

## Uganda

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### Executive summary

Uganda's economy slowed in 2017, with a real GDP of 4.4 per cent, down from 5.5 per cent the previous year, accompanied by an increase in poverty levels from 19.7 per cent in 2012/13 to approximately 21.4 per cent in 2016/17. Climatic, economic, conflict and other shocks - such as the prolonged dry spell in Karamoja in the Northeast; declining public financing in health and education; outbreaks of infectious diseases such as Marburg; and over-stretched social services - continued to pose additional threats to children's welfare in 2017.

Despite the challenges, the Uganda Demographic and Health Survey (UDHS) 2016/2017 showed declines in maternal and under-five mortality from 438 to 368 per 100,000 and from 90 to 64 per 1,000 live births, respectively, between 2011 and 2016. Uganda demonstrated its exemplary policy environment for 1.4 million refugees by maintaining open borders, fulfilling rights to 98 per cent of refugees settled in rural districts among 3.8 million Ugandans, and hosting a major international summit on refugees, which recorded US\$350 million in pledges by donors.

In 2017, UNICEF, with support from partners including the Korea International Cooperation Agency (KOICA), the UK Department for International Development (DFID) and the Global Alliance for Vaccines and Immunization (GAVI), enabled the Ministry of Health (MoH) and district local governments to improve service coverage in health, nutrition and WASH, through district-level health systems strengthening; implementation of high impact strategies and interventions such as the integrated community case management of childhood illnesses (ICCM), 22 key family care practices (KFCPs), strengthening multi-sectoral nutrition coordination at national level and providing direct support to the management of severe acute malnutrition in Karamoja and refugee-hosting districts.

As a result, more than one million children were reached with measles and pentavalent vaccines and 71 per cent of children under 5 in 19 districts were treated within 24 hours of onset of malaria, diarrhoea and pneumonia symptoms. Ninety three percent of the children under 5 in the 21 UNICEF supported districts received vitamin A, which significantly exceeded the national target of 60 per cent. A total of 26,693 children were treated for severe acute malnutrition (SAM) against a target of 23,123 and approximately 404,700 people (59.5 per cent) gained access to safe drinking water against the target of 680,000. A total of 101 communities (against a target of 75, or 134 per cent of target) were declared open defecation free.

Progress was made in integrated early childhood development (ECD) programming, resulting in 24 districts converging cross-sectoral ECD services, and 75,445 parents/caregivers (out of a target of 60,000) trained on key family care practices within a comprehensive parental education programme. Child marriage and female genital mutilation/cutting (FGM/C), which affect adolescent girls, were addressed through community mobilization. As a result, 25 villages in Karamoja declared abandonment of FGM/C in 2017 (out of the 30 targeted), bringing the total number of villages that have done so to 108.

UNICEF supported the Government and other partners to deliver critical life-saving services to refugees and host communities by enhancing risk-informed development planning in refugee-hosting districts and provided timely support to the Government to quickly contain an outbreak of Marburg virus disease in Eastern Uganda.

As of 31 December 2017, UNICEF Uganda received 43 per cent (US\$22.6 million plus US\$3 million carried forward from 2016) of its US\$52.8 million humanitarian appeal for 2017. Despite these low levels of funding, results in 2017 were still notable and most of the sector targets were reached. This was because UNICEF adapted its regular district-wide development programming to include the needs of refugees when necessary.

Under the auspices of the joint partnership 'Rethinking Public Finance for Children: Monitoring for Results' UNICEF led the production of a series of social policy briefs and the National Social Service Delivery Equity Atlas. In March 2017, the Uganda Bureau of Statistics (UBoS) released the UDHS 2016/2017 Key Indicators report, two months after the completion of the data collection. This was largely driven by using computer-assisted personal interviews supported by UNICEF.

Uganda has long been recognized as a global leader in technology-based innovations. In 2017, UNICEF supported automated decision-making support tools within the district health information management system (DHIS2) and an action tracker in health sector guidelines for local government planning, as well as a digital payment and school management pilot in partnership with MasterCard Labs.

In 2017, UNICEF saved US\$997,977 under the Business Operations Strategy with other UN agencies from the use of long-term agreements (LTAs) for the procurement of goods and services.

## Humanitarian assistance

UNICEF Uganda's humanitarian strategy supported the Government to incorporate emergency preparedness and response into its multi-year development planning, especially in refugee-hosting districts. New efficiencies in humanitarian action were achieved through cross-border programming within the Great Lakes Region. This allowed for regular information sharing and a common analysis on the situation and trends of children on the move, leading to tailored strategies to protect their rights. In other emergency-affected areas, community mobilization and behaviour change communication, combined with the provision of equipment and supplies, were also used to contain disease outbreaks such as Marburg virus disease, measles, cholera and malaria. The provision of nutrition supplies and technical support were used to strengthen district health services to respond to the increasing malnutrition caseloads in Karamoja and refugee-hosting areas.

Uganda hosted 1.4 million refugees, 98 per cent of whom were integrated with 3.8 million people in rural districts. South Sudanese refugees constituted 74 per cent of the total, and the rest were refugees from Burundi, the Democratic Republic of Congo (DRC) and other countries in the region. Sixty-one per cent of all refugees were children. Between January and December 2017, more than 350,000 new arrivals from South Sudan and 26,000 from other countries were registered by UNHCR in Uganda.

Results for refugee and other emergency-affected children and families in 2017 were notable given the low levels of donor funding. UNICEF Uganda reached 42–93 per cent of all the sector

targets because it could adapt its regular district-wide development programming to include the needs of refugees. Additional humanitarian response capacity was supported through an emergency stand-by partnership with the Uganda Red Cross Society. As of 31 December 2017, UNICEF received 43 per cent (US\$22.6 million plus US\$3 million carried forward from 2016) of its US\$52.8 million humanitarian appeal for 2017.

In 2017, officials from seven refugee-hosting districts were trained on risk-informed programming. Advocacy by UNHCR, UNICEF and partners at district and central levels, with engagement of both elected and administrative leaders, led to the acknowledgment of the presence of refugees in district budget conferences. A funding gap remained an issue.

A total of 667,050 children aged 6 months–15 years old (87 per cent of target) in refugee-hosting districts were vaccinated against polio and 301,434 children under 5 (100 per cent of target) were vaccinated against measles. A total of 286,120 pregnant women (83 per cent of target) from host and refugee communities received folic acid to prevent birth defects and 751,003 children aged 6 months to 5 years were supplemented with vitamin A, exceeding the target of 446,395. UNICEF Uganda supported the Ministry of Health (MoH) to rapidly stop the transmission of Marburg virus disease in Kween district in Eastern Uganda, as well as measles, cholera and malaria outbreaks in other parts of the country. A total of 31,327 refugee children under 5 (101 per cent of target) were admitted for treatment of severe acute malnutrition while 4,630 children and adolescents (51 per cent of target) received support to continue with antiretroviral therapy.

UNICEF Uganda support to installing solar-powered motorized water supply systems in refugee settlements contributed to reducing the need to truck water to the settlements. Approximately 311,500 refugees and host community members (59 per cent of target) gained access to safe drinking water. A total of 163,494 refugees (51 per cent of target) received access to adequate sanitation through the construction of household latrines. UNICEF Uganda supported local governments in refugee-hosting districts to form water user committees and built their capacity to operate and maintain water points.

UNICEF and partners continued supporting access to formal and informal education for 119,640 children and adolescents (66 per cent of target) from refugee and host communities. As co-chairs of the Education Task Force, UNICEF and UNHCR played leading roles in supporting the Ministry of Education and Sports (MoES) to develop the Uganda Education Response Plan for Refugees and Host Communities, which will be utilised to scale up education services for emergency-affected children from 2018 onward.

A total of 89,238 refugee children (36,643 girls and 52,595 boys) received psychosocial support in child-friendly spaces and 3,821 unaccompanied and separated children were provided with foster or kinship care. A total of 377 children (357 girls and 20 boys) were provided with multisectoral support in response to sexual violence, most of which had happened in their country of origin. A total of 3,780 adolescents (50 per cent girls) were engaged in peer-to-peer group activities that promoted individual resilience and life skills.

