



Republic of Uganda
Ministry of Gender Labour and Social Development

A WORLD FIT FOR CHILDREN

NATIONAL PROGRESS REPORT

2006

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ABBREVIATIONS

AIDS	Acquired Immune Deficiency Syndrome
ANC	Ante Natal Care
CBO	Community Based Organisation
CEDAW	Convention on Elimination of All Forms of Discrimination Against Women
CRC	Convention on the Rights of the Child
CSO	Civil Society Organisations
FBO	Faith Based Organisation
GDP	Gross Domestic Product
GoU	Government of Uganda
HIPC	Highly Indebted Poor Countries
HIV	Human Immuno-deficiency Virus
HSSP	Health Sector Strategic Plan
ICC	International Criminal Court
IDP	Internally Displaced Persons
IMR	Infant Mortality rate
KDP	Karamoja Development Programme
LG	Local Government
LGDP	Local Government Development Programme
LRA	Lords Resistance Army
MDG	Millennium Development Goals
MGLSD	Ministry of Gender labour and Social Development
MMR	Maternal Mortality Rate
NPPA	National Priority Programme Areas
NUSAF	Northern Uganda Social Action Fund
PAF	Poverty Alleviation Fund
PEAP	Poverty Eradication Action Plan
PSR	Poverty Status Report
SCiU	Save the Children in Uganda
UBOS	Uganda Bureau of Statistics
UCRNN	Uganda Child Rights NGO Network
UN	United Nations
UNDP	United Nations Development Programme

UNICEF	United Nations Children's Fund
UNHS	Uganda National Household Survey
UNICEF	United Nations Children's Fund
UNPAC	Uganda National Plan of Action for Children
UPE	Universal Primary Education
UPPAP	Uganda Participatory Poverty Assessment Process
UPPET	Universal Post Primary Education Training
WFFC	World Fit For Children
WFP	World Food Programme

1.0 INTRODUCTION

Uganda has ratified the international human rights instruments including the UN Convention on the Rights the Child (CRC) and its Optional Protocols (on sale of children, child prostitution and child pornography and involvement of children in armed conflict), and the Convention on Elimination of All Forms of Discrimination Against Women (CEDAW). Uganda also ratified African Charter on Rights and Welfare of the Child, a regional instrument promoting rights and responsibilities of children. In the same vein Uganda was among the countries that made a commitment to the “Plan of Action of A World Fit for Children”¹ and is therefore obliged to periodically review progress made towards the goals and strategies for children.

The 2002 Population Census estimated Uganda’s total population at 24.4million with an annual growth of 3.4%, ranked third highest in the world after Niger and Yemen. Population projections for 2005 mid-year, the total number of children aged less than 18 years was 15.0 million and expected to rise to 19.5 million by 2010. Of the total number of children in Uganda, about 41% live in poor households and of the 9.5 million Ugandans below the poverty line by 2003, 60% or 5.7 million were children below 18 years an unproportionately high representation of children among the poor and approximately 13% of children are orphans (UBOS 2005). Furthermore, an estimated 6.5 million children and women are living with the effects of conflict mainly in the Northern districts in addition to around 240,000 refugees as a result of other conflicts beyond Uganda borders.

Eradicating poverty is the major development goal of the government of Uganda for which it developed a Poverty Eradication Action Plan (PEAP) in 1997. The 1999 – 2002 Uganda National Plan of Action for Children (UNPAC) has now been integrated in the revised PEAP (2004/05 – 2007/08). The 3 year rolling plan provides the national framework to address the Millennium Development goals, and most of the WFFC commitments. Most of the MDGs related to health, education, HIV/AIDS and the protection of internally displaced persons are contained under pillars 3, 4, and 5 of the PEAP. There are however substantial differences in the quantitative targets to be achieved between the MDGs and PEAP as will be shown in progress summary tables in the later sections of this report.

Since 2002, Government has put in place specific policy measures and interventions to respond to issues impacting on children and this is reflected in the substantive progress made in formulating a number of social policy frameworks, the decentralized systems of

¹ A World Fit For Children (WFFC) is one in which all children get the best possible start in life and have access to quality basic education and in which all children have ample opportunity to develop their individual capacities in a safe and supportive environment.

governance and establishing and or improving on existing legal frameworks. The interventions targeting children have in principal been tailored towards specific age groups and largely rural based as the majority of children live in rural areas.

This report is a review of progress towards the goals of the WFFC. While this report will contribute to the UN Secretary General's report to the General Assembly, it also serves as a self assessment for Uganda to determine how far it has progressed in as far as WFFC goals are concerned and indeed on the fulfillment of children's rights. Identification of challenges and constraints will further guide re-prioritization for children. The report has been prepared in close consultation with the civil society and development partners.

While Uganda has made significant progress towards meeting some of the MDG/WFFC targets with a possibility of attaining them before the deadlines, especially those relating to poverty, UPE and HIV/AIDS, it is performing poorly on others. Of serious concern is the fact that infant and child mortality has been on the increase, malaria continues to be the most important cause of morbidity and mortality among children, malnutrition affects a significant proportion of the children and poverty remains high among children². Meeting the PEAP, MDG and WFFC targets will necessitate government and all its development partners paying closer attention and finding solutions to bridge the gap between the conducive policy environment in place, and full implementation through increased resource allocation, enhanced efficiency, commitment and ensuring adequate capacities for accelerated implementation at all levels.

2.0 MAJOR ACTIONS TAKEN FOR CHILDREN AND TOWARDS WFFC SINCE 2002

2.1 Policy level actions

Government of Uganda (GoU) has put in place policies and legislative framework which provide an enabling environment for observance of children's rights. This commitment is embodied in the PEAP goals for poverty eradication (Uganda's Poverty Reduction Strategy Paper, PRSP), the National Gender policy, the Uganda Food and Nutrition policy, Orphans and vulnerable Children Policy and the related National strategic Programme Plan of Interventions for OVCs, National Youth Policy, Elimination of Child Labour Policy, National Gender Policy and policy on the handling of street children. Government also launched the Internally Displaced Persons Policy (August 2004), the Uganda National HIV and AIDS Policy among others. In addition to these cross-sectoral

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² MFPED, 2004; MFPED, 2003a; MFPED, 2003b and Uganda National NGO Forum, 2004.

policies, specific social sector policies, and Sector wide approaches have been introduced notably Education Sector Investment Plan, Health Sector Strategic Plan II 2005/06 – 2009/10, Water and Sanitation and Social Development Sector Social Development Sector Investment Plan 2003 - 08, The Decentralization and Justice Law and Order Sector Plans have been developed during the report period. The Sector Wide Approaches have enhanced collaboration and participation of development partners and CSOs through the harmonization and alignment of development assistance around national policies and strategies.

The main challenge faced by Uganda is the operationalisation of these policies for the benefit of the children due to resource constraints and the prevailing conflict in the north and north-eastern part of the country.

2.2 Legislative actions

Since 2002, Uganda ratified 3 additional International Human Rights instruments that have related articles on children namely; the Optional Protocol to the convention on the Rights of the Child on the sale of Children, Child prostitution and child Pornography; the protocol on the Rights of Children in armed conflict and the Protocol on the creation of African courts on human and Peoples Rights; 26 instruments of ILO.

