



How Community-Led Learning (CLL) was implemented in the hands-off model

Findings from qualitative research

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Contents

Executive summary	1
1 Introduction	4
1.1 Overview of the CLL initiative	4
1.2 Purpose and objective of this study	4
1.3 Overview and Structure of the report	5
2 Findings	6
2.1 The extent to which stakeholders interviewed are aware of how CLL is being implemented, their roles and how these roles have enabled the delivery of CLL in their respective jurisdiction	6
2.1.1 Level of awareness on what is happening in the initiative	6
2.1.2 Level of awareness by the respondents on their roles	7
2.1.3 Level of awareness by respondents on how their roles contribute towards the delivery of the program	8
2.2 The extent to which stakeholders have shown interest and demand for CLL	8
2.3 Models adopted by different local governments and the extent to which local governments have taken up SESIL's recommendation to implement the CLL hands-off model	9
2.4 The extent to which CLFs and other stakeholders were being motivated in their roles	10
2.5 The extent to which capacity building workshops were effective	11
2.6 The extent to which monitoring and reporting mechanisms have been established	12
2.7 Challenges, concerns and issues experienced during the implementation of the hands-off model and how these concerns were being overcome.	13
3 Conclusion	15
A. Methodology	17
A.1 Research approach	17
A.2 Sampling Approach.	17
A.3 Training.	18
A.4 Data collection methods and tools.	19
A.5 Review of targeted sample versus sample size achieved during the study	19
A.6 Data analysis	20
B. The proposed data collection schedule	21
C. Analysis of participants interviewed per district, parish and centre versus the target sample	22

D. Breakdown of research participants per gender per sample location 23

E. Proposed steps by the SESIL team for implementing the CLL initiative 24

Executive summary

The objective of this research was to understand, through a qualitative research approach, how local governments and communities have implemented the hands-off model of the Community Lead Learning Initiative (CLL) by exploring existing practices.

The CLL initiative is an initiative under SESIL (Strengthening Education Systems for Improved Learning) is a five-year education programme designed to improve the quality and equity of measurable learning outcomes at the lower primary level in Uganda. CLL initiative aims to improve the literacy and numeracy skills of children in P1-P3 by conducting group classes of up to 20 children with the classes being conducted four times a week for two hours - one-hour numeracy and one-hour literacy. The classes are run by a Community Learning Facilitator (CLF) using highly structured lesson materials, delivered in local languages. CLL is delivered through two separate models; the direct delivery model where SESIL leads the training and facilitation of CLL activities and the hands-off model where the responsibility for CLL delivery is transferred from SESIL to LGs and communities.

The research was guided by six research questions that aimed to understand: the approach adopted by the local governments in the hands-off model, the adaptations made from the model proposed by the SESIL team, the level of demand for CLL initiative in these communities as well as the support accorded by both the local governments and the community towards the initiative. The research questions also sought to understand the level of monitoring that was taking place in the hands-off model as well as the challenges faced during implementation and how they were resolved.

The research was purely qualitative with the sample districts, sub-counties, parishes and centres being purposively selected based on three selection criteria: representation of both regions implementing the hands-off model, representation of high and low performing districts, parishes and centres as well as representation of districts that received high support and low support from Learning Support Coordinators. Based on this criterion the research settled on Busia and Bududa districts from East Nile region and Adjumani and Madi Okollo districts from West Nile.

Qualitative inquiry methods consisting of Key Informant Interviews (KII) and Focused Group Discussions (FDGs) were utilised to gather data from respondents that comprised of District and Sub- County focal persons, CLL implementation Committees (CICs), Centre Management Committees (CMCs) and Community Learning facilitators (CLFs). All these research respondents were involved in the design and/or implementation of the CLL hand-off initiative.

Preliminary analysis and coding were conducted on all the data collected to identify similar themes as well as emerging themes across the dataset from the sampled regions. Based on the analysed datasets, the following is a summary of the findings:

Findings 1: Respondents, particularly those at lower levels, displayed sound knowledge of the initiative's implementation process and the involvement of multiple stakeholders. It is evident that stakeholders at district, sub-county, parish and centre levels understand their roles and recognize how they contribute to program delivery.

Findings 2: The CLL initiative enjoys significant demand, as evidenced by robust support from parents and communities. However, greater clarity is required to differentiate between the hands-off and direct delivery models for the benefit of the communities.

Findings 3: Districts have largely embraced the recommendations provided by the SESIL team and are actively implementing them. All districts diligently followed the instructions regarding community identification, CLF recruitment and training, and learner identification. Discrepancies, however, were observed in committee establishment and centre management. Districts cited financial constraints and a lack of commitment from stakeholders as reasons for deviating from the proposed implementation model.

Findings 4: Districts expressed willingness to support CLFs and other stakeholders, but financial limitations, including inadequate parental support, have hindered the realization of this objective. Parent sensitization meetings, held regularly across all districts, aimed to encourage financial contributions, with an average monthly amount of 2000 Ugandan shillings. Poverty levels in the selected communities were identified as a major obstacle to financial support. Furthermore, ambiguity between the financial support provided by the direct delivery model and the expectation for community contributions under the hands-off model resulted in reluctance to provide financial backing. Some districts adopted income-generating activities, such as renting out chairs, to financially assist CLFs. In certain cases, leniency was granted in payment timelines, encouraging parents to contribute once they received payment for their coffee sales.

Findings 5: A significant number of respondents confirmed attending training and capacity-building workshops organized by the SESIL team. These workshops were highly effective in equipping stakeholders with the necessary skills and knowledge for implementing and monitoring the initiative. Participants praised the workshops as valuable platforms for sharing experiences and learning successful strategies from others, contributing to the overall success of the initiative.

Findings 6: The majority of respondents reported the establishment of monitoring and evaluation structures. These structures encompassed regular reporting mechanisms, with most respondents utilizing the provided SESIL template for weekly reports and updates. Stakeholders also conducted centre visits to observe CLL lessons, offer technical support to CLFs, and ensure the implementation of safeguarding measures. Additionally, meetings were held to discuss initiative progress and keep stakeholders informed. However, it should be noted that some centres, particularly those with newly trained CLFs, lacked reporting structures due to the absence of training and reporting templates.