### Equity in practice

The findings of the Uganda National Household Survey (UNHS) 2016/17 revealed that children continued to bear the brunt of poverty, especially in certain parts of the country. In Karamoja and Acholi land, for instance, 86 per cent and 70 per cent of individuals, respectively, said that

they could not feed their children three times a day. Despite the Government's laudable efforts to provide free healthcare to all Ugandan children, four in every five children in West Nile were deprived of their right to health services. On average, nearly one in four respondents across the nation reported that they could not afford to visit a health facility or purchase medication when their children were ill. The preliminary findings of the National Violence Against Children Survey revealed high levels of violence against children nationally, with sexual violence affecting girls more than boys (35 and 17 per cent, respectively).

In 2017, UNICEF Uganda worked with the Government at different levels to better identify and address inequities and child deprivation in specific areas such as health, adolescent development, education and public finance for children.

UNICEF Uganda's Public Finance for Children policy brief series and the National Social Service Delivery Equity Atlas represented pivotal milestones in budget transparency by making data available to monitor the equity of delivery and impact of national programmes affecting children and vulnerable Ugandans. Work continued on the online Atlas platform, which will be launched in early 2018. The Atlas specifically shows time trends and correlations between public spending and key outcomes in the priority sectors of education, health and water, offering strategic insight in support of the Government's quest for economic growth with equity.

An equity assessment was conducted in 37 districts with the greatest gaps in immunization coverage. The assessment will generate evidence on various equity-related factors in immunization, which will contribute in identification and implementation of appropriate strategies to reach children who are underserved or difficult to access. The Reach Every District/Reach Every Community (RED/REC) guidelines were also updated to include equity considerations, which helped to train district and health facility teams to identify high-risk communities in their catchment areas and vaccinate unimmunized children.

To improve learning outcomes in 20 of the poorest performing districts, a quality enhancement initiative programme was launched in 600 schools, with implementation set to start in 2018. UNICEF Uganda also advocated for a national policy on inclusive education and developed innovative approaches to support inclusive education such as the provision of appropriate assistive devices, digitization of reading material and application of child-to-child learning methodologies.

UNICEF Uganda addressed educational disparities and violence against children in Karamoja, which also has the highest poverty levels in the country. The Reporting, Tracking, Referral and Response (RTRR) and Violence Against Children in Schools guidelines were disseminated in 109 schools in three districts, reaching 810 teachers (439 males and 371 females) and 25,133 pupils (12,892 boys and 12,241 girls). A total of 1,071 teachers and deputy head teachers were trained in gender and conflict-sensitive learning methodologies. As a result, gender parity at primary level was slowly improving, with girls comprising 40 per cent of the school population in nearly all districts in Karamoja.

Adolescent girls in Karamoja, Busoga and parts of West Nile Region were the most disadvantaged in Uganda, suffering disproportionately from early marriage and lack of access to education. UNICEF Uganda supported the Government to implement the National Strategy to End Child Marriage and Teenage Pregnancy in these regions over the past two years. In 2017, 55 out of 122 district local governments implemented programmes that contributed to the strategy's goals. Twenty-five of the 55 district local governments allocated specific budgets to implement activities toward ending child marriage and teenage pregnancy in their districts.

Within the broader framework of the Comprehensive Refugee Response Framework (CRRF), UNICEF interventions were aligned to a core principle of the refugees and host communities' empowerment framework (ReHOPE) to follow a rights-based approach that prioritizes equity, human rights, gender responsiveness, and women's empowerment. UNICEF-supported interventions ensured consistent treatment of refugee and host communities, including access to basic services, envisaged to avert inter-communal conflict.

## Strategic Plan 2018-2021

The Country Programme Document (CPD) was aligned with the new Strategic Plan 2018–2021, with a focus on the cross-sectoral areas of ECD and adolescent development. It used the life cycle approach to address each stage of children's development. The Midterm Review in 2018 will provide an opportunity to continue strengthening the alignment of the CPD with the Strategic Plan.

In recent years the broad political economy has not been favourable to child-friendly expenditures. In Uganda, the balance in spending between social and productive sectors has been increasingly tilted toward the latter, threatening to reverse some of the progress made in the social sectors.

UNICEF Uganda will continue to focus on improving the dialogue on budget effectiveness by better linking child-friendly expenditures with the growth-focused agenda of the Government. This will be done through: advocating for investment in social protection; harnessing the demographic dividend by supporting vocational education; recognizing that support to infrastructure can be beneficial to children; and 'shaping' the development agenda toward 'softer' investments that have a more direct effect on living standards for children, since efforts have been made by the Government to address infrastructure gaps in the country. By taking advantage of such opportunities, UNICEF will develop a more effective and influential advocacy strategy around child-friendly expenditures.

In 2017, UNICEF focused on a number of interventions in climate change, adolescent development, ECD and urbanization, in line with the Strategic Plan. Interventions included prevention and response to violence against adolescent girls and boys, school dropout and child marriage; WASH in schools and menstrual hygiene management; and life skills education. In ECD, sectoral policies, programmes and management processes were aligned with systems for integrated service delivery within and across sectors. UNICEF Uganda's programming approach was risk-informed to incorporate the needs of refugees and affected host communities and to bridge the humanitarian-development divide. Innovations included automated decision-making support tools within DHIS2 and an action tracker in health sector guidelines for local government planning, as well as a digital payment and school management pilot in partnership with MasterCard Labs.

As part of the 2018 midterm review, further analysis will be conducted on emerging areas such as urbanization, climate change, migration, integrated programming approaches to better inform UNICEF Uganda's work and maximize opportunities to demonstrate UNICEF Uganda's unique role in working with the humanitarian-development nexus. UNICEF will continue to use innovative technologies and methodologies to building efficiency and effectiveness in programme delivery, with a focus on health and education.

## Emerging areas of importance

**Climate change and children.** The Government of Uganda and UNICEF Uganda conducted a pioneering study, resulting in a report called 'Emerging Global Challenges: Climate Related Hazards and Urbanization - Protecting Uganda's Children'. The report revealed that Uganda had one of the fastest changing climates in the world, with serious consequences on the economy and on the rural population that is dependent on rain-fed agriculture. The possible impacts of climate change are complex and include an increase in childhood malnutrition, malaria incidence and school dropout. One of the recommendations from the report was to prioritize preventative services such as hygiene promotion, increased access to sanitation and sustainable solutions to water supply. UNICEF Uganda's WASH programme responded to this recommendation by constructing and maintaining solar-powered motorized water systems in refugee settlements that cater to 310,700 people. UNICEF Uganda also distributed and monitored the use of 900 solar operated water treatment containers in Nebbi district (Northern Uganda) and refugee settlement areas to prevent cholera in communities living close to surface water such as Lake Albert or the Nile.

**Urbanization and children.** The climate change and urbanization report revealed that urbanization in Uganda was happening at a rapid rate of more than 5 per cent per year. By 2035, it is estimated that 30 per cent of Uganda's population will be urban dwellers – up from 20 per cent in 2017 - with a high proportion of them being children and youth. Building on this evidence, UNICEF Uganda partnered with the Kampala City Council Authority to start developing an urban child-sensitive social protection programme.

**Refugee and migrant children.** UNICEF support for refugee children included rapid and well-supported reception and admission measures, multi-sector support for immediate and ongoing needs of refugees and host communities as well as durable solutions for affected communities. Interventions were aligned to Grand Bargain commitments and supported the Comprehensive Refugee Response Framework (CRRF) pilot in Uganda. UNICEF supported the establishment of the CRRF Secretariat in the Office of the Prime Minister (OPM) and will cover the cost of one national senior budget planning expert. The fact that UNICEF was already supporting both short-term emergency and humanitarian needs of refugees and long-term resilience initiatives targeting both refugees and host communities put it in a strong position to provide, jointly with UNHCR, leadership in the planning and operationalization of CRRF in Uganda.

**Accelerate integrated early childhood development (ECD).** The first year of implementation of the National Integrated ECD Policy addressed the primary challenge of fragmentation of key services across sectors serving children under the age of 8 and their families. UNICEF supported the national ECD Secretariat, relevant line ministries, faith-based organizations and other NGOs to promote four strategic drivers that advance alignment of sectoral policies, programmes and management processes with systems for integrated service delivery within and across sectors. All districts and municipalities were oriented on the policy and supported to establish integrated ECD coordination mechanisms at district, sub-county and parish levels. A national forum for coordination across relevant ministries was established and a package of integrated services was agreed on. One in four districts began to programmatically link sectoral ECD services. They were further supported to strengthen their data and gap analysis to ensure reflection of integrated services in district plans and budgets, including those in refugee settlements where applicable.