The Government used 2002 Census to launch a countrywide Birth and Death Registration and was harmonized with the community based registration which had earlier been supported by UNICEF with 50% of children aged 0-8 years with the short birth certificates compared with only 1% reported with certificates in 2000 (UDHS).

There are also gaps in the legal framework with respect to areas such as early marriage; the rights of children affected by armed conflict; juvenile justice; property inheritance and gender based violence. Another major issue is that the institutional structures needed to ensure that the laws are implemented are often weak or even non-existent. For example, the law on child labour is progressive but over 2 million Ugandan children are currently in employment.

The 2004 PEAP is in line with the CRC and the Children's Act assigns the Uganda Human Rights Commission the coordination role in collecting data on abuse, neglect and exploitation of children.

2.3 Service delivery level actions

Under the decentralized system of governance in Uganda, the responsibility for provision of a number of services has been given to Local Governments (LGs) as specified in the second schedule (part 2) of the Local Governments Act Cap 243. In 2002, the government introduced the Fiscal Decentralization Strategy, to enhance effective resource allocation in line with local priorities as well as strengthen efficiency,

transparency and accountability of local government expenditures. Government of Uganda recognizes the complementary role played by NGOs in service provision as it enhances the capacity LGs. It is also encouraging out-sourcing the private sector to provide services on contract basis. The Local Governments Act also provides for appointment of one Councilor as Secretary for Children Affairs at all levels of Local Councils (from village to district level).

Government has also taken specific actions to address conflict affected areas of north and northeastern Uganda. GoU has put in place a number of initiatives aimed at peaceful resolution of the conflict in northern Uganda. These include amnesty for combatants who surrender, cessation of hostilities and peace talks with rebel groups. The latest among these is the on-going peace talks between government and the LRA brokered by the Government of Southern Sudan. Peaceful resolution of the conflict will end the bondage and slavery that abducted children are currently in and further protect those suffering in the IDP camps and night commuter centres with inadequate social services.

In anticipation that peace may return to northern Uganda, government together with development partners is in the process of putting in place a post conflict programme aimed at achieving peace, recovery and development by 2015.

To address the insecurity caused by cattle rustling in Karamoja and the surrounding areas government has put in place Karamoja Development Programme (KDP) which is planned to be implemented from 2005 – 2008. This programme is intended to contribute to human security and promote conditions for recovery and development for Karamoja and the surrounding areas. The programme combines disarmament of the warriors with actions to support development in Karamoja through providing alternative means of livelihood.

The Northern Uganda Social Action Fund (NUSAF) is being implemented with funding from the World Bank to empower communities in 18 districts in north and north eastern Uganda which has been found out to be lagging behind to “catch up” with the rest of the districts. The three components of NUSAF are Community Development Initiatives, Vulnerable Group Support and Community Reconciliation and Conflict Management.

2.0 RESOURCE TRENDS FOR CHILDREN

Government expenditure currently exceeds its revenues and the fiscal deficit shortfall is financed by donor support. This continued donor support injects high foreign exchange inflows into the economy with macro economic implications. In order to expend these inflows the BOU creates Uganda shillings by selling government securities and foreign exchange. This in turn leads to higher interest rates which crowds out private investment and appreciation of the exchange rate that stifles exports. Note is taken that Ugandan government has been a large beneficiary of President Bush’s Emergency Plan For AIDS

Relief (PEPFAR), and the Global Fund for AIDS Tuberculosis and Malaria (GFATM). PEPFAR's critical activities of prevention, care and treatment of HIV/AIDS in Uganda disbursed over 150,000,000 USD between 2004 and 2005. These pressures created by public expenditures on the economy undermine progress in poverty eradication. It does seem important in consequence for the government to take a closer look at revenue mobilization or to rationalize the size of government spending.

Table 3.1: Uganda Budget Allocation by sector, 2000-2005 (%)

Sector	Financial Year				
	2000/01	2001/2	2002/03	2003/04	2004/05
Uganda					
Education	25	24	20	19	18
Health	7.3	8.5	12.2	12.3	11.3
Gender and Community Development	0.1	0.2	0.2	0.1	0.2
Water	2.4	2.2	4.5	2.9	3.3
Agriculture	1.4	2.5	4.8	3.4	4
***Other	64	63	59	63	63
Total	100	100	100	100	100
Total budget (Ushs '000,000,000)	1,770*	2,660	2,768	3,137	3,380

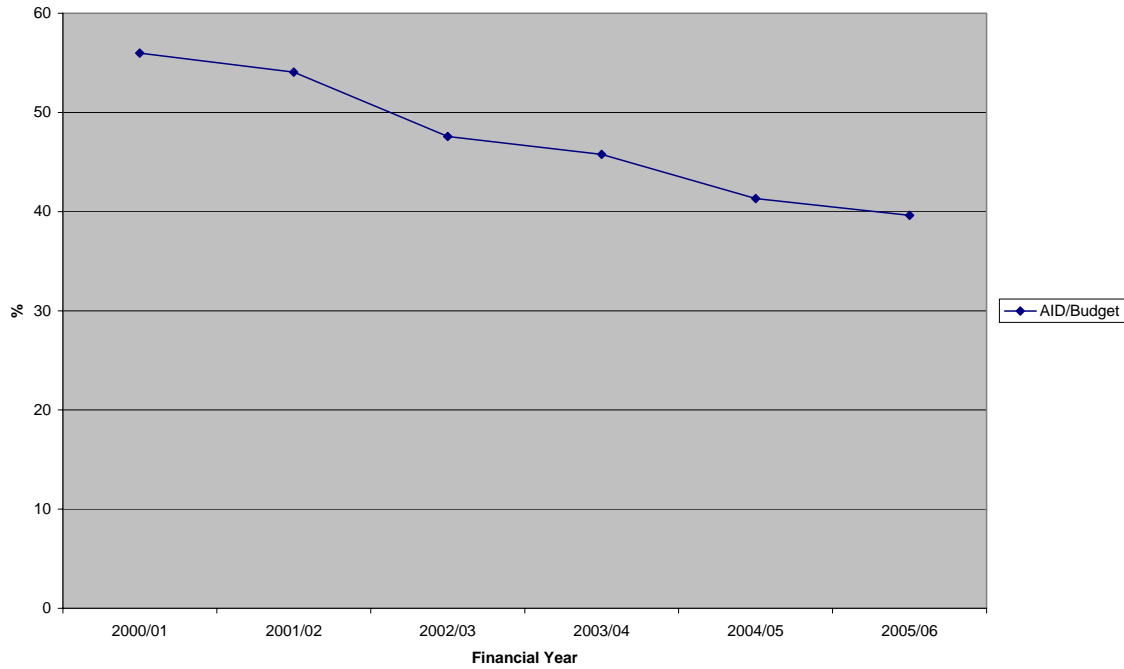
Source: Background to the budget (various years) and district budget framework papers (various years)

* This grand total excludes donor projects

**For national figures, others budget allocations include: interest payments, defense, economic functions,

GoU has over the years been allocating large amounts of resources to sectors that directly benefit children. Allocations to education and health sectors have been vast over the years as indicated in the table below. However, there is need to match these allocations with the magnitude of the problem being addressed and the specific areas of intervention to yield better results for children. For example in the education sector, more resource are allocated to infrastructure and not books, better training for teachers and addressing social factors such as early marriage, child work, that cause children to leave school even if much money is allocated for them