Findings 7: At the district, sub-county and parish levels, the most significant challenge was monitoring activities at the centre level. Meanwhile, at the centre level, prominent challenges included inadequate facilitation, temporary infrastructure leading to disrupted learning during the rainy season, and learner absenteeism.

Conclusion

Overall, compelling evidence supports the sustainability of the hands-off model as an effective approach to engage communities in promoting early grade learners' literacy and numeracy skills. The report emphasizes the demand for the initiative, as evidenced by communities and parents' willingness to support it. Communities have shown readiness to provide venues for learners, permit their children to learn at selected venues, and actively follow up on their children's reading progress.

The success of the hands-off model can be attributed to various key factors. Firstly, the establishment of supportive structures, including capacity-building workshops organized by the SESIL team, implementation guidelines, and monitoring and reporting guidelines, has played a vital role. These elements have fostered consistent adoption of the approach by districts nationwide and ensured its effectiveness in the sampled areas. Notably, Busia, a high-performing district, exemplified the significance of adequate sensitization and awareness creation for successful implementation.

However, the lack of clarity regarding the sustainability of the hands-off model, particularly at the community level, presents a significant challenge. Communities were aware of both the hands-off and direct delivery models, but they did not receive sufficient information on the distinctions between the two models or the criteria for implementing each. Consequently, communities implementing the hands-off model felt misled by their leaders or the program itself, leading to dissatisfaction. Enhancing sensitization efforts is imperative to improve communities' understanding of financial contributions and reinforce their belief in their positive impact on the initiative. Communities implementing the hands-off model should be well-informed about how their involvement and financial support contribute to the initiative's sustainability and ultimately enhance their children's educational outcomes.

1 Introduction

1.1 Overview of the CLL initiative

The Community Led Learning (CLL) initiative is an initiative under the SESIL (Strengthening Education Systems for Improved Learning) programme. SESIL is a five-year education programme designed to improve the quality and equity of measurable learning outcomes at the lower primary level in Uganda. SESIL is doing this by creating opportunities for communities to support and lead their children's learning. SESIL is implemented with funding provided by the UK's Foreign Commonwealth and Development Office and managed by Cambridge Education.

The CLL initiative aims to improve the literacy and numeracy skills of children in P1-P3. Under CLL, small group classes of up to 20 children meet four times weekly for two hours - one-hour numeracy and one-hour literacy. The classes are run by a Community Learning Facilitator (CLF) using highly structured lesson materials, delivered in local languages. The CLL initiative is targeted at children with the lowest levels of literacy and numeracy and selection to participate follows a screening process by the CLF to measure their levels.

CLL is delivered through two separate models; the direct delivery model where SESIL leads the training and facilitation of CLL activities and the hands-off model where the responsibility for CLL delivery is transferred from SESIL to LGs and communities. In the hands-off model, SESIL provides the required hardware (such as handbooks, blackboards, chalk, memory cards, etc.), initial training to the local governments, technical guidance and support as well as light touch monitoring. Local governments are expected to demonstrate commitment and ownership by identifying CLL communities, training sub counties and CLFs and establishing the initiative and its delivery as well as monitoring routines under the initiative.

The hands-off model takes up a community engagement approach as it strengthens the ownership and leadership of communities in the delivery of the initiative especially since it enables communities to be engaged in their children's learning progress. Communities including parents and community leaders can be engaged as champions, sponsors, promoters, monitors and even watchdogs of the quality of education their children are receiving in the initiative.

CLL was launched in 2021 in 77 parishes in one sub-county in each of the 15 SESIL local governments with around 13,000 children being engaged in the pilot. The initiative was set up to help mitigate the underperformance of some learners even before COVID-19 as well as to help reduce learning loss experienced during school closure after the pandemic. The initiative targeted children with the lowest levels of literacy and numeracy after a screening process by the CLF and these learners were then engaged in 24 lessons of literacy and numeracy.

After the pilot, it was noted that out of 100 children in grades P1-P3 who attended all the CLL classes, 38% improved in their literacy levels while 72% improved in their numeracy levels. After the pilot, CLL was scaled to reach a further 250,000 children. An integral part of the scaled-up CLL initiative was the role of the community including parents in their children's learning. Nine (9) local governments are implementing the hands-off model: Bududa, Sironko, Bukwo, Kapchorwa District, Tororo Municipality and Busia in the East and Adjumani, Terego and Madi Okollo in the West Nile region.

1.2 Purpose and objective of this study

The purpose of this assignment was to conduct qualitative research in a sample of local governments in the East and West Nile regions to understand how local governments and

communities have implemented the hands-off model of CLL by exploring existing practices and capturing best practices that could be extended. The research questions used were:

- a. What level of demand for CLL has there been in these communities? To what extent have parents and community leaders expressed the need for CLL in their communities? To what extent have parents and community leaders shown support for the programme? (e.g., provision of handwashing stations, seats, CLF motivation etc.)
- b. What model of CLL did LGs/sub-counties adopt (in the hands-off model)? What adaptations of the CLL model were made? Which ones worked (better)? To what extent were the “things to consider” in the design considered at each stage of implementation?
 - i. To what degree did the LGs follow the 8 steps of implementation?
- c. How are CLFs and other stakeholders being motivated in their roles (including stipends)? What resources are being provided?
- d. To what extent were the capacity building workshop events effective? How did the key stakeholders follow the guidance given and implement the suggested monitoring and research activities? What challenges/ issues/ concerns emerged and how were they resolved?
- e. Is any monitoring of activities taking place? Do they have any reporting? How do they get to know what is going on the ground?
- f. What are the issues and challenges experienced and how did they navigate them?

1.3 Overview and Structure of the report

This report provides an in-depth understanding as to how local governments and communities have implemented the hands-off model. It begins by exploring the understanding of the initiative by the local government and community leaders including assessing their understanding of their role and its contributions towards the successful implementation of the initiative. The study then presents an analysis of how local governments have implemented their hands-off model, the extent to which local governments considered the proposed steps shared by SESIL, the level of demand for the initiative at the community level, monitoring and reporting structures put in place, support offered to stakeholders especially the CLFs as well as the challenges experienced in the implementation of the hands-off model and how they were navigated.

An overview of the methodology used in the study – the research approach used, the sampling process including the sample size that the study was able to reach, data collection methods and tools used as well as an overview of data analysis – is provided in Annex A.