The UNICEF-supported #BestStartInLife campaign reached 17.6 million people with messages on the vital importance of ECD. This was accompanied by the rollout of 21 key family care

practices to promote responsive and stimulating parenting and generate demand for integrated ECD services among 75,445 parents (26 per cent male).

**Increased focus on second decade of life.** Adolescent development was one of UNICEF Uganda's flagship programmes. In 2017, UNICEF supported the development of the United Nations (UN) Adolescents and Youth Strategy, the Government's Multi-Sectoral Strategic Framework for Adolescent Girls and a Communication for Development (C4D) strategy for adolescent girls. The multisectoral framework focused on results and interventions in nine key outcome areas and will serve as a key advocacy and accountability instrument. UNICEF's own programming approach for adolescents was three-pronged, with integrated, coordinated and sector-specific streams. As most adolescents were in primary school, the integrated stream focused on delivering an integrated package of health, WASH, life skills and violence prevention services with school as the main entry point.

The coordinated cross-sectoral engagement with the Office of the First Lady resulted in the validation of a National Sexuality Education Framework, critical for improving HIV indicators among adolescent girls. Sectoral engagements were guided by the revised Adolescent Health Policy and the Gender in Education Policy.

## Summary notes and acronyms

### Acronyms

AIDS	acquired immune deficiency syndrome
AMP	annual management plan
CMT	country management team
CRBP	Children's Rights and Business Principles
CRC	Committee on the Rights of the Child
CPD	country programme document
CRRF	Comprehensive Refugee Response Framework
C4D	communication for development
DCT	direct cash transfer
DFID	Department for International Development (UK)
DHIS	District Health Information Management System
DRC	Democratic Republic of Congo
ESARO	Eastern and Southern Africa Regional Office (UNICEF)
ECD	early childhood development
ERKP	Enhanced Resilience Karamoja Programme (ERKP)
EU	European Union
EUMS	End-User Monitoring of Supplies
ezHACT	easy harmonized approach to cash transfers
FACE	funding authorization and certificate expenditure
FGM/C	female genital mutilation/cutting
GAM	global acute malnutrition
GAVI	Global Alliance for Vaccines and Immunization
GSSC	Global Shared Services Centre
HACT	harmonized approach to cash transfers
HR	human resources
ICCM	integrated community case management of childhood illness
ICT	information and communication technology
IMERP	integrated monitoring, evaluation and research plan
IYCF	infant and young child feeding

KFCP	key family care practices
KOICA	Korea International Cooperation Agency
LTA	long-term agreement
MoES	Ministry of Education and Sports
MoH	Ministry of Health
MLGSD	Ministry of Labour, Gender and Social Development
MVD	Marburg Virus Disease
OPM	Office of the Prime Minister
ORE	Other Resources Emergency
ORR	Other Resources Regular
PME	planning monitoring and evaluation
RAM	results assessment module
RED/REC	Reach Every District/Reach Every Community
ReHoPE	Refugee and Host Population Empowerment
RTRR	Reporting, Tracking, Referral and Response
RR	Regular Resources
SAM	severe acute malnutrition
SIDA	Swedish International Development Cooperation Agency
SOP	Standard Operating Procedures
UBoS	Uganda Bureau of Statistics
UN	United Nations
UNDSS	United Nations Department of Safety and Security
UNFPA	United Nations Population Fund
UNHCR	United Nations High Commissioner for Refugees
UNHS	Uganda National Household Survey
UNICEF	United Nations Children's Fund
VRS	Vital Registration Service
WASH	water, sanitation and hygiene
WHO	World Health Organization

## Capacity development

UNICEF Uganda supported government partners to address service delivery bottlenecks and helped to build community capacity to address norms and practices through C4D interventions.

In the health sector, UNICEF adopted a district health systems strengthening approach to strengthen district leadership and management capacity for evidence-based analysis, prioritization, planning and monitoring of integrated service delivery along the continuum of care. Using a bottleneck analysis approach and automated decision-making support tools within DHIS2, district and health facility managers were trained to more effectively identify and address bottlenecks to health service delivery. The implementation of an action tracker strengthened accountability and expansion of discretionary funds to districts helped address critical bottlenecks.

To simplify HIV services and reduce unnecessary burdens on the health system, 80 national trainers were trained to lead the rollout of the 'differentiated delivery models' guidelines across all regions in Uganda. Forty-nine trained community mentor mothers were supported to provide health education with referral to health facilities and continuous psychosocial support to 5,360 HIV-positive pregnant women in East-central Uganda. Service utilization over the course of a year increased from 17 to 20 per cent for antenatal care; 28 to 40 per cent for facility delivery and 70 to 81 per cent for six-month retention of mother-baby pairs in HIV care.

A major thrust for the C4D programme was the rollout of the package of 22 key family care practices (KFCEPs) to promote quality parenting and create demand for ECD services. A total of 75,445 parents and caregivers (26 per cent male) out of a target of 60,000 were reached with the package through trained community and faith-based groups.

Capacity development in eight refugee-hosting districts led to two of the districts establishing risk-informed development plans. The plans will better integrate contingency humanitarian needs in regular development plans at sub-national and sector levels.

## Evidence generation, policy dialogue and advocacy

Evidence generation, policy dialogue and advocacy were critical parts of UNICEF Uganda's strategic agenda in the country, helping the Government use evidence on how and where to make the most effective investments for children. An important result in this area was the full integration of child poverty analysis in national statistics, placing the issue of child deprivation and multi-dimensional poverty at the centre of Uganda's development agenda. The Uganda Bureau of Statistics integrated child poverty diagnostics into the Uganda National Household Survey 2016/17. Uganda's poverty maps were also updated to improve targeting and to prioritize equitable financial allocations for poverty reduction, with a focus on children.

UNICEF successfully advocated for the integration of an ECD module from the Multiple Indicator Cluster Survey and a disability and functionality survey in the Uganda Demographic and Health Survey (UDHS) 2016/17. UNICEF also provided financial resources to support the implementation of the UDHS 2016/17. In partnership with UBoS, OPM, the Ministry of Gender, Labour and Social Development (MGLSD) and other partners, UNICEF commissioned and led a pioneering study on the impact of climate change and urbanization on Uganda's children. A concept note for an urban-based social protection scheme in Kampala was developed and will be integrated in the national social protection framework. To monitor public finance for children, UNICEF Uganda's social policy brief series and the National Social Service Delivery Equity Atlas were key milestones in budget transparency, making data available to monitor the delivery and impact of national programmes affecting children and vulnerable Ugandans. Policy making was strengthened through the launch of the Uganda Children's Portal ([www.eprcug.org/children](http://www.eprcug.org/children)), an online platform with child-relevant data, research materials, publications, policy briefs and reports.

## Partnerships

UNICEF Uganda's resource mobilization and partnership strategy provided the overarching framework that guided work in 2017.

Efforts to strategically partner with the private sector around child rights paid off during the year. Four companies (NTV, Capital FM, NBS TV, Deloitte) and one apex association (Federation of Ugandan Employers) became the first private sector organizations in Uganda to start assessing their business practices according to the Children's Rights and Business Principles (CRBPs). A partnership with the Dutch National Committee to champion the CRBPs within the extractive sector was also developed, and traction was made within the Government to establish a regulation that makes it mandatory for all companies in Uganda to operationalize the CRBPs.

Substantial funding for key child survival and education programmes was mobilized through partnerships with major donor governments and the Global Partnership for Education (GPE). In 2017, UNICEF Uganda received one of its biggest grants ever – US\$24 million – from the UK

Department for International Development (DFID) to strengthen the national malaria response. With UNICEF technical support, the Ministry of Education and Sports developed a proposal that attracted funding from the Global Partnership for Education (GPE) and the World Bank to fight violence against children, especially adolescent girls, in schools.

To support emergency preparedness and enable a rapid response to disasters, UNICEF Uganda continued its multi-sector contingency stand-by partnership with Uganda Red Cross Society. Partnerships with other civil society organizations continued in the areas of health, nutrition, WASH, education and emergency response. The total partnership was worth US\$15.8 million in 2017.