Figure 2: Aid as a share of the Ugandan Budget, 2000/1-2005/6 (%)

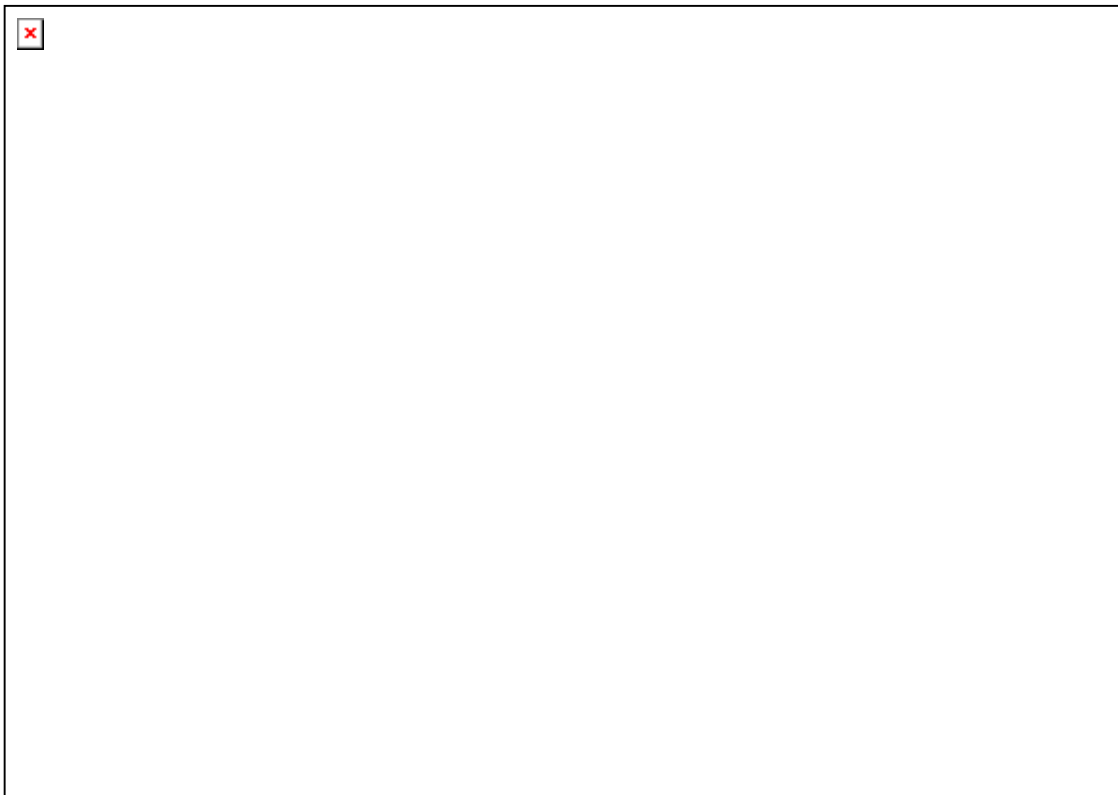


Source: GOU Background to the Budget, various years

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The chart below shows the recurrent expenditure of the government of Uganda in the financial year 2004/5

Graph I: Central Government total recurrent expenditure by function, 2004/05 (by percentage)



The above figure, provides evidence of substantial allocation of resources for recurrent expenditure to sectors like education (7.74%) and health (5.37%) which fall under the National Priority Programme Areas (NPPA) and benefit not only children but the entire population. Much as allocation of resources to the health sector is comparatively high and there is improvement in health output indicators like immunization levels, Infant Mortality Rate and Maternal Mortality Rate has remained high. It is also difficult to relate this to resource allocation since the exact amount that is spent on children in the sector is not specified.

On education, because of the desegregation of sub-sectors, i.e. primary education, secondary education, tertiary institutions and others, it can be easily established that the budget allocation favours children. For example in financial year 2005/06 most of the resources (67.1%)³ was allocated to primary education. Consistently primary education sub-sector has been prioritized and allocated most of the resources as shown in the table below.

Table 2: Summary of education sub-sectoral budgetary shares during Financial Year 2005/06.

Sub-sector	Budget Share
1. Primary Education	67.1%
2. Secondary Education	16.1%
3. Business, Technical, Vocational Education and Training	3.9%
4. Tertiary	11.1%
5. Others	1.1%

Source: Education Sector annual performance report 2005/06

One sector which is grossly under-funded is the Community and Social Services which is the principle sector responsible for child protection, promotion of social protection, equity, human rights, culture, decent work conditions, empowerment for women, children, youth, IDP, the elderly and people with disabilities. In financial year 2004/05, Community and Social Services was allocated a paltry 0.48% of the recurrent budget. With the minimal funding they receive, ministry officials are not in a position to provide adequate technical guidance and support to the LGs which are the main service providers. Government expenditure currently exceeds its revenues and the fiscal deficit shortfall is financed by donor support.

³ Ministry of Education and Sports: Education Sector Annual Performance Report 2005/05

3.2 Local Government Expenditure on children

Table 3: Functional Analysis of Decentralised District Administration recurrent Expenditure (By Percentage)

Description	1990/00	2000/01	2001/02	Revised 2002/02	Approved 2003/04
Education	63.5	56.6	55.8	55.8	55.8
Heath	12.1	15.1	16.3	16.3	16.3
Community and Social Services	1.0	0.8	1.0	1.0	1.0
Economic Services	1.9	2.0	0.4	0.4	0.4
Agriculture	3.1	3.3	2.9	2.9	2.9
General Public Administration	15.1	16.7	17.5	17.5	17.5
Water	0.5	2.3	1.8	1.8	1.8
Grand Total	100	100	100	100	100

Source: Background to the budget for FY 2004/05

Uganda is characterized by a fast decentralization process in parallel with development of the General Support budget (GSB) funding modality. GBS indirectly finances a large part of LG budgets and these funds have been used by both Government and Donors as windows to channel funds to service delivery units. The Local Government sector accounts for more than 30% of the total public expenditure and over 90% of total funding comes from Central Government grants largely GBS. Mention needs to be made of the fact that The Community Services Directorate which handles child protection among several other issues receives on average barely 1% of the district LG budgets. It should be emphasized here that the Social Development Sector deals with cross-cutting issues that impact on the success of other sectors and probably accounts for the poor indicators in sector such as education and health despite heavy investments.

4.0 DEVELOPMENT AND USE OF MONITORING INSTRUMENTS TO TRACK WFFC/MDG TARGETS

The framework for monitoring poverty in Uganda is inclusive and involves government, Civil Society Organisations, development partners and a number of stakeholders at sector levels. The National Integrated M&E Strategy (NIMES) was established in 2003 as a strategy for monitoring and evaluating the performance of the PEAP. NIMES has addressed challenges like limited flow of information, weak M&E coordination arrangements, gaps in information and underutilisation of information.