2 Findings

This section provides a summary of the key findings from the qualitative study. Although the study aimed to identify variations in respondents' perceptions across regions, districts, and performance levels, no significant differences were observed in these dimensions. The research findings are presented according to the main research questions. The study begins by examining the respondents' understanding of their role in the CLL initiative and how this role has facilitated the implementation of the initiative in their respective jurisdictions. It then delves into the specific CLL model being implemented in each jurisdiction, addressing the level of demand for the initiative, the implementation steps taken, and the measures in place to support its execution. Additionally, the research investigates the motivation of CLFs and other stakeholders in carrying out their roles within the initiative. It also evaluates the monitoring activities being conducted under each hands-off model. Lastly, the research explores the challenges, concerns, and issues that have arisen during the implementation of the hands-off model and the strategies employed to address them.

2.1 The extent to which stakeholders interviewed are aware of how CLL is being implemented, their roles and how these roles have enabled the delivery of CLL in their respective jurisdiction

At the inception of the hands-off model, the SESIL team conducted a capacity-building workshop for local government officials. The workshop aimed to achieve three main objectives: providing an overview of CLL implementation steps, explaining how to collect placement test data, and outlining monitoring responsibilities. District, sub-county, parish, and centre-level officials were educated on their crucial roles within the initiative. This study explores the stakeholders' awareness of current initiatives, their roles, and their contribution to program delivery.

2.1.1 Level of awareness on what is happening in the initiative

To assess awareness levels, the research examined stakeholders' knowledge of implementation details in their respective jurisdictions. This included understanding which sub-counties, parishes and centres were involved, the number of learners and CLFs participating, and overall familiarity with the implementation process.

At the district level, data from three districts were analysed, as the Madi Okollo representative did not respond. Based on the available data, all interviewed district representatives were aware of the implementing sub-counties and parishes. However, only a few had knowledge of the specific centres involved. While district respondents lacked details on the number of CLFs and learners, they were familiar with the initiative's target learners, the recruitment process, and the training of CLFs. District education officials highlighted the program's focus on academically struggling learners and the formation of small learning groups led by trained CLFs.

Sub-county respondents demonstrated greater awareness, knowing the number of parishes and centres implementing the initiative. However, no respondent provided information on the number of CLFs in their sub-counties. Sub-county respondents displayed a better understanding of the implementation process, describing the steps taken from SESIL training and community sensitization campaigns. They discussed learner placement tests, the formation of Community Implementation Committees (CICs), CLF recruitment and training, and the establishment of Community Management Committees (CMCs). Sub-county officials also recognized their roles in selecting CLFs based on recommendations from village leaders and ensuring suitable learning centre locations.

At the parish level, all respondents were aware of the CLL centres established in their areas. Some centres had closed due to lack of parental support, CLF resignations, or weak CMCs and CICs that failed to monitor the initiative. Respondents reported variations in learner registration, with some children attending without being officially registered but eventually being accounted for. Parish-level respondents emphasized the importance of learner identification and maintaining appropriate class sizes, usually capped at 25 learners.

CMC members at the centre level, except for Madi Okollo, demonstrated knowledge of learner attendance and the number of CLFs. However, accommodating all eligible learners within the 25-learner limit posed challenges, as some centres had a high demand. CMCs employed innovative solutions, such as dividing learners into groups and scheduling separate teaching days. Active participation varied among CMCs, with some having all members involved and others only three to four members. CMCs actively mobilized parents, monitored CLL activities, and provided support to CLFs. Their observations informed committee meetings and guided CLFs on safeguarding measures.

2.1.2 Level of awareness by the respondents on their roles

Overall, there is ample evidence to suggest that stakeholders at all levels (district, sub-county, parish, and centre) possessed a clear understanding of their respective roles in implementing the initiative.

At the district, sub-county and parish levels, three key roles stood out: raising awareness, coordination, and monitoring/supervision. Respondents employed various strategies to raise awareness, such as conducting meetings, sensitization campaigns, outreach programs, and mobilization meetings. One respondent highlighted the importance of familiarizing leadership with technical skills to enhance their understanding of CLL. Training sessions, particularly for CLFs and CMCs, played a crucial role in the successful implementation of the initiative.

Regarding the monitoring of CLL activities, respondents utilized weekly, monthly or quarterly meetings to provide updates, reviewed children's books, conducted physical visits to the centres, and exchanged reports. Some respondents also established monitoring structures like CICs or CMCs. These efforts yielded valuable information on learner and CLF attendance, replacements, and safeguarding concerns. Supervision involved ensuring the selection and registration of eligible students and communities, as well as offering mentorship and technical support to CLFs and CMCs. Respondents emphasized their pivotal role in coordinating all CLL activities, including training delivery and material distribution to the centres, while also addressing concerns and issues that arose.

At the CLL centres, CMC members played a vital role in mobilizing parents to enrol their children and monitoring and supervising centre activities during the initiative's implementation. CMCs engaged in door-to-door campaigns, informing parents about the learning centre's schedule and fostering discussions on CLF facilitation, required support/materials, and regular attendance. They also observed CLFs as they interacted with learners, with their observations forming the basis of committee meetings. Such observations provided valuable insights to advise CLFs on safeguarding principles.

All CLFs interviewed emphasized their primary role in facilitating learning at the CLL centres. One CLF stated, "I teach learners from the centre during Holidays... while during school time we learn over the weekend." CLFs attributed their teaching to improved literacy, numeracy, and overall academic performance, particularly for struggling learners. They also prioritized the welfare and safety of the children within the centres and during their travel home.

Additionally, CLFs engaged in mobilizing and sensitizing parents to join the initiative, providing guidance to support struggling children facing various challenges, tracking learner attendance, submitting regular reports, and conducting assessments to monitor progress. The submission of

weekly reports and conducting assessments were common practices among the majority of CLFs.

2.1.3 Level of awareness by respondents on how their roles contribute towards the delivery of the program

At the district, sub-county and parish levels, respondents played a crucial role in raising awareness about the CLL initiative. Their efforts have gained acceptance and support from key district actors such as the RDC, police/security and CAO. The constant weekly reports from the CIC have generated keen interest, prompting regular monitoring of CLL activities by sub-counties. Respondents also encouraged CLFs to persevere despite financial challenges, with the presence of a large number of learners serving as motivation. Regular monitoring motivated CLFs to actively engage learners, knowing that the CIC was closely monitoring their performance and consulting parents.