At policy level, using its well-established relationships with line ministries, UNICEF Uganda continued to advocate for a systems approach to the provision of integrated basic social services in refugee-hosting districts. UNICEF fully adopted the ReHoPE strategy, a key building block for the application of CRRF.

### **External communication and public advocacy**

In 2017, UNICEF Uganda's public communications and advocacy reached 25 million people through traditional media, 20 million people through social media, and 30,000 people via the UNICEF Uganda website – all of which led to UNICEF messages being seen more than 630 million times.

UNICEF Uganda continued its national #BestStartInLife ECD campaign, including a 14 radio/TV spot mini-drama series highlighting the key family care practices required to ensure the optimal development of young children. The campaign was driven by 17 partner media outlets that engaged their audiences by sharing stories of individuals who were giving their children the #BestStartInLife. One poignant example was a father in the remote Napak district (Northern Uganda) showing photos on social media of how he was positively parenting his young son, which went viral and was picked up by national and international media.

Other focus areas for public advocacy and engagement in 2017 included increased investments in: a national child support grant to help lift 3.7 million children under 5 out of child poverty; adolescent girls, especially to keep them in school and reduce child marriage, teenage pregnancy, HIV infection, and maternal and infant mortality; and refugee and host community children, particularly the 650,000 South Sudanese refugee children in Uganda.

UNICEF Uganda also participated in flagship global CAUSE Framework initiatives by leveraging the global Father's Day activation to highlight several exemplary fathers in Uganda who were giving their children the #BestStartInLife; and, for World Children's Day, by partnering with 10 media outlets to have children 'take over' their newscasts and programmes, which led to significant public engagement on children's participation and rights.

UNICEF Uganda also strengthened its voice via the production of more than 15,000 multi-media materials including infographics, videos, human interest stories, photographs, press releases and blogs.

### **South-South cooperation and triangular cooperation**

UNICEF has a strategic commitment to help Uganda in mutual learning and solution sharing through South-South cooperation. In 2017, this involved supporting capacity training of Ugandan Government partners in Eastern and Southern Africa.

In the education sector, government officials were trained to cost pre-school education and design and implement education services for children with disabilities, organized by the UNICEF Eastern and Southern Africa Regional Office (ESARO). Thus the officials were better equipped to lead the ongoing review of the Early Childhood Care and Education Policy.

UNICEF Uganda and the UN Girls' Education Initiative also supported the Ministry of Education and Sports (MoES) staff to attend a gender-responsive education planning workshop in Tanzania. This exposure contributed to the formulation of the Gender in Education Strategy.

Following a meeting and visit to MasterCard Lab in Nairobi, MoES and district local government authorities developed a plan to expand the pilot on digital payment of school fees in Uganda (Kupaa) from 68 schools to more than 400 schools. To further strengthen capacity in the education sector, a senior official from the Special Needs Education Department attended a workshop on inclusive education in South Africa. This contributed to the inclusion of specific targets and strategies on inclusive education in the Education and Sports Sector Strategic Plan 2017–2020.

UNICEF Uganda continued to strengthen the Government's capacity in social protection. This included supporting a three-person delegation from the Ministry of Gender, Labour and Social Development, the Ministry of Finance and civil society partner Uganda Social Protection Platform to attend a course on designing and implementing social transfer programmes at the Economic Policy Research Institute in South Africa. This helped to foster intersectoral recognition, improve understanding of the importance of social protection and increase intersectoral collaboration.

### Identification and promotion of Innovation

In 2017, UNICEF Uganda developed, demonstrated and implemented several innovative tools and methodologies to improve efficiency and efficacy of programming in education, WASH and health.

A digital school payment and management process called Kupaa was piloted in more than 60 schools in partnership with MasterCard Labs. The technology reduces school payment transaction costs to both parents and schools, and contributes to increased transparency and accountability. A dashboard will allow district education offices to digitally track school attendance.

After a relatively long development phase, the Kolibri platform was launched in 30 secondary schools in 10 districts. This open source platform for the dissemination of high quality education resources was also used to enhance learning for out-of-school adolescents in the South Sudanese refugee settlements. To date free education content has been used. The plan is to develop content directly linked to the Ugandan lower secondary school curriculum.

UNICEF advocated for a progressive shift from conventional drilling of boreholes to the motorization of high-yielding water points in rural growth centres as a strategy to improve efficiencies and address inequities in access to water. For motorization of water points, UNICEF Uganda supported the development and operationalization of innovative approaches such as solar powered water systems and solar powered water treatment containers. Approximately 94,000 people gained access to safe water through solar powered water systems in Karamoja,

rehabilitation of the gravity-fed water systems and drilling of 142 boreholes in 12 UNICEF focus districts.

UNICEF Uganda supported the development of automated decision support tools within the district health information management system (DHIS2), including a reproductive, maternal, neonatal, child and adolescent health scorecard. This helped district and health facility managers to more effectively identify and address bottlenecks to the availability and use of evidence-based, high-impact interventions for mothers, newborns, children, adolescents and their families.

### **Support to integration and cross-sectoral linkages**

UNICEF Uganda continued to support cross-sectoral linkages and coordinated planning, funding and implementation of programmes across different sectors, stakeholders, and government levels. The capacity of the Ministry of Gender, Labour and Social Development to conduct cross-sectoral engagement and community mobilization for child nutrition was increased. UNICEF Uganda supported the Ministry to develop a single harmonized approach to community-level engagement using the package of 22 key family care practices (KFCEPs), which are multisectoral in nature and cover practices in health, nutrition, WASH, education and child protection. Using KFCEPs and other child care packages, 1,480 community development officers were trained in community mobilization on nutrition, ECD and food security. A total of 6,474 village health teams, 4,505 parish development committees and 2,281 functional adult literacy groups were trained to raise community awareness on, and improve behaviour around, maternal, infant and young child nutrition and other family care practices.

The implementation of the National Integrated ECD Policy began in 2017 with the establishment of a strengthened coordination mechanism at national and local levels. Models of integrated ECD centres emerged, reflecting efforts to provide holistic support. ECD centres were used as outreach posts for child health and nutrition services such as de-worming and vitamin A supplementation, were prioritized for construction of water points to disseminate messages on hygiene and sanitation and were used to conduct birth registration by religious bodies.

UNICEF's own programming approach for adolescents was three-pronged with integrated, coordinated and sector-specific streams. Most adolescents were in primary school, so the integrated stream focused on delivering a package of services with school as the main entry point. This included prevention and response to violence against children, especially adolescent girls; prevention of school dropout and early marriage; WASH in schools/menstrual hygiene management; life skills and active citizenship through school clubs and extracurricular activities; and health outreach.

### **Service delivery**

In 2017, UNICEF, with support from partners including KOICA, DFID and GAVI enabled the Ministry of Health and district local governments to improve service coverage in health, nutrition and WASH. This was accomplished through district-level health systems strengthening; implementation of high impact strategies and interventions such as integrated community case management and the 22 key family care practices; strengthening multisectoral nutrition coordination at national level; and providing direct support to the management of SAM in Karamoja and refugee-hosting districts.

As a result, more than 1 million children were reached with measles and pentavalent vaccines and 71 per cent of children under 5 in 19 districts were treated within 24 hours of onset of

malaria, diarrhoea and pneumonia symptoms. Ninety three percent of the children under 5 in the 21 UNICEF-supported districts received vitamin A, which significantly exceeded the national target of 60 per cent. A total of 26,693 children were treated for severe acute malnutrition (against a target of 23,123) and approximately 404,700 people gained access to safe drinking water against the target of 680,000). A total of 101 communities (against a target of 75) were declared open defecation free.

UNICEF provided support to the Ministry of Health to improve the functionality of eHMIS and the completeness, timeliness and quality of data collected. Decision support tools were developed for national and district-level managers and integrated into sector review and planning processes. Tools that were embedded into DHIS2 included a scorecard for maternal, child and adolescent health and a dashboard with core Health Sector Development Plan indicators. The community health information system was strengthened through the development of a platform to electronically transmit data to and from communities/households/individuals (FamilyConnect). The community health information system was successfully tested and was being implemented in 11 districts.

### **Human rights-based approach to cooperation**

To strengthen child rights governance, UNICEF Uganda supported the Ministry of Gender, Labour and Social Development to update the State Party report to the Committee on the Rights of the Child (CRC) through a consultative process that included children. A new partnership with the Uganda Human Rights Commission was established to reinforce the Commission's capacity to monitor child rights.