4.1 Poverty Status Reports

The Poverty Monitoring and Analysis Unit in the Ministry of Finance, Planning and Economic Development (MFPED) is the lead institution for monitoring the outcomes of poverty eradication efforts. The Poverty Status Report (PSR) is a periodic publication (every two years) by MFPED on Uganda's poverty status and is one of the instruments through which government systematically monitors progress and constraints to implementing PEAP. As mentioned earlier PEAP targets though not exactly the same with those of MDGs/WFFC goals, are very similar therefore monitoring PEAP tantamount to monitoring MDG/WFFC targets.

The Uganda Participatory Poverty Appraisal Process (UPPAP) which is housed in the MFPED carries out qualitative assessment of the poverty situation among the different communities in Uganda. However, the last UPPAP study that included children issues was in 2002 under the leadership of Save the Children (UK). Such studies strengthen the implementation of children concerns in the PEAP. MFPED uses data from other sector ministries in the compilation of the PSR.

4.2 Annual Sector Reviews

Every year the different sectors namely education, social development, health, agriculture etc. carry out an annual review of the performance of the sector against its planned targets and produce annual sector performance reports. These sectors review all progress including those relating to children, however, it should be noted that some of the sectors are still weak on child indicators, save for education and health sectors. Efforts are made by the social development sector actors to influence the quality of sector plans for children during these annual reviews.

4.3 Household and demographic Surveys

Uganda National Household Surveys (UNHS) are large-scale surveys of national outlook that have been carried out by Uganda Bureau of Statistics (UBOS) since 1998. The aim of the survey is to collect high quality and timely data on social, demographic and economic characteristics of household populations for monitoring economic performance of the country. Government ministries and sectors responsible for children as well as other actors such as UNICEF are given the opportunity to influence the instruments used for these surveys to highlight concerns for children. The UNHS 2005/2006 report that has just been released indicates the plight of children affected by conflict in northern Uganda and the status of child labour.

Uganda Demographic and Household Survey (UDHS) collects information on household characteristics such as fertility levels and preferences, awareness and use of family planning methods, childhood mortality, maternal and child health, maternal mortality, breastfeeding practices, nutritional status of women and young children, malaria prevention and treatment, women's status, domestic violence, sexual activity, and awareness and behavior regarding AIDS and other sexually transmitted infections in Uganda.

4.5 Uganda Human Rights Commission (UHRC)

The UHRC is the body that has been charged with the responsibility of monitoring government's policies, plans, programmes as well as laws to assess the extent to which they are human rights compliant. The UHRC produces annual reports on the human rights situation in the country. They have a department responsible for child abuse and neglect and it has already prosecuted some cases of abuse. Since 2004, the annual reports of the Commission have a section for children highlighting different concerns such as the plight of children in conflict affected areas, child abuse and neglect. The UHRC also sensitizes the community on human rights.

4.6 Ministry of Gender Labour and Social Development

MGLSD which is the line ministry responsible for children issues is in charge of setting standards, supervision of implementation, monitoring and evaluation. However due to resource constraints this role is not being executed effectively.

National Council for Children (NCC) is a statutory body which is responsible for planning for children and monitoring implementation of those plans, documenting progress and advocating for gaps that need to be fulfilled. The Council periodically carries out studies and produce reports on the situation of children in Uganda. NCC is in the process of finalizing Uganda State of the Children Report 2006.

4.7 Local Government Level

All Local Governments (LGs) are mandated to prepare and implement a three-year rolling development plan. As part of the planning process each sector in the LGs carries out an assessment of their performance against sector targets and also against national targets. Ordinarily, the NCC is linked to the Local Governments in terms of ensuring that children are planned for in all the sectors. Secretaries for Children, provided for in the Children Act also fall under the local governments. Since planning in the Local Governments start at community level, Secretaries for Children have an opportunity to influence planning for children.

4.8 Reporting on implementation of International Human Rights Instruments and other government commitments

GoU has been observing its obligation as a states party that has ratified the various human rights instruments by preparing periodic progress reports on their implementation. It has been preparing and submitting periodic reports on the implementation of the UN CRC and its Optional Protocols. The CSOs in Uganda under the coordination of UCRNN has also been active in preparing Alternative reports to the UN Committee on the implementation of these instruments in Uganda. In response to the observations and recommendations of the CRC committee to Uganda in September 2005, government has prepared an action plan to implement and monitor the observations and recommendations which will contribute to a WFFC.

UN agencies have been supporting GoU in implementing PEAP through policy dialogue, poverty monitoring. UNDP supports MDG country reporting and the production of the National Human Development Report as well as other development programmes.

5.0 ENHANCING PARTNERSHIPS, ALLIANCES FOR CHILDREN AND PARTICIPATION

5.1 Partnerships and alliances

The government of Uganda redirected its development planning and implementation to address Poverty Reduction Strategies in 1997. This meant that all development programming had to be through the sector wide approaches. While this happened long before the WFFC goals were agreed upon, it created an opportunity for partnerships, alliances and development of coordination mechanisms. The Poverty Eradication Action Plan (PEAP) is the overarching planning framework from which sectors draw their plans. Children's issues are addressed within these sectors where government works in close collaboration with national and international NGOs, multi lateral and bilateral donors, the private sector and other development partners such as the UN agencies.

Participation in the sectors includes technical support, financial support and coordination by the different actors. Several efforts towards enhancing alliances towards achievement of the WFFC goals have been realised. These include:

- Participation by donors and other development partners in the review of the Poverty Eradication Action Plan and in the development of strategic plans for different line ministries especially those where their areas of interventions fall. The partners reviewed PEAP from a Child Rights Perspective.
- Efforts by government to streamline funding of development programmes, where government encourages partners to channel their financial support through basket funding rather than project funding. This has received response from some donors and development agencies, however, some still prefer direct project support.
- The Consolidated Appeal Process (CAP) has over the years created a strong alliance between, government, UN agencies, national and international NGOs. Through the CAP process, there has been considerable support in addressing the situation of children and women in conflict affected areas. Resources raised have been used to provide for services such as health, education, shelter and other protection challenges faced by internally displaced persons as a result of influx of very many people to safer places in protected camps.
- Policy development such as: the Orphans and Vulnerable Children Policy and Strategic Plan of Implementation, the Social Development Sector Investment Plan, whose priorities include issues of children's rights realisation, the draft Gender in Education Policy, the draft policy on alternative forms of disciplining and the protection policy.
- A juvenile justice committee that deals with issues of children in conflict with the law including streamlining implementation of guidelines for handling such children. Members of this committee include representatives of government, development partners and CSOs
- Alliances have also been built around protection related activities including training of the army on children's rights, and promotion of observance of child rights in partnership with district local governments, implementation of the OVC policy and its strategic action plan, initiation of child toll free phone help line for children to report abuses and seek redress, revitalization of birth and death registration, recovery and resettlement of formerly abducted children and the current resettlement programme of children and women from Karamoja living on the streets.
- Reporting on international treaties including the second periodic report 2005 on the implementation of the Convention on the rights of the Child, initial reports on the implementation of the Optional Protocols on sexual exploitation and on the involvement of children in armed conflict. Currently, Uganda Child Rights NGO Network (UCRNN) the umbrella organization for child rights organizations in

Uganda is coordinating preparation of complementary reports on the implementation of the above protocols. The reporting process provided opportunity for assessment of the situation of children and redirection of efforts/actions to ensure observance of their rights UCRNN has also been vital in facilitating collaboration/networking with government. The number of NGOs and CBOs involved in child rights work in Uganda has been steadily increasing.