Sensitization and community mobilization meetings have resulted in improved learner attendance and registration. Parents, who have been sensitized and involved in their children's CLL activities, provide valuable feedback. Increased awareness has garnered support from concerned community members, expanding contributions to CLL activities beyond parents. Except for Madi Okollo, where no participants engaged in FDGs, CMC members excelled in mobilizing learners to regularly attend the CLL centre. Their door-to-door campaigns successfully convinced parents to bring their children. CMCs also played a key role in creating a friendly learning environment within the centre, appreciated by children who feel free and safe. Positive sentiments from learners, such as "Even if you give a wrong answer, the teacher does not beat you," highlight the impact of CLL classes. CMCs also motivated CLFs through words of encouragement, emphasizing voluntary work and promising efforts to secure parental contributions. Some CMCs generated income through activities like chair rentals, supporting CLFs financially. Monitoring activities promoted discipline, and a bell system facilitated better time management for CLL lessons and activities.

CLFs emphasized that their greatest contribution to CLL delivery was transforming children's attitudes towards learning. Learners now love going to school and exhibit improved performance. Positive feedback from a primary school teacher, "Your boy is very active in class these days," acknowledges the CLF's influence. Increased interest in learning has led to higher attendance and improved numeracy and literacy skills. CLFs have also played a vital role in implementing safeguarding measures within the centre and community, ensuring the safety of children during CLL activities and their journey home. Parents have prioritized their children's education over child labour. Taking on these roles has enhanced CLFs' teaching skills, deepened their interest in teaching, facilitated interactions with education officials, and earned recognition from the community. They have gained valuable knowledge and the confidence to teach without fear, appreciating the opportunity to engage with diverse stakeholders and adapt their teaching approaches to different types of children.

Overall, the contributions of stakeholders at various levels have been instrumental in raising awareness, mobilizing learners, improving attendance, and transforming children's attitudes towards learning. The CLL initiative has fostered collaboration and positive outcomes, benefiting both learners and communities.

2.2 The extent to which stakeholders have shown interest and demand for CLL

Evidence suggests a strong demand for the CLL initiative, but stakeholders, particularly at the community level, require further clarity to differentiate between the hands-off model and the direct delivery model.

According to respondents, communities have heard about the CLL initiative and recognize its positive impact on learning, resulting in high demand. In Madi Okollo, the sub-county focal person stated, "Everyone was interested right from the district level. I could say 99%. All political heads like the L.C III chairperson participated in our sensitization meetings."

Respondents also observed that communities were more familiar with the direct delivery model and expected the same financial support to be extended to the hands-off model. However, communities like Busia, which clarified this confusion from the beginning, were able to minimize resistance and gain community support. Busia's district focal person explained, "When we started community sensitization about CLL, it was hard due to parents' perception of the program... especially with programs providing financial support... but we started with those who accepted to start... eventually, other communities came and compared what is taking place, and they too accepted and started the program... including Butema and Sikuba, which are still new communities."

Parents primarily supported CLL by sending their children to the CLL centres, providing scholastic materials such as pens, pencils, and books, offering space in their compounds for the CLL learning centre, regularly visiting the centres for updates on their children's progress, and providing mats or chairs for the learners. However, the study identified a significant gap in parental commitment to supporting CLFs, which compromised the initiative's success. The lack of support demotivated CLFs and other stakeholders.

Overall, while there is high demand for the CLL initiative, ensuring clear communication and addressing misconceptions about the different models is crucial. Encouraging consistent parental support and ownership of the initiative is vital for its sustained success.

2.3 Models adopted by different local governments and the extent to which local governments have taken up SESIL's recommendation to implement the CLL hands-off model

As mentioned previously, the SESIL team conducted a capacity-building workshop for local government officials to familiarize them with the proposed eight steps for implementing the hands-off model. The workshop covered topics such as data collection through placement tests and monitoring activities. Further details on the eight steps can be found in Annex E.

This research question was only posed to participants at the district and sub-county levels. Overall, all districts had largely followed the first seven recommended implementation steps by the SESIL team. However, the study could not draw a conclusion on step 8 as none of the districts had completed a full learning cycle at the time of the interviews. Nonetheless, plans for completing the learning cycle were mentioned specifically in Adjumani and Busia districts.

Respondents consistently indicated their adherence to the implementation steps recommended by the SESIL team. They demonstrated conformity to the guidelines, particularly regarding the selection of communities, learners, and CLFs. Ensuring a maximum number of learners and conducting placement tests were given due consideration. Reviewing how local governments followed the proposed steps of implementation, we can summarize as follows:

Step 1: All districts and sub-counties (excluding Bumasheti sub-county) held meetings to discuss the implementation of the hands-off model. The meetings served to raise awareness about CLL, foster a sense of belonging among stakeholders, and discuss the implications of initiating the initiative. Communities were selected based on these meetings, considering factors such as previous CLL implementation, distance to primary schools, and performance in national examinations.

Step 2: All regions held meetings to identify eligible communities, prioritizing areas with poor learner performance, long travel distances to schools, and no prior CLL implementation. Committees, including CIC and CMC, were formed following guidelines provided by the SESIL team. In some districts, challenges hindered the complete formation of CMCs.

Step 3: District and sub-county respondents confirmed following due process to recruit and select CLFs. Considerations included education qualifications and community membership. Local councils, parish chiefs, and CDOs played key roles in CLF recruitment.

Step 4: All respondents stated that training sessions were conducted for CLFs at the initiative's inception. Trainings, lasting 3-5 days, were based on SESIL team guidelines and delivered by various entities such as the SESIL team, district representatives, the CIC, or the CDO. Some CLFs remained untrained due to financial constraints or dropping out.

Step 5: Placement tests were administered to determine eligibility for enrolment in CLL centres. Only learners who failed the test, scoring below 4, were eligible for enrolment.

Step 6: Local governments implemented various measures to support CLFs. Meetings with parents were held to ensure financial support for CLFs, with contributions of 2,000 Ugandan shillings per month. Mentor teachers were assigned in some districts, and CLFs received support from sub-county teams and CICs. Timetables were created, offering flexibility for CLL sessions.

In summary, respondents at the district, sub-county, and parish levels reported following the SESIL team's recommendations to a significant extent. However, challenges, such as financial limitations, lack of ownership, competing priorities, and insufficient implementation capacity, hindered the full adherence to the guidelines. Active engagement and commitment from all stakeholders are essential for successful implementation.