UNICEF also continued to engage with other actors who have an important role in child rights governance, including parliamentarians, through the Uganda Parliamentary Forum for Children and the newly established National Children's Authority. These stakeholders were engaged in reporting and assessment on the Convention on the Rights of the Child and were equipped with information specific to their mandate and constituencies on child rights.

The National Child Participation Strategy was adopted by the Government in November. The strategy was supported by UNICEF Uganda and Save the Children and is the country's first-ever strategy on child participation. This represented a major achievement for a realization of the full spectrum of children's rights.

To enhance the realization of human rights for poor, vulnerable and marginalized Ugandans, UNICEF Uganda provided technical support to the implementation of the National Social Protection Policy and the finalization of the implementation road map. Building on the evidence from the Social Protection Investment Case and the study on the impact of climate change and urbanization on Uganda's children, UNICEF Uganda partnered with Kampala City Council Authority to develop a concept note for an urban child-sensitive social protection programme, with a focus on adolescent girls.

### **Gender equality**

Adolescent girls are a highly vulnerable and vastly under-served population group in Uganda. In response, in 2017 UNICEF Uganda supported the rollout of the National Strategy to End Child Marriage and Teenage Pregnancy to an additional 25 district local governments. Out of the cumulative total of 55 district local governments, 25 allocated resources toward implementation of the strategy. In November 2017, Uganda submitted its first report on the implementation of the UN General Assembly Resolution 17/175 on the Girl Child, Early and Forced Marriages.

The Ministry of Education and Sport finalized the Gender in Education Policy, Education Sector Strategic Plan 2017–2020 and the National Strategy for Girls Education. All three emphasize equity and address gender-related bottlenecks to girls' education as per commitments in the Gender Action Plan.

Implementation of the National Strategy for Girls' Education and school health/life skills programme continued in 11 districts. A total of 14,476 teachers and 70,759 children (21,897 boys and 48,872 girls) received training on preventing violence against children in schools, life skills education, menstrual hygiene management and gender-sensitive pedagogy (for teachers). The celebration of Menstrual Hygiene Day on 6 May led to a public dialogue and multi-media campaign on breaking the silence on menstruation and how it affects girls and their education.

The national database on gender-based violence was expanded to another seven districts, bringing the total number of districts to 24. A total of 2,496 cases were reported to the Uganda Child Helpline national call centre and the 16 district action centres (1,478 girls and 1,018 boys). All received at least one type of response service. An additional 377 refugee children (357 girls and 20 boys) from South Sudan were provided with multisectoral support in response to sexual violence.

Through joint UN efforts, Uganda launched the Presidential Fast-track Initiative with a five-point agenda on ending HIV and AIDS in Uganda by 2030. The initiative will, among other things, accelerate the reduction of new infections among girls and young women and their male partners. A total of 117,883 adolescents aged 15–19 were tested for HIV and received their results in the past 12 months (37 per cent of the target).

## Environmental sustainability

### Evidence generation

UNICEF Uganda supported the Office of the Prime Minister (OPM) to carry out research on the impact of climate-related hazards and urbanization on child welfare. The study provided precise recommendations on how to reduce the impact of climate change on children. UNICEF also supported the initiative to engage adolescents in adaptive thinking and advocacy for community resilience, using the 'The Young Disaster Resilience Leadership' model to support young people to proactively engage in local disaster challenges and contribute positively to actionable solutions utilizing local resources. The initiative included youth-led community risk mapping to enhance their involvement and awareness.

### Advocacy and accountability on climate change

UNICEF Uganda supported OPM and the National Emergency Coordination Centre to roll out community-led real time reporting via SMS in Karamoja. The objective was to explore the use of indigenous socio-behavioural indicators to monitor nutritional stress and negative coping.

### Climate change mitigation

UNICEF trained communities to develop and maintain climate-resilient infrastructure such as solar-powered motorized water supply systems. Water users were also trained on safe collection, transportation, storage and use of clean water. UNICEF Uganda constructed and maintained solar powered motorized water systems in refugee settlement areas that reached 310,700 refugees and host community members with clean drinking water. Nine hundred solar-operated water treatment containers were distributed in remote Nebbi district and in refugee

settlement areas to avert possible outbreaks of cholera in communities living close to surface water such as Lake Albert or the Nile River.

## Effective leadership

The country management team (CMT) provided leadership and oversight to the 2017/2018 rolling work plans and 2017 Annual Management Plan (AMP) during the first quarter of 2017. The 2017 AMP, outlining key programme and management priorities for the year with governance structures and monitoring mechanisms, was finalized in February.

UNICEF Uganda established governance bodies and statutory committees that played important oversight and advisory roles and supported informed decision-making. To ensure that implementation of key priorities remained on track, UNICEF Uganda established performance indicators that were monitored and reported through the results assessment module (RAM).

As a central management body, the country management team reviewed progress on implementation of key priorities, strategic programme and management issues. Standing agenda items for meetings included the review of management indicators, status of audit recommendations and internal control issues. Management indicators were also monitored during programme management team and all-staff monthly meetings.

UNICEF Uganda built on gains made in previous years regarding overall cost-consciousness and efficiency, as well as in strengthening office governance, risk management and control processes. Actions to sustain the recommendations of the previous audit and to mitigate the risks identified in the 2017 Enterprise Risk Management exercise were prioritized. Efforts to achieve cost effectiveness such as in warehousing, logistics, information and communication technology (ICT) and administration-related services were continued in 2017.

Increased oversight and management engagement with key government partners led to improved efficiency in financial processing and resolving long outstanding issues on cash transfers. UNICEF Uganda's ability to respond and continue operations during a crisis was assured through establishment and simulation of the business continuity plan.

## Financial resources management

Contributions management and budgetary issues were reviewed monthly by the country management team. In 2017, UNICEF Uganda had US\$68,761,423 at its disposal, of which US\$67.5 million was utilized. US\$5,243,480 was re-phased to 2018.

More than US\$23 million was transferred to 176 partners (41 per cent to Government and 59 per cent to civil society organizations) as cash assistance. As of 22 November 2017, 89 per cent of direct cash transfers (DCTs) were within the acceptable 0–6-months outstanding category, 9.6 per cent were outstanding for 6–9 months and 0.5 per cent outstanding for longer than nine months.

In 2017, UNICEF submitted 1,591 payment requests to the Global Shared Services Centre (GSSC) for processing. Quality supporting documents and timely response to queries from GSSC resulted in timely processing of payments.

Liquidity was adequately managed and the established benchmark for treasury was met throughout the year.

UNICEF Uganda successfully implemented the harmonized approach to cash transfers plan, completing 118 per cent of planned financial spot checks, 95 per cent of planned audits and 318 per cent of planned programme visits. High-risk findings were actively followed up and HACT training was provided to partners.

Finance refresher training was conducted for all programme staff, improving the quality of supporting documentation and speeding up payment and liquidation processes. With streamlined processing of financial transactions, payments to implementing partners, vendors and suppliers and DCT liquidations were processed on time.

Accelerated efforts by UNICEF Uganda to follow up on outstanding value added tax (VAT) resulted in recovery of 84 per cent of the outstanding VAT for 2014, 2015 and 2016.

UNICEF Uganda implemented eZHACT for DCT-related payments and liquidations and signed a mobile money agreement with its bank for programme-related disbursements. This will mitigate the risk of making advance payments to high-risk partners by paying directly to participants where possible.

## **Fundraising and donor relations**

During 2017, UNICEF Uganda pursued a mix of resource mobilization strategies to leverage and mobilize flexible funding for both its humanitarian and development programmes.

UNICEF Uganda organized 18 visits to programme sites for local donors and those from donor capitals to help them appreciate the implementation of programmes on the ground. UNICEF Uganda also used the Uganda Solidarity Summit on Refugees organized by the Government and the UN as a major platform for engaging with donors and strengthening partnerships. UNICEF Uganda followed up with donors on proposals totalling US\$79.5 million to raise long-term multi-year Other Resources - Regular and Other Resources - Emergency funding. Key donors targeted for multi-year funding included DFID, KOICA, EU and SIDA. UNICEF also completed and submitted a donor funding toolkit to UNICEF National Committees (NatComs) focusing on HIV and AIDS.