- Efforts towards realizing health rights for children especially with increased opportunities for immunization, treatment of malaria and tuberculosis. These were supported by large funds such as the GAVI and the Global Fund for TB, AIDS and malaria, among other donor funding sources. NGO partners participated in the implementation of these activities thus accelerating service delivery.
- Increased involvement by NGOs, donors and development partners in coordination of education activities including provision of water and sanitation facilities, construction and rehabilitation of schools, especially in conflict affected areas with dire need for temporary learning centres, support for back to school campaign and other related campaigns to get more girls in schools and encourage them to complete and achieve. This has enhanced government emergency response in the conflict areas.

5.2 Participation of children

The concept of child participation is relatively new and less developed in Uganda. It tends to be a confine of human rights agencies and child rights actors including government institutions, NGOs and development partners. Attempts have been made by different stakeholders to promote child participation and some achievements have been realized at the level of school and to some extent at the community level in terms of projects. Evidence from a recent study on revealed that child participation is carried out on a small scale by different agencies; the practice is not uniform mainly based on the various perceptions of what participation is. Some attempts have been limited to consultation with children. The outcomes of these efforts have also not been reflected in the development planning and budgeting and in the lives of children themselves, signifying ineffectiveness of these approaches to child participation.

While child participation is not yet practiced country wide, Uganda's national legislation provide for participation of children on issues concerning their lives and development in the Constitution and the Local Government Act. Article 29 of the Constitution of Uganda provides for the rights of all persons to freedom of speech and expression, freedom of thought, conscience and belief, freedom to practice any religion in a manner consistent with the Constitution, freedom to assemble and freedom of association. This means that all persons, including children have the right to participate in as far as this provision is concerned. The Constitution further provides in Article 38 the right of every citizen to participate in the affairs of government, individually or through representatives in

accordance with the law, and the right to peaceful activities to influence government policies. Participation is further articulated by the Local Government Act, Cap.243, section 8 of the third schedule, councilors are required to maintain a close contact with the electoral area, and consult the people (including children) on issues to be discussed in the council meetings. The Constitution provides a basis for child participation at the national level. These two laws provide a basis for child participation hence Ministry of Gender, Labour and Social Development in partnership with UNICEF and UCRNN is currently in the process of preparing National Guidelines on Child participation.

6.0 ACHIEVEMENT OF WFFC PLAN OF ACTION AND RELATED MDG TARGETS

By endorsing ‘A World Fit For Children’ governments committed themselves to achieving a set of targets and benchmarks for children by 2010. There are four priorities for children namely; promoting health lives, providing quality education, protection against abuse, exploitation and violence and combating HIV/AIDs. The specific goals and actions are linked to the MDGs.

6.1 Promoting Healthy Lives

Table 4: Summary of situation on achievement of WFFC/MDG Targets

WFFC Goals for promoting healthy lives	Data Source	2002	2005/2006	PEAP Target (2009)	MDG Targets (2015)
Goal 1: By 2010, reduction in the infant and under-five mortality rate by at least one third, in pursuit of the goal of reducing it by two thirds by 2015 – <i>linked to MDG 4 & 6</i>	UDHS	88.4 (IMR)	Not available	68	31
		152 (U5MR)		103	60
Goal 2: By 2010 reduction in the maternal mortality ratio by at least one third, in pursuit of the goal of reducing it by three quarters by 2015 – <i>linked to MDG 5</i>	UDHS	505	Not available	354	131

WFFC Goals for promoting healthy lives	Data Source	2002	2005/2006	PEAP Target (2009)	MDG Targets (2015)
Goal 3: By 2010 reduce malnutrition among children under five by at least one third, with special attention to children under two years of age, and reduction in the rate of low birth weight by at least one third of the current rate – <i>linked to MDG 1</i>	UDHS	Stunting in under 5 39% (2001) LBW= Not available	Stunting in under 5 -32%	28%	19%
Goal 4: By 2010, reduce proportion of households without access to hygienic sanitation facilities and safe drinking water by at least one third – <i>linked to MDG 7</i>	UNHS 2005/6	Access to safe water 55%	Access to safe water 68% (64% in rural & 87% Urban areas)	100% by 2010	62% by 2015
Goal 5: Development and implementation of national early childhood development policies and programs to ensure the enhancement of children’s physical social emotional, spiritual and cognitive development	HSSP II		Programs under maternal & child health (cluster 2)		
Goal 6: Development and implementation of national health policies and programs for adolescents, including goals and indicators, to promote their physical and mental health ⁴			Programs exist in HSSP II (Cluster 2).		
Goal 7: Access through the primary health-care system to reproductive health for all individuals of appropriate ages	HS Performance Report	20.3% deliveries in Health facilities	25% of deliveries take place in Health Facilities	50%	

6.1.1 Reduction in Infant and Child mortality

Although Uganda’s immunization coverage has climbed from 72% in 2003 to 89% in 2005, its Infant Mortality Rate (IMR) of 88.4 per thousand live births and Under 5 Mortality Rate of 152 per thousand is still very high. Infant and child mortality has shown an increasing trend from 1995 to present. The PEAP target is 68 per 1000. It is unlikely that Uganda will achieve the MDG target of 31 per 1000 live births by 2015.

The major causes of child deaths in Uganda are malaria, acute respiratory infections, malnutrition and maternal conditions. Other factors contributing to the high infant mortality are high fertility rates (6.9 children per woman), and home deliveries. To address this the Ministry of health is implementing The Uganda National Minimum Health Care Package consisting of 4 clusters

⁴ Other programmes for adolescents are being implemented with support from development partners like UNFPA, UNICEF and NGOs like Save the Children

- Cluster 1: Maternal and Child Health
- Cluster 2: Control of Communicable diseases
- Cluster 3: Control of non-communicable diseases
- Cluster 4: Health Promotion, Disease Prevention and Community Health Initiatives

Early childhood development programme has been piloted in a number of districts by Ministry of Health with funding from World Bank. Implementation of the programme has been through NGOs and CBOs.

6.1.2 Reduction in Maternal Mortality

Uganda is among the eight countries with the highest maternal rates in the world. Uganda's Maternal Mortality Ratio is 505 per 100,000 live births and the MDG target is 131 per 100,000 live births. The main causes of maternal mortality in Uganda are bleeding, obstructed labour, hypertension and abortion. Maternal mortality rates have not improved over the last five years because of poor maternal nutrition, short birth intervals, early age at first birth and lack of trained assistance at birth (only 25% of pregnant women deliver from health facilities). This in turn affects child survival and development because some of the mothers die with their babies and the babies who survive face challenges of growing up without their mothers. Government in its HSSP II plans to reduce Maternal Mortality Rates through among others increasing the percentage of deliveries which take place in health facilities from 25% to 50% by 2009.