2.4 The extent to which CLFs and other stakeholders were being motivated in their roles

All respondents acknowledged the discussions held with the communities, including parents, regarding the motivation of CLFs. Financial resources were identified as a major motivating factor, with the provision of 2000 Ugandan shillings per month being the prominent contribution across districts, sub-counties and parishes.

However, despite the discussions, only a small percentage of CLFs received any financial support. Bududa district, for instance, faced financial constraints that limited regular support to CLFs, even though the sub-county had initially provided facilitation. Lack of parental support was attributed to the poverty levels in the selected communities and lack of commitment. Nevertheless, some districts, sub-counties and parishes initiated meetings with parents to encourage them to motivate and support their CLFs. In Bududa district, after such meetings, parents committed to making contributions once they received payment during the coffee season.

In the absence of financial support from parents and communities, CLFs received alternative forms of assistance. In certain districts, parents assisted CLFs by engaging in activities such as weeding and ploughing the garden, which boosted their morale to teach the children. Parents and communities also provided support in the following ways:

- Provision of mats, carpets or chairs for learners to sit on during learning sessions. A respondent mentioned that "parents provided mats and chairs which children carried from home for them to use while learning."

- Provision of venues for CLL centres, including church grounds, personal compounds or school grounds. A CLF stated, "The Christian community has provided their church for the children to use for CLL activities," while another mentioned that the learning centre "was a personal space freely given by a parent who wished the program to take place." Additionally, a respondent noted that "parents have supported in the construction of structures where learners are learning from."
- Provision of water, sanitation and hygiene (WASH) services to the centres. A respondent from Adjumani mentioned that "parents donated chairs, latrine, and handwashing facilities in turns," while another respondent from Bunamee noted that "parents voluntarily agreed to have learning centres in their compounds, allowed children access to their latrine facilities, and provided water for drinking and handwashing."
- Provision of books, pencils and teaching materials. These materials were provided not only by parents but also by neighbouring primary schools. This support was particularly noted in Bududa district, where respondents mentioned receiving teaching materials such as chalk, manillas, and flashcards from nearby schools. A respondent from this district mentioned, "The teachers in nearby schools provide the CLF with chalk, manilas, and flashcards to aid in lesson delivery."
- Provision of food to learners and CLFs during their time at the centres. A respondent noted that "some parents offer the CLFs food items like fruits when they come to their centres to conduct lessons."

2.5 The extent to which capacity building workshops were effective

This research aimed to assess the effectiveness of the SESIL workshops mentioned earlier in the report and their benefits in enhancing the capacity of CLL stakeholders to conduct routine monitoring and research. The analysis was conducted at the district, sub-county, and parish levels.

Most respondents at the district, sub-county, and parish levels reported attending a SESIL workshop on conducting their own routine CLL monitoring and research. Those who attended found the workshops highly effective and beneficial as they:

- Equipped respondents with skills to implement, monitor, and report on the CLL initiative. Many respondents expressed that the workshops provided them with valuable knowledge and skills to support program implementation. A respondent from Busia mentioned that they "learned more knowledge on SESIL, and skills were impacted to assist in the implementation of the program." In Bududa district, a respondent stated that they acquired monitoring skills, which contributed to the smooth running of the program. Respondents also highlighted how the acquired skills helped them identify eligible communities and learners and ensured the implementation of safeguarding measures. One respondent noted, "We learnt the criteria of selection of beneficiaries and CLFs, and this boosted our minds as we were able to know how to start." Another respondent emphasized that "the skills to monitor CLL activities are the main reason for the smooth running of the program."
- Clarified the expected roles of each respondent. A respondent from Busia mentioned that the workshops "enlightened" them about their roles and assisted in the "formation of committees to support the work in the villages."
- Provided training skills to enable respondents to teach others about the initiative.
- Enhanced respondents' understanding of early grade literacy and numeracy. Respondents mentioned that this knowledge enabled them to monitor CLL lesson progress in their parish and strengthened their ability to lead and support a CLL class. They observed the positive impact of this improved capacity on the learners' performance at both the primary school and the CLL centres.

- Assisted participants in developing implementation plans. Respondents mentioned that the training enabled them to produce workplans with specific timeframes and assigned responsibilities. They were able to establish clear timeframes for conducting CLL activities.
- Facilitated learning from each other and sharing experiences.

Overall, the SESIL workshops were regarded as highly effective in equipping CLL stakeholders with the necessary skills, knowledge, and plans to implement and monitor the initiative. The workshops also fostered collaboration and knowledge exchange among participants.

2.6 The extent to which monitoring and reporting mechanisms have been established

This research aimed to explore the monitoring and support systems in place to facilitate the implementation of the CLL hands-off model.

At the centre level, most CLFs reported a high degree of monitoring and evaluation. The use of the weekly tracker for reporting was the most commonly mentioned method. Respondents stated that they filled out the tracker and shared it with their CMCs, CICs, or the sub-county team. The weekly tracker was recommended by the SESIL team. However, some CLFs who had not received training mentioned using their own reporting methods. One respondent stated, "I write my report on a piece of paper... I did not get any tracker or a special reporting form for the CLL centre, but I will find out from the CDO." It's important to note that in some centres, regular reporting mechanisms were not in place. A CLF mentioned, "I am supposed to submit my weekly reports to the CDO, but due to transportation challenges, I have only been able to submit 4 reports. For the rest, I couldn't, but I always brief the local council chairperson in case of any challenges." In certain centres, no reporting was taking place at all.

Another significant aspect of monitoring and evaluation at the centre level was lesson observation and regular visits by CMCs, CICs, the sub-county team, or even the district team. The majority of CLFs reported receiving weekly or occasional support. It is worth noting that a significant percentage of CLFs had received technical support more than twice since the start of implementation. The frequency of support varied depending on the officer providing it. The SESIL team was mentioned to have provided support once, while the CDO, sub-county staff, CIC members, and mentor teachers were associated with weekly and monthly visits. District and local council chairs made irregular visits. It is worth mentioning that in some centres, the head teacher provided weekly support. A CLF mentioned, "Since my centre is located at a primary school, the school headteacher has been very interested in the program and usually visits every week to see what is going on. One of the teachers has also provided me with guidance and support whenever I contact him for literacy-related advice."

