisations and institutions. However, there are limited networks with the Gulu centre, which needs to be worked upon.

6.3 OUTSTANDING CHALLENGES

6.3.1 Internal challenges

Limited access to clients in prisons

There is a challenge in accessing clients in prisons. Many times, the ACTV team has faced difficulty in accessing prison clients for further treatment, especially if they have been released or transferred to other prisons owing to limited information about their whereabouts. ACTV usually discovers these developments when they next visit the prison. Arrangements are underway to ensure that the prison authorities share information about any new developments affecting the clients.

Skill mix challenges

ACTV continues to face various challenges regarding the key skills needed to provide professional services, especially physiotherapy and psycho-trauma services. For instance, the Gulu centre was unable to provide psychotherapy services to survivors of torture due to lack of a clinical psychologist at the centre. The recruitment process for one is ongoing and the services will be offered in the next period.

6.3.2 External challenges

Limited knowledge of the Prevention and Prohibition of Torture Act, 2012 among key stakeholders

A significant number of key actors in the criminal justice system have expressed limited knowledge about the Prevention and Prohibition of Torture Act, 2012 and this is affecting the process of prosecuting cases under the new law on torture. For example, it has been noted in Northern Uganda that cases reported to police authorities as torture are not being adequately investigated by the responsible officers and this has been attributed partly to their limited knowledge about torture and the Anti-Torture Law. Therefore, there is need for ACTV to devise mechanisms for generating awareness about the new law among key stakeholders, especially among the law enforcement agencies.

Limited funding. Although we are grateful to all our partners that have provided resources to implement the activities reported, we still face a challenge of limited funding. This has hindered ACTV from recruiting an adequate number of professionals and scaling up services and outreach programmes.

Unpaid compensations. The government and other perpetrators of torture pose a challenge as well. Many survivors of torture go for years without receiving their compensation monies. This even forced the UHRC to petition Parliament in 2013, seeking its intervention in the compensation of victims and survivors of torture. This is in addition to the ACTV research study report entitled *Estimating the socio-economic effects of torture in Uganda*, illustrating the plight of survivors of torture, which was shared with the Parliament of Uganda and the Ministry of Justice and Constitutional Affairs. There is, however, no evidence that the situation has improved, which discourages SOTs from seeking justice.

Continued unrest in the Great Lakes region. The civil strife in the DRC, CAR and South Sudan has continued to provide fertile ground for torture. According to the ACTV MIS 2014, the DRC was the second biggest contributor of SOT, which is attributed to the unresolved civil strife there.

Governance questions in Uganda. There are still many governance issues in Uganda that continue to abet the environment for torture. For instance, Uganda has experienced numerous riots/protests against corruption and unpopular laws, e.g. the Anti-Homosexuality Bill, and it is during these protests that security agencies end up torturing individuals.

7.0 RECOMMENDATIONS

ACTV needs to strengthen the outreach service delivery approach to the prisons and communities as well as the referral system that have enabled many torture survivors to access ACTV services.

ACTV and development partners need to expedite the recruitment process to fill the existing human resource gaps.

ACTV needs to mobilise more resources to establish ACTV centres, preferably in all the regions of the country.

ACTV needs to work with partners to facilitate the dissemination of the Act, the simplified version and the translated versions.

ACTV needs to put in place a comprehensive strategy for review and follow-up of SOTs, other than combining review activities with sensitisation outreach programmes.

There is also need for ACTV to build networks in Northern Uganda because the number of clients accessing ACTV through referrals is still very low.

8.0 FINANCIAL REPORT SUMMARY FOR THE PERIOD JANUARY -DECEMBER 2014

8.1 Summary of financial statement

Donor	Income/Expenditure	
UNVFVT	52,500,000	
FGHR	269,459,575	
Sigrid Rausing Trust (SRT)	413,939,387	
Democratic Governance Facility (DGF)	853,344,125	
European Union (EU)	809,429,337	
Other income	148,203,475	
Total Income	2,546,875,899	
Expenses		
Programme delivery	1,726,372,885	
Organisational support	666,680,000	
Total expenditure	2,393,052,885	
Net income over expenses	153,823,408	

8.2 Partners

ACTV received funding over the reporting period from five partners, namely the United Nations Voluntary Fund for Victims of Torture (UNVFVT), the Fund for Global Human Rights (FGHR), Sigrid Rausing Trust (SRT), the Democratic Governance Facility (DGF) and the European Union (EU). Funding from the EU was received in 2013 but most the activities catered for extended to the 2014 financial period.

8.3 Net income

Net income represents activities committed to in 2014 but whose implementation extends to the 2015 financial year.

8.4 Auditors

ACTV accounts for 2014 were prepared and audited by external auditors. The Board also approved the continued hiring of Kisaka & Company Certified Public Accountants as ACTV external auditors.

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APPRECIATION

Sincere gratitude goes to all our partners who extended support, financial and otherwise, to ACTV in 2014. We owe all our achievements to your unstinting unbridled support. We appreciate the following development partners: the Democratic Governance Facility (DGF), the European Union (EU), Sigrid Rausing Trust (SRT), the Fund for Global Human Rights (FGHR), Open Society Initiative for Eastern Africa (OSIEA), the International Rehabilitation Council of Torture Victims (IRCT), Center for Victims of Torture (CVT) and the United Nations Voluntary Fund for Victims of Torture (UNVFVT). We also appreciate our referral partners in the public and private spheres, including the members of the Coalition against Torture, UHRC, members of the Justice, Law and Order Sector (JLOS) and other CSOs. We remain eternally grateful as, with your support, we mutually continue our joint quest to rid the world of torture.

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