6.1.3 Reduction in percentage of households without access to water, hygienic sanitation facilities and safe water

Access to safe water and sanitation in Uganda has improved. According to UNHS 2005/6, 67% of all Ugandans have access to safe water (64 in rural access and 87% in urban areas). This means that the MDG target of 62% access to safe water has already been achieved. It should be noted however that there are also frequent breakdown of facilities such as boreholes some of which communities share with schools and that there are regional variations.

GoU policy is that households are responsible for their own sanitation with government being responsible for sanitation in public places and urban centres. Studies have shown that many households do not consider sanitation a priority. According to the UNHS report 2005/2006, 10% of households in Uganda do not have toilet facilities. Government should play a big role in social mobilisation and education of the masses on the benefits of good sanitation. Poor families such as Child headed families especially need to be supported to have sanitary facilities in the households because they may not on their own manage to do so.

6.2 Providing Quality Education

Table 5: Summary of situation on achievement of WFFC/MDG Targets

WFFC Goals for providing quality education	Data Source	2002/03	2005/2006	PEAP Target (2009)	MDG Targets
Goal 1: Expand and improve comprehensive early childhood care and education for girls and boys, especially for the most vulnerable and disadvantaged children	Education Sector Annual Performance Review, 2006		Covered under Education for All Targets		
Goal 2: By 2010, reduce the number of primary school-age children who are out of school by 50 per cent and Increase net primary school enrolment or participation in alternative, good quality primary education programmes to at least 90 per cent	UNHS 2005/6	86%	84%	98%	100%
Goal 3: Eliminate gender disparities in primary and secondary education by 2005; and achieve gender equality in education by 2015; with a focus on ensuring girls' full and equal access to and achievement in basic education of good quality		55:45 (boys to girls in secondary schools)	51:49 (UNHS 2005/6)		50:50 at all levels by 2015
Goal 3: Improve all aspects of the quality of education so that children and young people achieve recognised and measurable learning outcomes especially in numeracy, literacy and essential life skills ⁵					
Goal 4: Ensure that the learning needs of all young people are met through access to appropriate learning and life skills programmes					
Goal 5: Development and implementation of national early childhood development policies and programmes to ensure the enhancement of children's physical social emotional, spiritual and cognitive development	Ministry of Education		Policy in draft form		
Goal 6: Achieve a 50 per cent improvement in levels of adult literacy by 2015, especially for women	UNHS	70%	69% (63% female and 76 male)		

6.2.1 Achieving Universal Primary Education

⁵ Refer to Table 6

Through its policy on Universal Primary Education, GoU has done well in the area of primary education especially as far as enrolment in primary schools is concerned. Primary school enrolment has tripled from 2.3 million to 7.6 million in 2005/6 with an estimated average Net Enrolment Ratio (NER) of 84%. UNHS 2005/6 revealed a number of reasons why children between 6 -12 who are not in school;

Table 6: Reasons for never attending school for children aged 6-12 years by sex

Reasons for not attending school	Male	Female	Uganda
1. Being too young to be in school	54.2%	52.2%	53.2%
2. Too expensive	8.5%	7.4%	7.9%
3. School too far away	5.6%	8.2%	6.8%
4. Had to help at home/family business	8.3%	11.2%	9.6%
5. Indifference to education	9.5%	8.7%	9.0%
6. Orphaned	0.7%	0.4%	0.6%
7. Disabled.	6.6%	5.6%	6.1%
8. Other reasons (insecurity, displacement etc.)	6.6%	6.3%	6.8%

Source: UNHS, 2005/06

However, the main concern on primary education is the quality of education and the high rate of dropout rates, especially in the upper primary. National figures indicate a drop-out rate of 80%, with girls representing the majority of primary school drop-out.

Table 6: Reason for dropping out of primary school (%)

Reasons for dropping out of school	Male	Female	Uganda
1. Too expensive	35%	42.6%	39.5%
2. Completed desired level	4.1%	1.3%	2.5%
3. Had to help at home	0.7%	7.3%	4.5%
4. Indifference to education	30.7%	14.6%	21.3%
5. Poor academic progress	2.0%	4.4%	3.4%
6. Sickness/calamity.	13.8%	12.7%	13.2%
7. Other reasons	13.7%	17.1%	15.6%

Source: UNHS 2005/6

WFFC also requires Improvement in all aspects of the quality of education so that children and young people achieve recognised and measurable learning outcomes especially in numeracy, literacy and essential life skills. The following are the achievement of Uganda as far as education quality indicators are concerned.

Table 8: Relationship between primary enrolment growth rate and some access/quality indicators (2003-2006).

Indicator	2003	2004	2005	2006*
Pupils enrolment (Gov aided primary schools)	6,835,525	6,687,574	6,609,677	6,439,791
Teachers on payroll (As of June 2006)	121,772	124,137	126,227	126,990
Number of Classrooms	73,104	78,403	83,740	85,043
Pupil Teacher Ratio	56	54	52	51
Pupil Classroom Ratio	94	85	79	76
Enrolment Growth rate	4%	-2%	-2%	-2%
Pupil Toilet Stance Ratio	67	61	57	

Source: EMIS, 2006* Preliminary Results

There is also regional disparity in the education quality indicators with the conflict affected districts performing poorly in terms of indicators like teacher pupil ratio, pupil classroom ratio, completion and achievement rates because of displacement of schools to learning centres which are overcrowded with poor sanitary conditions

According to a study done under the National Assessment of Progress in Education (NAPE), numeracy levels of Primary Six (P6) pupils has slipped from 41.5% in 1999 to 20.5% in 2003. The study also found out that performance of children in urban schools was much better than those in rural areas where the majority of children study. The literacy and numeracy levels in P6 in urban schools stood at 40% and 68% respectively in 2003 against 8% and 15% for rural schools.

It is therefore true that while many children are going to school, many drop out before Primary five (P5) or graduate without even mastering a minimum set of cognitive skills. This has been attributed to overcrowded classes, poorly qualified teachers and ill-equipped schools. While Uganda can be credited for opening up opportunities for access to primary education, the issue of retention of children to complete the primary school cycle and the quality of education still compromises the achievement of the WFFC goal of providing quality education.

6.2.2: Eliminating gender disparity in primary and secondary education

The MDG target here is eliminating gender disparity in primary and secondary education preferably by 2005 and at all levels by 2015. The UPE policy of free education entitles equal access to schools to both girls and boys. Although there has been a significant improvement in primary education sex ratios, enrolment figures show that with higher classes, more boys are enrolled than girls. Girls are more likely to drop out of school due to social and cultural disadvantages they face. For primary and secondary education, the

gender imbalance is 51:49 and 55:45 respectively in favour of boys. The main reasons given for girls dropping out are lack of school fees (in times of scarcity most parents discriminate against girls in favour of boys), pregnancy and early marriage which are sometimes forced.

6.3 Protection against abuse, exploitation and violence

There are no specific target under the WFFC goal of protection of children against abuse and exploitation. Child protection is also not include in the MDGs hence government has not developed specific targets to be achieved in its Poverty Eradication Action Plan (The situation regarding child protection is discussed in the following section.