Meetings were another key method used for monitoring and evaluation at the centre level. Meetings could be conducted physically or verbally. Physical meetings allowed stakeholders to receive updates and plan for improved implementation. A CLF noted, "The people who know about the centre, such as the LC1 and LC2, usually visit and take some time to encourage me and talk to learners to attend regularly." Similarly, another CLF mentioned, "Physical meetings are also conducted between the CIC, CMC, and CLFs to share updates." Verbal meetings, mostly through phone calls, kept the team informed about the progress. A CLF stated that to monitor activities, "verbal reports through phone calls and physical visits are made as and when the situation dictates." Another CLF noted that CLFs did not provide written reports but instead verbally accounted to the CMC, who would then relay their challenges to the CIC for action.

2.7 Challenges, concerns and issues experienced during the implementation of the hands-off model and how these concerns were being overcome.

The most frequently mentioned challenge at the district, sub-county and parish levels was the implementation and monitoring of CLL centres, with the following challenges identified:

- "Transport to reach and support in supervision and monitoring of CLL centres" was a major challenge highlighted by the Busia district focal person. The centres were far from the district, and there was a need for fuel and facilitation that had not been provided.
- The rainy season posed difficulties in monitoring the centres, as poor road conditions made it hard to access them. A representative from Bududa noted that learning was often halted when it rained since learners in many centres sat on the ground. A CLF mentioned, "The rains disrupt CLL classes and therefore delay lesson coverage. This encroaches on the private programs of CLFs as they must organize time to compensate for the missed classes."
- Conflicting tasks and responsibilities were identified as a challenge by a representative from Busia district. CLL lessons often took place over weekends, which collided with the monitoring of school weekend programs by the same technical team.
- There were few active officers available to coordinate and implement the initiative. This was noted across the districts, with a representative from Busia stating that the workload was too much, especially since they were responsible for monitoring two sub-counties. Similarly, a representative from Pekele noted, "Coordination from the district to the sub-county is effective, but from the sub-county to the community is poor as the stakeholders are not doing their work." At the district level, a respondent mentioned that the CLL initiative was not effectively implemented as the sub-county chiefs were not actively supporting CLL learning in the community.

Another major challenge at the district, sub-county and parish levels was the lack of clarity between the direct delivery model and the hands-off model. In regions and districts where both models were being implemented in neighbouring areas, there was confusion at the community level regarding the financing of the initiative and the responsibility for facilitating the CLFs and technical staff. These challenges were more prominent in Adjumani and Madi Okollo districts.

In Adjumani, a respondent noted that the main challenge was the "failure by the people to understand the hands-off CLL program." The community had high expectations of receiving support, but this model required community contribution. This had resulted in poor attitudes towards voluntarism. Similarly, another representative from Adjumani district mentioned that parents and the community were not fully supportive of the program as they had observed CLFs being paid in neighbouring areas, which demoralized CLFs who believed the sub-county was mismanaging the funds that should have been used to support them. The community leaders were also unhappy about not being included in cohort 5 under the direct delivery model, and no clear explanation was provided on the selection criteria. In Madi Okollo, a respondent stated, "Many parents did not believe us when we said this was strictly a hands-off program where SESIL would not facilitate CLFs and other committees as they thought we are hiding some aspects."

Consistently, lack of facilitation for CLFs was mentioned as a challenge. CLFs were demotivated as parents failed to pay the agreed amount, resulting in non-payment of CLFs. A CLF from Busia district noted, "There is no motivation since it's voluntary, and this has sometimes affected my work since I need to do domestic work that will fetch money." Lack of parental support was attributed to:

- a. Lack of clarity between the direct delivery model and the hands-off model, as stated by a CLF from Awuvu parish: "The parents are not convinced that SESIL is not facilitating us."

b. High poverty levels in the selected communities, affecting parents' ability to contribute financially to support the program, as noted by CMC members: "Poverty is a challenge and has affected parents who are unable to contribute money to support the program."

c. Poor attitudes by parents, as highlighted by a CLF: "Parents are not willing to contribute to support CLFs, and they have been told it is voluntary."

At the centre level, lack of infrastructure was a prominent challenge, especially for centres located under trees. CLFs noted that learning was often disrupted during the rainy season. A respondent stated, "The rains disrupt CLL classes and therefore delay lesson coverage. This encroaches on my private programs as I have to organize time to compensate for the missed classes."

Similarly, high absenteeism rates were mentioned by a significant number of respondents. A CLF noted, "Absenteeism from some children is a huge challenge and affects attendance. Some parents fail to support the program as promised during meetings, resulting in only active parents sending their children to the learning centre."

3 Conclusion

The hands-off model promotes increased local government and community ownership and investment in education. It creates opportunities for stakeholders, particularly communities, to play a more active role in their children's learning, especially when they are out of school. This model encourages communities to invest their resources and engage in planning, advocacy and implementation of the initiative.

The hands-off model allows communities not only to provide learning materials but also to be involved in ensuring that early-grade children acquire the necessary foundational literacy and numeracy skills. The model provides a framework for communities and local governments to engage in activities aimed at supporting learners, with a focus on prioritizing those with the lowest reading and numeracy skills.

The findings of this report indicate a significant demand for the initiative at the community level, particularly in communities where children must travel long distances to reach a primary school. There is a demonstration of community and parental support, as evidenced by their provision of in-kind support such as venues, WASH facilities, and allowing learners to attend CLL lessons.

The report emphasizes the importance of training and capacity-building workshops conducted by the SESIL team, as well as community sensitization about the hands-off model during the initial stages of the initiative. These activities are crucial for successful ownership and replication of the model in new districts. The report also highlights how stakeholders have utilized the knowledge and skills gained to implement and monitor the initiative. It is noteworthy that many CLFs have received technical support on multiple occasions since the inception of the initiative. Furthermore, stakeholders have demonstrated a greater understanding of their roles and recognize the significance of their contributions to the initiative's success.

However, there are still gaps that the hands-off model needs to address. These include ensuring clarity from the beginning on how communities can be effectively motivated to provide financial support, particularly for CLFs. Communities should be encouraged to develop permanent infrastructures to minimize disruptions in learning, especially during the rainy seasons. Regular training, especially for new CLFs, should be planned by districts implementing the hands-off model. This training would ensure that CLFs are aware of their roles, reporting mechanisms, and adequately prepared to deliver CLL lessons. Decisions and changes regarding these aspects are best made during the planning phase of the initiative. Districts should engage in discussions on sustainable approaches that ensure proper facilitation of CLFs, considering implementation costs, community sensitization, and ways to encourage financial support from communities.