As of 31 December 2017, UNICEF Uganda had US\$ 68,761,423 at hand, of which 98 per cent was utilized. The funds available included 108 per cent of ORR funds received against a ceiling of US\$40,773,000; 43 per cent received as emergency funds against a ceiling of US\$52,870,000 as well as RR funds of US\$21,358,431.

There were major funding gaps in education and child protection.

A half-day briefing was organized for donors on how UNICEF Uganda manages risks related to programme implementation. Topics of discussion included HACT, the enterprise risk management policy, procurement processes and contributions management. The workshop was highly appreciated by donors, who recommended that similar briefings be held again in the future.

To ensure quality donor reporting, UNICEF Uganda continued to enforce standard operating procedures in contributions management and provided longer lead times to review and edit reports.

## Evaluation and research

In 2017, UNICEF Uganda developed the integrated monitoring, evaluation and research plan (IMERP) to guide its evaluation and research agenda for the year. The plan was reviewed on a quarterly basis to ascertain progress on implementation of planned evaluation and research activities, draw lessons from those that were delayed or constrained and adapt as appropriate to the changing needs of data and knowledge generated. By the end of the year, 87 per cent of the plan had been implemented.

Four evaluations were initially planned, including: the end-of-project evaluation of the Enhanced Resilience Karamoja Programme (ERKP), the evaluation of the Community and District Empowerment for Scale-up (CODES) package on key protective, preventive and curative quality coverage indicators for pneumonia, diarrhoea and malaria; UNICEF's humanitarian response (2016–2017); and the impact evaluation of the ECD in Emergency kits. The impact evaluation of the ECD in Emergency kits and the evaluation of CODES were slightly delayed and the final reports are expected by mid-January 2018. The humanitarian response evaluation will be conducted in 2018 to inform the midterm review.

The evaluation of ERKP noted increased access to high-impact nutrition interventions for mothers and children. It pointed to successful outcomes for increased resilience of targeted communities to climate extremes and weather events. The recommendations have since formed a premise in strengthening the theory of change for the new Karamojong Nutrition Programme, streamlining nutrition information and data analysis and firming up the capacity of the Government to coordinate and deliver nutrition interventions. UNICEF Uganda has since fully implemented 75 per cent of management responses with the remaining 25 per cent on track.

## Efficiency gains and cost savings

UNICEF Uganda improved Internet bandwidth to zonal offices, making it possible to conduct Skype conferences and online training activities, potentially saving on travel costs. New technology-led innovations were established and existing technologies were upgraded. These included systems for ensuring real-time availability and timely sharing of child-related data from the Child Helpline, u-Survey, Mobile VRS and Family Connect.

Under supply and logistics, 96 long-term agreements (LTAs) were established and/or maintained during the year. The use of these agreements was estimated to have reduced order-processing times by 40 per cent. Working with other UN agencies, UNICEF saved US\$997,977 by using LTAs for goods and services under the Business Operations Strategy.

A total of 1,591 payment requests were made to GSSC in 2017. Timely responses to queries from GSSC were ensured, resulting in timely processing of payments. With streamlined processing of financial transactions, more than 95 per cent of payments and transfers that were adequately backed with supporting documents were processed within two working days; 100 per cent of DCT liquidations were appropriately filled; and certified FACE forms were processed within two working days. Liquidity was adequately managed and the established benchmark for treasury was met throughout the year.

In human resources (HR) management, UNICEF Uganda's recruitment processes ensured that the right people with the right profile were in the right place and at right time. A total of 36 recruitments were completed during the year, and 74 per cent of them were completed within 90 days from closure of advertisements. All but one of the 105 individual service contracts issued in 2017 were issued through competitive selection and negotiated fees to ensure best value for

money. UNICEF applied a direct selection approach, drawing candidates from talent pools. Direct selection generated savings on staff time in recruitments and approximately US\$11,000 savings on advertisements.

## Supply management

UNICEF Uganda developed a 2017 Supply Plan for a total of US\$10.5 million of goods (90 per cent materialized) and US\$6.5 million for services (56 per cent implementation). The value of procurement done with Uganda as action office was US\$7,405,421, whereas orders issued by other offices (procurement services, offshore procurement of programme supplies and services, including freight) totalled US\$31,370,350.

The office managed 96 LTAs covering local UNICEF needs, global innovation initiatives and UN collaborative procurement.

Total supply throughput is summarized below:

<b>Value of supplies and services, irrespective of procurement location</b>	<b>US\$</b>
<b>Programmatic supplies</b>	<b>33,737,812.38</b>
Procurement Services	4,584,966.49
GAVI	20,917,342.40
Programme	8,235,503.49
<b>Operational supplies</b>	<b>803,385.17</b>
<b>Services and works</b>	<b>3,679,575.58</b>
<b>Freight</b>	<b>554,997.77</b>
<b>TOTAL</b>	<b>38,775,770.90</b>

The average inventory value in UNICEF Uganda warehouses throughout 2017 was US\$1.3 million, with a year-end level of US\$1.5 million (17 per cent pre-positioned). The total value of goods issued from stock reached US\$4.6 million (a turnover ratio of 3.5).

UNICEF Uganda contracted construction worth US\$76,086 through institutional contracts, mainly in education. Works undertaken through the partnership modality are summarized below:

<b>Programme</b>	<b>Scope</b>	<b>US\$ value</b>
Education	Transitional classrooms	226,266
CSD (WASH)	Latrines	786,092
<b>Total</b>		<b>1,012,358</b>

Driven by the refugee influx and other humanitarian factors, emergency-related partnerships were strengthened (through an agreement with Uganda Red Cross) and direct delivery interventions were implemented, including significant work on water supply systems in refugee settlements, and provision of nutrition supplies. In parallel, UNICEF Uganda continued to work with the Government and partners to strengthen the key national supply chains for children.

UNICEF actively participated in the vaccine procurement and management group and used the same as a platform for the annual vaccine forecast, improving planning of vaccine orders and reinforcing the linkage with budget disbursement and financing, leveraging procurement services as an entry point.

UNICEF facilitated the planning, submission and implementation of the Cold Chain Equipment Optimization Platform initiative, which will result in an upgrade of cold chain capacity in Uganda over the next few years.

UNICEF gradually handed over responsibilities (warehousing, distribution) to the National Medical Stores for ICCM supplies, in line with the overarching integration agenda.

Recommendations from the nutrition supply chain assessment were adopted and work began with MoH to develop an action plan for the integration of nutrition commodities in the overall health supply system.

### **Security for staff and premises**

The security threat level in Kampala and most of the country was low. The main threats to UNICEF Uganda staff in 2017 were road traffic accidents, small crimes, including break-ins at staff homes, and thefts.

UNICEF Uganda has occupied its office premises in Kampala since 2007. Despite continuous efforts to comply with Minimum Operating Security Standards, the office location itself presents risks to security and safety of staff. The situation became more complicated toward the end of 2016 with the construction of a new multipurpose building on the plot next to the UNICEF premises. To address the risks, an independent assessment of the stability and integrity of the existing wall was carried out by a specialized company. As a result, an engineering concept for the reinforcement of the existing retention wall was provided. An independent structural company was hired to supervise the work on wall reinforcement, which is expected to be finalized in the first quarter of 2018.

In August 2017, the United Nations Department of Safety and Security (UNDSS) conducted an assessment that provided specific security and safety reinforcement measures. The implementation of the UNDSS recommendations began in the fourth quarter of 2017 and is expected to be completed in early 2018.

A blast vulnerability assessment of the current premises was conducted in August 2017. The implementation of recommendations from the assessment is expected in first quarter of 2018, in consultation with the Regional Security Advisor.

UNICEF Uganda explored the availability of alternative office spaces. Due to financial and security constraints, a move to commercially leased premises was not a viable solution. Instead, UNICEF began extending right-to-use and changing the terms of use of the land owned by UNICEF with the aim of constructing office premises.

### **Human resources**

The human resources management function was guided by the Country Programme Strategic Plan, which worked in partnership with programmes and operations to positively impact programme results and create an enabling environment for staff to deliver sustainable

performance. This was implemented in four functional areas: talent management, performance management, staff learning and development and staff wellbeing.

Talent management focused on enhancing synergy and collaborative efforts to anticipate and respond to staffing requirements within UNICEF Uganda. In 2017, UNICEF hired 36 staff members. Seventy-five per cent of these recruitments were concluded within 90 days. In view of the HR reform, UNICEF Uganda used generic vacancies and batch recruitment approaches to get the right people at the right time in the right place.