Table 9: Summary of situation on achievement of WFFC/MDG Targets

WFFC Goals for Protection against abuse, exploitation and violence⁶
Goal 1: Protect children from all forms of abuse, neglect, exploitation and violence
Goal 2: Protection of children from the impact of armed, conflict and ensure compliance with international humanitarian law and human rights law
Goal 3: Protect children from all forms of sexual exploitation including paedophilia, trafficking, and abduction

6.3.1 Child abuse and violence against children

Violence against children is still a rampant phenomenon in Uganda occurring at home and in schools. According to a study done by Raising Voices with support from Save the Children in Uganda⁷ among 1406 children and 1093 adults in 5 districts, 98% of the children reported experiencing physical and emotional violence, 75.8% reported experiencing sexual violence and 74.4% reported experiencing economic violence.

The majority of the adults in the study (90%) agreed that in their community children were deliberately beaten, shouted at, and denied basic needs such as food. The adults however did not label these acts as violence but as “punishment” meant to guide children.

Government has put in place enabling policy and administrative frameworks to ensure child protection but their implementation need to be strengthened.

⁶ There are no MDG and PEAP targets for for protection of children against abuse, neglect, exploitation and violence.

⁷ Raising Voices and Save the Children in Uganda, Violence Against Children: The voices of Ugandan Children and Adults, 2005

6.3.3 Impact of Armed Conflict

The children living in the conflict areas of Uganda face not only the violence that confronts children in other parts of the country but also war related violence. It is estimated that over the last 20 years of conflict, the LRA has abducted over 30,000 children. Of these, about 27,000⁸ have returned and an unknown number remains unaccounted for⁹. In captivity the LRA force children to kill family members and friends in front of other children as a way of instilling fear and loyalty. This has caused devastating psychological impact on the children who are less likely to willingly return to a community in which they participated in maiming and torturing family members, neighbours and friends. Both boys and girls are made to participate in combat while girls suffer the extra burden of being forced to be sex slaves to LRA commanders.

To reduce abduction of children, government created IDP camps which are protected from the rebels. In the implementation of the IDP policy government has endeavored together with other development partners to provide social services to the children the camps. Learning centres have been created near the camps to ensure access to primary education and health services and well as food distribution is carried out on the camps. cattle rustling.

However the condition in the camp is has not been satisfactory. Assessment by both government and non government agencies including Uganda Human Rights Commission (UHRC) reveal that the living conditions in the IDP camps are very poor characterised by poor and inadequate shelter, inadequate health services, high incidences of diseases arising out of poor sanitation, overcrowding and unprotected water sources. With the cessation of hostilities government has decongested to camps to smaller settlements near the original villages to ensure better service provision.

6.3.4 Sexual Exploitation

Child sexual exploitation is still a common practice especially of girls because they are not in a position to resist advances from men. Older men are increasingly looking for younger sexual partners in the belief that they are more likely to be HIV negative. Girls aged between 15-19 are eight times more likely to be HIV positive than boys of the same age, 2.7% and 0.3% respectively¹⁰. Early marriages and pregnancies are also common and are sometimes condoned by the parents/guardians. Government together with development partners has revitalised birth and death registration to deter some parents

⁸ Data from reception centres in northern and northeastern Uganda

⁹ This includes children who escaped from captivity and went straight to their communities, are still in captivity or were killed in captivity

¹⁰ Opio, Alex "HIV/AIDS: Country Situational Updates for the Joint Annual Review of HIV/AIDS. Kabira Country Club, Kampala

deliberately marry off girl children claiming they are of age. Another practice which is on the decline but still exists is Female Genital mutilation (FGM). The decline can be attributed to massive campaign against it by government and role modelling by prominent ladies from areas where it is practiced.

6.3.5 Child Labour

Definition of child labour in Uganda is contentious in that what others consider to be child labour is taken by the perpetrators as child work which is a contribution of the child towards the well-being of the family. Children in Uganda are engaged in different kinds of work mainly in the non-formal sector. Children work in bars and restaurants as waiters and waitresses, in homes as housemaids especially girls, on farms picking tea and coffee, in mines and quarries digging sand and stones and at construction sites as porters. Some of this work is hazardous to the health and development of the children hence tantamount to child labour. The work the children do also denies them the opportunity to go to school. While child labour is harmful to children, there is also evidence of children who need to work in order to survive. Child headed families and children facing some vulnerabilities have to work for food, money for accommodation, fees for themselves and or their siblings, resulting in a challenge for development workers on whether child labour should be prohibited or regulated.

The situation in the conflict affected areas regarding child labour is even worse because parents' capacities to adequately provide for the children is compromised by insecurity and displacement. Children are therefore forced to complement the efforts of the parents by engaging in work.

According to the UNHS report 2005/6 32% of all children aged between 5-17 in Uganda were working and that 16% of all children aged 5-17 in Uganda were child labourers.

Together with partners government has commissioned studies to reveal the magnitude of the problem of child labour. LGs are now being encouraged to enact and implement byelaws to address child labour existing in various forms in their areas of jurisdiction.

6.4 Combating HIV/AIDS

Table 10: Summary of situation on achievement of WFFC/MDG Targets

WFFC Goals for Combating HIV/AIDS	Data Source	2002	3005/2006	PEAP Target (2009)	MDG Targets

Goal 1: By 2003, establish time-bound national targets to achieve the internationally agreed global prevention goal to reduce by 2005 HIV prevalence among young men and women aged 15 to 24 in the most affected countries by 25 per cent and by 25 per cent globally by 2010, and to intensify efforts to achieve these targets as well as to challenge gender stereotypes and attitudes, and gender inequalities in relation to HIV/AIDS, encouraging the active involvement of men and boys.	Sero-survey (2005)	6.2%	6.4%	5%	
Goal 2: By 2005, reduce the proportion of infants infected with HIV by 20 per cent, and by 50 per cent by 2010, by ensuring that 80 per cent of pregnant women, accessing antenatal care have information, counselling and other HIV prevention services available to them, increasing the availability of and by providing access for HIV-infected women, and babies to effective treatment to reduce mother-to-child transmission of HIV, as well as through effective interventions for HIV infected women, including voluntary and confidential counselling and testing access to treatment, especially anti-retroviral therapy and, where appropriate breast milk substitutes and the provision of a continuum of care.	Annual Health Sector Performance Report 2004/5		22% (Mother to child transmission) 78% of women are receiving counselling at PMTCT sites.		

Uganda has performed well regarding the MDG target of halting and reversing the spread of HIV/AIDS. HIV/AIDS prevalence rate has stagnated between 6% - 7%. This target was achieved way back in 1996. The 2005 sero-survey reported the national prevalence rate at 6.4%. There are regional differences with the conflict affected northern Uganda having the highest rate of 9%. Government has continued to open centres for PMTCT to reduce transmission of HIV to children. The number of sites for PMTCT service delivery outlets has grown from 11 in financial year 2001/2 to 224 in 2004/5. The proportion of the population with correct knowledge about condom use has 55% in 2000 to 70% in 2005.