Appendices

A. Methodology

A.1 Research approach

The study fully utilized a qualitative approach to data collection comprising in-depth interviews and Focus Group Discussions using participatory research approaches. This approach was preferred as it enabled the participants to reflect, be creative and have open discussions with the research team. The focus group discussions targeted members of the CMCs while key informant interviews targeted District and sub-county focal persons, a representative or member of the CIC as well as CLFs at the CLL centres.

The research through the structures KII and FDG structured guides that were developed based on the research guiding questions explored the different issues, learnings, successes, and challenges experienced during the design and implementation of the hands-off model, from all the stakeholders engaged in the current cohort that was implementing the CLL initiative including CLFs, CICs, CMCs, sub county officials -SAS/CDO and the District Focal persons.

A.2 Sampling Approach.

The sample regions and research respondents were purposively selected through a 4 staged process as discussed below.

Stage 1: Selection of regions and local governments

The research began by purposively selecting four districts out of the nine districts implementing the hands-off model. The following criteria were used to select four districts

- Region- representation of each of the two regions (Two districts from the West Nile region and two districts from the Eastern region.
- Progress data- the sampled districts were also selected based on their performance as per the monitoring and progress data and reports provided by the Results and Learning (RAL) team as well as data and reports from both the Regional Leads (RLs) and Learning Support Coordinators. One high performing local district and one low performing local government were selected¹.
- The research also ensured that there was representation of local governments that have implemented CLL but are not routinely receiving LSC support.

Based on the considerations above, this research selected the following districts in the Eastern Region

- Busia - it is a high performing district that is not part of the local governments receiving routine LCS support and not part of the 15 core CLL Local Governments².
- Bududa - it is a low performing district, part of the 15 core LGs and receives routine LSC support

In the West Nile region, the following two districts were selected

¹ SESIL defines performance using the number of lessons delivered, attendance of children for each lesson, % of children who have understood the content, % of active committee members.

² In the beginning the hands-off model was implemented by 15 core local governments. In cohort 4, 2 local governments joined in implementing the hands-off model

- Adjumani – this is a high performing district that is part of the 15 core CLL LGs and receives routine LSC support
- Madi Okollo – this is a low performing district that receives routine LSC support and is part of the core 15 CLL LGs.

At the district level, the research proposed interviewing a district focal person that had prior engagements with the CLL initiative. These focal persons were selected based on their direct engagements during the implementation, supervision, and monitoring of Cohort 4 CLL activities. The focal persons were also selected based on their contextual understanding of key CLL and education issues within their respective communities.

Stage 2: Selection of sub-counties.

The research proposed working within one sub-county of each district sampled above. Sub-counties were also purposively selected based on the number of functional CLL centres within them. The study proposed working in sub-counties with 8 functional CLL centres. However, in Busia and Adjumani districts, no sub-county had 8 functioning CLL centres thus resulting in the study working in two sub-counties in each of these respective districts to ensure that the sample size was met.

Similarly, at the sub county level, a sub-county focal person was also selected based on their direct engagement with the CLL initiative as well as their contextual understanding of the initiative

Stage 3: Selection of parishes.

Within each sub-county, the parish proposed working within two (2) parishes with each parish having 4 functional CLL centres. This was however not possible in Busia and Adjumani districts where more parishes had to be sampled to ensure that the target sample size was achieved.

In each parish, one active member of the CLL Implementation Committee per parish was engaged in a Key Informant Interview.

Stage 4: Selection of learning centres.

The study targeted eight CLL centres per district during the research. The centres were randomly selected except for parishes with four or fewer functional CLL centres as all the centres were included in the sample.

At each centre, a Centre learning Facilitator (CLF) was interviewed. The research also conducted FDGs with members of Centre Management Committees at the centre level.

A.3 Training.

The research utilised a qualitative approach to collect data from the district, sub-county, parish and centre levels. Given the small-scale nature of the research, utilised SESIL staff specifically four Learning Support Coordinators given their engagement during the implementation of the hands-off model as well as their contextual understanding of CLL and education issues within their respective local governments.

Given that these staff were not necessarily qualified researchers, the research on 4th May 2023 conducted a half-day virtual training to take the researchers through

- the purpose of the study,
- the research tools and target populations,
- ethical considerations for conducting research,
- steps for obtaining informed consent,

- child protection and safeguarding as well as data handling including confidentiality.

A.4 Data collection methods and tools.

This research used three data collection tools- Key Informant Interviews (KIIs), Focused Group Discussions (FGDs) and reflection notes. A structured guide was developed for each of these data collection tools with the guide being based on the research questions of this study.

Key informant Interviews (KIIs): KIIs were conducted on key stakeholders including District Focal Persons, Sub County focal person, active CIC members and CLFs. The interviews were conducted face to face with a guide being developed for each respondent. KIIs were preferred because 1) they provided information directly from participants, 2) they provided flexibility to explore new ideas and issues not anticipated during planning, and 3) their simplicity to be used to collect data.

Focus Group Discussions (FGDs): FGDs were conducted on all Centre Management Committee members with a guide being developed to guide the researchers. FGDs were preferred as they presented a more convenient and effective approach to saving time and money while conducting interviews as compared to conducting individual interviews.

Reflection notes: This enabled the researchers to give their thoughts and perspectives on each of the study's research questions as well as capture any key quotes noted by the researchers.

Data collection was conducted between 8th and 12th of May 2023 with the researchers' using the discussed tools to collect data as per the proposed data collection schedule indicated in Annex B). Verbal informed consent was obtained from all participants before each interview.

A.5 Review of targeted sample versus sample size achieved during the study

The research team managed to conduct interviews with 70% of the targeted participants as summarized in the table below

Respondent categories	Research techniques/tools	No of interviews per district	Target interviews	Achieved interviews
District focal person	KII	1 per district	4	4
Sub-county focal person	KII	1 per district	4	4
CLL Implementation Committee	KII	2 per district (1 per parish)	8	8
CLL Centre Management Committee	FGD	8 per district	32	12**
Community Learning Facilitators	KII	8 per district	32	28

At the district, sub-county and parish levels, researchers were able to conduct interviews with 100% of the target respondents. At the centre level, the study did not attain its intended sample

size as only 87.5% of the expected CLFs were interviewed while only 37.5% of FDGs with the CMCs were conducted. The study conducted fewer FDGs than targeted as most of the centres sampled did not have functional CMCs in place. It was also noted by the researchers that the unavailability of CLFs was a key contributor to the sample size not being met. Further analysis of the respondents interviewed per district, parish and centre is presented in Annex C.