UNICEF used existing LTAs and a local roster to draw from a large pool of already vetted expertise. In 2017, the HR unit issued 109 contracts worth approximately US\$1.3 million.

The 2017 Learning and Development Plan for UNICEF Uganda aimed to support the achievement of the Annual Management Plan priorities to build a learning culture and enhance the process of organizational learning. The office conducted several in-house training sessions including on results-based management, emergency preparedness and response, risk-informed programming, ECD and adolescent programming, financial management, ethics, defensive driving, and HR reform and policies.

By the end of February 2017, 99 per cent of the staff had completed their performance evaluations for 2016. Ninety-six per cent of staff had completed their individual work plans for 2017 by the deadline of 15 April 2017.

The results of the Global Staff Survey were discussed with all staff and ways to improve on identified areas were identified. An action plan was developed and monitored by the Country Management Team on quarterly basis.

### **Effective use of information and communication technology**

UNICEF Uganda upgraded the application platform to Windows 10, in line with the global UNICEF standard to improve access to cloud-based services, mobility and better user experience. Increasing Internet bandwidth on zonal office links enhanced access to Office automation tools and helped improve collaboration and productivity across the office. UNICEF Uganda further integrated voice telephony for light offices using existing infrastructure, reducing costs in legacy telephony and in turn optimizing programme resources.

UNICEF Uganda partnered with other stakeholders to develop, enhance and support various open source-based mobile tools and innovations including EUMS, the national Child Helpline, Mobile VRS, FamilyConnect and Kolibri.

Through these interventions, improvements were made to track supplies and monitor and report on programme progress in real-time across the whole country.

UNICEF Uganda took several measures to reduce the ICT footprint. For example, 60 per cent of old hardware was replaced with new energy efficient equipment, including servers and laptops. UNICEF cloud-based services were leveraged for email, oneDrive and Sharepoint, which reduced the need for in-house infrastructure hosting.

The link bandwidth was increased and the quality of online meetings improved, reducing the need to travel for face-to-face meetings. UNICEF Uganda began rolling out solar energy systems to power student laptops in 20 schools in Uganda. Some 20 million people, including

influencers and end-users, were reached through UNICEF Uganda's social media presence on Twitter, Facebook, Instagram, Google+ and YouTube.

## Programme components from RAM

### ANALYSIS BY OUTCOME AND OUTPUT RESULTS

**OUTCOME 1** 1. Strengthened national capacity to deliver improved health and nutrition outcomes for children, adolescents, pregnant women and other vulnerable groups and contribute to sustained improvements in population dynamics

#### Analytical statement of progress

The 2016 Uganda Demographic and Health Survey (UDHS) results revealed improvements in maternal and child health outcomes. Between 2011 and 2016 maternal and under-five mortality declined from 438 to 368 per 100,000 and from 90 to 64 per 1,000 live births, respectively. Improvements in availability and use of essential health services contributed to this progress.

Between 2011 and 2016 immunization coverage against diphtheria-tetanus-pertussis (DPT3) and measles improved from 68 to 79 per cent and from 76 to 80 per cent, respectively. During the same period, the percentage of women with at least four antenatal care visits increased from 48 to 60 per cent. Institutional deliveries rose from 57 to 73 per cent. The percentage of households with insecticide-treated nets improved from 61 to 78 per cent. UDHS 2016 also revealed that 81 per cent of children under 5 with fever were taken for medical advice/treatment; 49 per cent were tested for malaria and 88 per cent received antimalarial drugs (an increase from 65 per cent in 2011).

Improvements in reproductive, maternal, neonatal, child and adolescent health (RMNCAH) were particularly pronounced in Karamoja (North-eastern Uganda) where UNICEF Uganda has supported the health system over the past decade. Despite these positive trends, neonatal mortality stagnated at 27/1,000 live births and maternal mortality remained very high due to high rates of adolescent pregnancy and poor quality of care in childbirth and the immediate postpartum period.

Under-nutrition remained an important contributor to poor maternal, newborn and child survival and development in Uganda. While prevalence of stunting decreased from 33 to 29 per cent between 2011 and 2016, an estimated 1,850,000 children were still stunted. During the same period, underweight and wasting also declined from 14 to 11 per cent and from 5 to 4 per cent, respectively. The exclusive breastfeeding rate increased from 61 to 66 per cent. UDHS suggests an increase in anaemia among adult women from 23 per cent (2011) to 32 per cent (2016) and among children under 5 from 49 per cent (2011) to 53 per cent (2016). High under-nutrition in children was due to inadequate diets (only 14 per cent of children had a minimum dietary diversity) and a high prevalence of infectious diseases.

According to the HIV Impact Assessment findings (August 2017), adult HIV prevalence fell from 7.3 per cent (2011) to 6 per cent (2016). New infections dropped from 83,000 in 2015 to 52,000 in 2016. Coverage with anti-retrovirals (ARVs) to prevent mother-to-child (MTCT) HIV transmission rose from 50 per cent in 2011 to 95 per cent in 2017, leading to a significant drop in mother to child transmission (3 per cent in 2016). The number of new newborn infections was reduced from 25,000 in 2010 to 3,400 in 2016. Paediatric ART coverage increased from 62 per cent in 2015 to 70 per cent in 2017.

The main bottlenecks affecting the availability, quality, use and sustainability of health and nutrition interventions were inadequate financing and staffing, weak district management capacities, poor supply chain management and demand-related issues.

Health spending in 2016/2017 stood at 8.9 per cent of total government expenditure, an increase from 6.4 per cent in the previous fiscal year. This was still below the national target of 10 per cent and the Abuja declaration of 15 per cent. Water sector spending stagnated at 3 per cent of the national budget, against a 9 per cent national target. Government allocation to nutrition was very low, with significant gaps in financing nutrition interventions at scale, including micronutrient supplementation, deworming, management of acute malnutrition and infant and young child feeding promotion.

To address critical resource gaps, UNICEF Uganda advocated for and leveraged additional resources to scale up essential reproductive, maternal, neonatal, child and adolescent health (RMNCAH), HIV and nutrition services. This included US\$20 million from SIDA, bringing the total allocation for RMNCAH through the Global Financing Facility to US\$160 million over five years. Uganda also mobilized US\$250 million, US\$21 million and US\$278 million from the Global Fund to support malaria, TB and HIV interventions, respectively.

Despite gradual improvements, the staff vacancy completion rate in public health facilities in 2016/2017 was at 73 per cent, with large variations across the regions. The availability of the essential basket of 41 commodities was 83 per cent and an average of 55 per cent of health facilities reported more than 95 per cent availability of essential drugs. Nevertheless, 10–25 per cent of health facilities experienced stock-outs of essential medical and nutrition commodities. Most essential supplies for children were dependent on unpredictable external financing. UNICEF Uganda worked with the Ministry of Health (MoH) and partners to strengthen the integration of child survival/nutrition commodities into the health sector forecasting, costing, distribution and monitoring activities.

A number of additional bottlenecks affected an effective nutrition response, including a weak multisectoral approach, inadequate governance and coordination at all levels and limited community engagement. UNICEF led efforts to improve development partner coordination in support of the Government, emphasizing the need to strengthen national systems and overall nutrition governance.

A significant influx of South Sudanese refugees, a prolonged dry spell and outbreaks of infectious diseases (Marburg virus, cholera, measles, anthrax, Rift Valley Fever) continued to pose challenges in 2017. UNICEF Uganda supported preparedness, resource mobilization and response to affected children and families. Major achievements included the development of the updated policy and planning frameworks for cholera and Ebola prevention and response; resource mobilization and health, nutrition and WASH service delivery to refugees and districts affected by drought and disease outbreaks.

**OUTPUT 1** Output 1.1: Reproductive, maternal, newborn and child health By 2020, strengthened national capacity to scale up and sustain the provision of quality high-impact maternal, neonatal, child and adolescent health interventions, focusing on integrated and innovative approaches to reach the unreached.

### **Analytical statement of progress**

With UNICEF Uganda support, the reproductive maternal, neonatal, child and adolescent health (RMNCAH) scorecard, bottleneck analysis and action tracker were included in the health sector planning guidelines for local governments. The tools are aimed at strengthening district health management teams in decision making and monitoring. As a result, 42 districts were able to conduct quarterly performance reviews to monitor service delivery, identify and address bottlenecks.