Table 11: HIV Prevalence by sex and age 2004/2005

Age	Percentage HIV Positive		
	Male	Female	Both sexes
15 – 19	0.3	2.6	1.5
20 – 24	2.4	6.3	4.7
25 – 29	5.9	8.7	7.6
30 – 34	8.1	12.1	10.3

35 – 39	9.2	9.9	9.6
40 – 44	9.3	8.4	8.8
45 – 49	6.9	8.2	7.6
50 – 54	6.9	5.4	6.1
55 – 59	5.8	4.9	5.4
Age 15 - 49	5.0	7.5	6.4
Age 15 - 59	5.2	7.3	6.3

Source: Ministry of Health, HIV/AIDS Sero-Behaviour Survey, 2004 - 05

The fear however is that of complacency that may compromise this achievement. Statistics released by Ministry of Health indicate that there were 132,000 new HIV cases registered in 2005 alone including 27,000 children. 60% of the new infections were among married women aged 30-34 years and married men aged 40-44 years. This was attributed to men engaging in extra-marital sex without using condoms. Mother to Child transmission constituted 22% of the new infections.

Table 12: HIV Prevalence among children below 5years

Background characteristic	Percent HIV positive
Age	
Less than 18 months	1.0%
18 – 59 months	0.5%
Sex	
Male	0.7%
Female	0.7%
Mothers HIV status	
Positive	10.2%
Negative	0.1
Missing (Not Interviewed)	0.8
Residence	
Urban	1.5
Rural	0.6
Survival status of mother	
Alive, not sick	0.7
Alive, sick	0.7
Alive illness status missing/Not in the household	0.4
Dead	4.4
Don't Know/missing	0.0

All children	0.7
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Source: Ministry of Health, HIV/AIDS Sero-Behaviour Survey, 2004 - 05

According to the HIV/AIDS sero-behaviour study carried out by the Ministry of Health in 2004/5, 1% of children below 18 months were HIV positive, and 1.5% of children between 15 and 19 years were HIV positive, the majority of them being girls.

7.0 SUMMARY OF LESSONS LEARNED AND INITIATIVES UNDERTAKEN SINCE 2002 FOR ACCELERATING THE PROGRESS

7.1 Promoting Healthy lifestyles

The target of reducing infant and child mortality is not likely to be met by the deadline although government has put in place extra effort through child days to maximize immunization, de-worming and vitamin A supplementation. Improving maternal health will not be achieved unless programmes are put in place to delay first pregnancy, reduce the high fertility rate, improve on attendance of ante-natal and post natal services as well as delivery in health facilities or with assistance from trained birth attendants. Attitude of health workers towards pregnant mothers has also been cited as a hindrance. Women with disabilities face even greater challenges as health workers give the impression that they are not expected to engage in sex let alone get pregnant.

It is unlikely that this goal of reducing the percentage of people living in poverty will be achieved in spite of the efforts that have been made by government. Growth of GDP averaged 5.5% per annum well below the PEAP target of 7% with agricultural growth being less than 2% (the majority of Ugandans are engaged in agriculture which has been affected by unpredictable

weather conditions, crop and animal diseases and declining soil fertility on account of increasing land fragmentation due to population pressures and environmental degradation). The high population growth rate of 3.4% is putting more pressure on land leading to encroaching on forest reserves and swamps. The issue of environmental sanitation is a big challenge not only in rural areas due to lack of pit latrines but also in urban areas due to poor disposal of wastes and poor drainage

Another factor that is affecting poverty eradication is the very low domestic revenues, oscillating between 11% - 12.5% of GDP. Donors fund 48% of Uganda's budget. Insecurity has also been a hindering block to poverty eradication as it affects productivity and access to services

7.2 Promoting Quality Education

Through the introduction of UPE, primary school enrolment has increased and this increase has resulted in more children qualifying for entry into post primary schools. Some of the UPE candidates have missed entry to post primary schools due to poverty prompting government to introduce universal post primary education to give children more access to education at this level. However, achieving the target of is going to elude government if the two fundamental issues of quality and drop out is not addressed. Government needs to look at the other expenses like scholastic materials and uniforms which prohibit from attending school. At 3.4% per annum, Uganda has one of the fastest growing populations in the world. If left unchecked, it is feared that the population pressure will impose itself on social service delivery both in terms of quantity and quality especially in the areas of education making it impossible to achieve some of the MDG/WFFC targets.

Much as there is an enabling policy environment that provides equal opportunity for boys and girls, government need to address deeply rooted social and cultural encumbrances that hinder girls from taking advantage of the existing opportunities. Otherwise circumstances will continue to make girls drop out of school which makes them prone to abuses like early pregnancy and marriage and child labour among others. Government has tried to address the school environment to make it more convenient to the girl child.

Following the success of UPE in ensuring free access to education for all children in Uganda, government has come up with the Universal Post Primary Education and Training (UPPET) policy to ensure that pupils who complete the primary school cycle are absorbed in post primary institutions. The UPPET programme is scheduled to start in 2007. In recognition of the limited capacity of government aided secondary schools, government has co-opted private post primary institutions to participate in the implementation of the programme. For various reasons, access to primary education still eludes some categories of children such as children with disabilities because of unfriendly facilities at the schools, children heading households who have to work in order to look after their siblings. There also remains a big question about the quality of education being received and high drop out rates.

Presently, most of the pupils who complete the primary education cycle do not go to secondary schools and other post primary institutions due to the high costs of education at that level. A study carried out by UCRNN on child sexual abuse and exploitation (2004) revealed that when girls drop out of school they are either married off even when they are below the age of 18 or are forced to take up employment as housemaids and other forms of child labour, hence the longer children stay in school, the safer they are.

The country is also bound to realize other benefits by keeping children in school. For example according to the Ministry of Health¹¹ educating a girl child up to Primary Seven

¹¹ Ministry of health: Health Sector Strategic Plan II (2005/06 – 2009/2010)

lowers Maternal Mortality Rate (MMR) by 25% and up to Senior Four lowers MMR by 50%.

7.3 Combating HIV/AIDS

Considerable progress has been combating HIV/AIDS and has achieved the target but complacency may lead to a reversal of this positive trend. The success Uganda has achieved can be attributed to its policy of openness, enabling policy environment, working in partnership with several actors, availability of funding for HIV/AIDS activities. The media has also made a big contribution in awareness creation among adults and children (Straight Talk and Young Talk). Government is now making a shift to putting emphasis on treatment and mitigating the impact of HIV/AIDS as well as preventing mother to child transmission of HIV/AIDS.

7.4 Protecting children from abuse, exploitation and violence

One of the fundamental challenges Uganda faces in ensuring it puts in place an environment that is fit for children is the limited registration of births of children. Although Uganda has a law that requires that all births and deaths are registered (Birth and Death Registrations Act, CAP 309), the birth of the majority of children are not registered. There is not enough incentive and sanctions to ensure compliance with this law. Without registration hence proof of age, children are vulnerable to such abuses such as defilement, early marriages, recruitment into armed forces and child labour. Without birth certificates abusers cannot be pinned and sometimes they collude with parents and local leaders to perpetuate child abuse.

Government of Uganda with support from UNICEF is supporting a programme to register and issue birth certificates to children in all the 31 districts where it is operating out of a total of 80 districts. It should be noted that the community based registration of births and deaths do not cover all areas in the 31 districts but is limited to 540 sub-counties and 26,236 villages. Apart from UNICEF, Plan International and UNFPA are supporting registration of births and deaths in 7 and 1 district respectively. ???

Another area that has hindered protection of children from abuse and exploitation and needs to be urgently addressed is the lack of up to date data on the practice due to poor reporting and documentation of cases

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