Further review of the 114 respondents engaged during the research per gender showed that 49.1% of the respondents were female and 50.9% were male with further analysis of the respondents per gender per district, sub-county, parish and centre level being presented in Annex D.

A.6 Data analysis

The research's approach to analysing the qualitative data was guided by the objectives of the study and the questions that the study sought to answer. This research adopted the thematic content analysis approach as data was analysed based on core emerging themes from research questions, interviews, and reflection notes. During analysis, all information collected in each district, sub-county, parish and corresponding CLL implementation community was analysed as one case to allow for triangulation and to enable the research team to check on the internal consistency of opinions and presented according to the research questions. Emerging themes were identified and interpreted. Connections between categories and themes have been used to further the understanding of the research questions. Direct quotes presented by the researchers have also been reported especially since they also contributed towards understanding the respondents' thought process.

B. The proposed data collection schedule

Timing	Data collection activities	
	Morning	Afternoon
Day one	Travel to the sub county <ul style="list-style-type: none"> Conduct KII with the sub county chief/ CDO/SAS Travel to Parish 1 <ul style="list-style-type: none"> Conduct KII with the CIC representative 	Travel to learning centre 1 <ul style="list-style-type: none"> Conduct KII with the CLF Conduct FGD with the CMC Start drafting the interview and reflection notes
Day two	Travel to learning centre 2 <ul style="list-style-type: none"> Conduct KII with the CLF Conduct FGD with the CMC Travel to learning centre 3 <ul style="list-style-type: none"> Conduct KII with the CLF Conduct FGD with the CMC 	Travel to learning centre 4 <ul style="list-style-type: none"> Conduct KII with the CLF Conduct FGD with the CMC Start drafting the interview and reflection notes
Day three	Travel to the sub county <ul style="list-style-type: none"> Conduct KII with the sub county chief/ CDO/SAS Travel to Parish 2 <ul style="list-style-type: none"> Conduct KII with the CIC representative Travel to learning centre 1 <ul style="list-style-type: none"> Conduct KII with the CLF Conduct FGD with the CMC 	Travel to learning centre 2 <ul style="list-style-type: none"> Conduct KII with the CLF Conduct FGD with the CMC Start drafting the interview and reflection notes
Day four	Travel to learning centre 3 <ul style="list-style-type: none"> Conduct KII with the CLF Conduct FGD with the CMC	Travel to learning centre 4 <ul style="list-style-type: none"> Conduct KII with the CLF Conduct FGD with the CMC Start drafting the interview and reflection notes
Day five	Conduct KIIs with district officials	<ul style="list-style-type: none"> Finalize all the interview and reflection notes

C. Analysis of participants interviewed per district, parish and centre versus the target sample

Table C.1: Analysis of participants interviewed per district, parish and centre versus the target sample

Respondent categories	Target interviews	Interviews achieved – Eastern Region		Interviews Achieved- West Nile Region	
		Busia	Bududa	Adjumani	Madi Okollo
District focal person	1 per district	1	1	1	1
Sub-county focal person	1 per district*	1**	1	2	1
CLL Implementation Committee	2 per district	2	2	2	2
CLL Centre Management Committee	8 per district	8	1	3	0
Community Learning Facilitators	8 per district	7**	6	8	7

* In Adjumani and Busia, the research targeted two interviews per district

** The Sub- County focal person was serving the selected two sub-counties in Busia.

*** Some centres had two or more CLFs operating in them. True Vine and Buhamosi Tugatuga learning centres had 4 CLFs operating within the same centre.

D. Breakdown of research participants per gender per sample location

Table D.2: Breakdown of respondents by their gender

Respondent categories	Male	Female
District focal person	4	0
Sub-county focal person	4	1
CLL Implementation Committee	6	2
CLL Centre Management Committee	31	38
Community Learning Facilitators	13	15
total	58	56

E. Proposed steps by the SESIL team for implementing the CLL initiative

Step 1: Agreeing on how to implement the hands-off model- this step involves having local governments and community agree on how they would initiate the hands-off model including agreeing on how the initiative will be managed (is there a need to establish committees) as well as how the communities, volunteers and learners will be selected and supported. The SESIL team recommended that local governments establish two committees- the CLL Implementing Committee (CICs) and the Centre Management Committee (CMCs).

Step 2: identifying communities- this step involves identifying sub-counties, parishes and communities that would best benefit from the CLL initiative and holding sensitisation meetings with the communities selected.

Step 3: Identifying Community Learning facilitators (CLFs)- learning at the CLL centres is facilitated by volunteers from within the communities. These volunteers are also known as CLFs. Parishes are to do a background check on CLFs as they interview them to ensure the safety of children in the centre.

Step 4: Training CLFs- the local governments are to agree on the training model for the CLFs and deliver the training based on the content suggested by the SESIL team.

Step 5: Identifying learners- local governments are to select learners based on the suggested criteria with learners being taken through a placement test and priority being given to learners with the lowest literacy and numeracy scores. The proposed number of learners per centre is 25 as this will ensure that effective learning can take place. Once selected, CLFs are to communicate to families whose children have been selected.

Step 6: Supporting CLFs to run lessons- local governments are to agree on how to motivate CLFs and other stakeholders engaged in the delivery of the CLL hands-off initiative. Communities are also to agree on timetables for CLL lesson deliver and have children learn the lessons for up to 8 months. Communities are also to support implementation as well as monitor implementation including checking CLF and learner attendance.

Step 7: Running the CLL lessons- this includes suggestions as to how CLFs are to run the CLL centre including preparation for lessons, teaching lessons based on the handbook provided as well as checking learner attendance and performance

Step 8: Completing the cycle of CLL lessons and identifying a new batch of learners- this includes suggestions as to how centres can complete a CLL cycle including how to conduct end of cycle tests, send report results and even how to decide if the community will take in a new batch of learners.