To strengthen the quality of maternal and newborn care, 212 of 448 health facilities in 27 districts were supported to operationalize an emergency obstetric and neonatal care (EmONC) package. Support included training 418 health workers; providing newborn resuscitation equipment; mentorship and supervision; and monitoring of service delivery. A total of 13,233 village health team (VHT) members in 24 districts were trained to conduct home visits to pregnant women and newborns.

UNICEF support to immunization focused on implementing the 2016 equity assessment in 37 districts with inequities. The Reach Every District/Reach Every Community (RED/REC) guidelines were updated to include equity considerations. The guidelines were used to train district and health facility teams to identify high-risk communities in their catchment areas and vaccinate unimmunized children. As of September 2017, 900,654 children had been vaccinated against measles and 1,034,546 children were reached with pentavalent vaccine through routine immunization. Kampala City Council Authority (KCCA) received support to respond to a measles outbreak, including an outreach to informal settlements with large numbers of unimmunized Ugandan and refugee children.

To strengthen vaccine supply and the cold chain capacity in Uganda, 121 cold chain technicians from all districts were supported to develop district action plans. With UNICEF support, MoH developed the Operational Deployment Plan for a cold chain equipment optimization platform for submission to Gavi Alliance. MoH also reviewed the immunization supply chain information system and conducted an Effective Vaccine Management Self-Assessment of the National Medical Stores.

To avert meningitis outbreaks, 5,094,588 people (1–29 years) were vaccinated in 39 high-risk districts as part of a preventative campaign. In the framework of the Polio End Game, UNICEF Uganda procured more than 6 million doses of polio vaccine for an immunization campaign in 77 districts, reaching 6,441,282 children 6–59 months old. In refugee-hosting districts, 667,050 children aged 6 months to 15 years (87 per cent) were vaccinated against measles and 301,434 children under 5 (100 per cent) were vaccinated against polio.

The integrated community case management of childhood illnesses (ICCM) programme resulted in 163,945 children under 5 years in 19 districts receiving treatment within 24 hours of onset of symptoms of malaria, diarrhoea and pneumonia. As part of the MoH national distribution campaign, 22,350,207 long-lasting insecticide treated nets had been distributed in 109 of 116 districts, achieving 94 per cent coverage as of November 2017. To strengthen the community health information system, 11,149 village health teams (VHTs) in 12 districts enrolled in Family Connect, an SMS tool that sends pregnant women healthcare appointment reminders and key health messages and helps service providers track clients. A total of 45,862 mothers were tracked by VHTs.

**OUTPUT 2** Output 1.2: By 2020, national capacity strengthened to improve quality, access and utilization of prevention of vertical transmission of HIV (preventing new infections in children and keeping mothers alive), paediatric, maternal and adolescent AIDS and TB care and treatment services.

### **Analytical statement of progress**

UNICEF Uganda supported the development and subsequent national and regional launches of the Presidential Fast Track Initiative with a five-point agenda to end AIDS as a public health threat by 2030.

To increase HIV financing, strengthen systems and reduce existing commodity gaps, the Uganda AIDS Commission, with UNICEF support, developed the AIDS Trust Fund Regulations, an innovative financing model established under Ugandan law.

UNICEF supported the Ministry of Health (MoH) to adapt and implement the WHO guidelines for universal treatment of all population groups, including an innovative differentiated service delivery model that reduces health facility burdens in handling more than 900,000 clients on ART. Eighty national trainers were trained to support national rollout of the guidelines and ensure that they were implemented effectively in nine districts in Northeastern Uganda.

UNICEF also provided technical support to quarterly elimination of mother-to-child transmission (eMTCT) and paediatric HIV technical review and planning meetings; the development of standard operating procedures for the integration of early infant diagnosis and expanded programme on immunization, point of care and paediatric TB formulations; planning and initiation of the national eMTCT impact assessment; and validation of pre-elimination of MTCT.

As of September 2017, 95 per cent of HIV-positive pregnant women were on ART. In 37 districts, 667,833 pregnant women attending antenatal care (108 per cent) had their HIV status known. Of the 31,135 who tested positive, 30,095 (97 per cent) were enrolled on Option B+.

Identification and early diagnosis of HIV-exposed and infected children significantly improved, from 36 per cent in 2016 to 73 per cent in 2017. The number of sites accredited by MoH to provide paediatric HIV services increased from 461 facilities in 2016 to 501 sites (90 per cent of a targeted 557 facilities) in the UNICEF-supported districts. These efforts contributed to national-level improvements in the coverage of antenatal care (ANC), HIV testing in ANC and Option B+ coverage among HIV-positive women who were pregnant (95 per cent).

To improve uptake of HIV services for women and children and retention of HIV-positive mothers and their exposed babies in care, an innovative peer-based community model using male champions and community mentor mothers was implemented in 21 districts. The national community strategy was revised with support from UNICEF, using lessons learned from the community peer-based interventions.

To improve availability of HIV disaggregated data on adolescents, a national health facility assessment was carried out. The assessment revealed that 32 per cent of adolescents were tested for HIV and 91 per cent of those tested had received their results. Girls (62 per cent) and older adolescents aged 15–19 years (76 per cent) reported better results. This new evidence led to the revision of the Health Management Information System to provide age appropriate data on adolescents. From July 2016, Uganda started to routinely collect age and sex-disaggregated data on adolescents, with the first annual report made available in 2017. The

coverage for adolescent HIV testing services improved from 9 per cent in 2016 to 32 percent in 2017.

**OUTPUT 3** Output 1.3. By 2020, multi-sectoral coordination and technical and functional capacity of partners strengthened to scale up and sustain high-impact child nutrition interventions, with a focus on the first 1,000 days of life, to reduce stunting and other forms of malnutrition.

### **Analytical statement of progress**

UNICEF Uganda supported the Office of the Prime Minister (OPM) to finalize the Nutrition Policy. The multisectoral coordination of nutrition stakeholders at national level improved through monthly meetings of the multisectoral coordination technical working group, which was led by OPM and supported by UNICEF.

In 21 districts, vitamin A coverage was 93 per cent in 2017, significantly exceeding the national target of 60 per cent. A total of 467,287 caregivers received counselling on infant and young child feeding (IYCF), attaining more than 100 per cent of the target. A total of 16,772 children with severe acute malnutrition (SAM) received therapeutic care against target of 18,083 (93 per cent) and 9,921 refugee children with SAM were also treated (against the target of 5,040). Approximately 404,700 people (59.5 per cent of target) gained access to safe drinking water (against the target of 680,000) while 101 communities were declared open defecation free (134 per cent of the target of 75 communities).

These achievements were made possible by strengthening multisectoral nutrition coordination at national level; providing direct support to the management of SAM in Karamoja and refugee-hosting districts; and building community capacity to change social behaviour around maternal, infant and young child nutrition and other family care practices.

To improve community engagement, UNICEF Uganda supported the Ministry of Gender, Labour and Social Development (MGLSD) to implement the Nutrition Advocacy and Communication strategy. As a result, 6,474 village health teams (VHTs), 4,505 parish development committees (PDCs) and 2,281 functional adult literacy (FAL) groups were trained to raise community awareness on and improve behaviour around maternal, infant and young child nutrition along with other family care practices.

Two long-term technical advisors in monitoring and evaluation were provided to the Uganda Nutrition Action Plan (UNAP) Secretariat at OPM and the Ministry of Health's Nutrition Division to strengthen the Nutrition Information System. To improve availability and quality of nutrition analysis, UNICEF Uganda and the European Union supported the establishment of the National Information Platform for nutrition to be hosted at the Uganda Bureau of Statistics and OPM. To further improve the completeness, timeliness and quality of nutrition data in the Health Information Management System, 12 regional referral hospitals were supported to provide coaching and mentoring to districts, with a focus on data management.

In collaboration with UNHCR and WHO, UNICEF provided technical support to the Ministry of Health to improve monitoring of health and nutrition interventions in emergencies, with an emphasis on segregation of refugee-related health and nutrition data.

**OUTPUT 4** Output 1.4. By end-2020, a sustained improvement of access to and use of safe drinking water and improved sanitation and personal and environmental hygiene practices, including in schools and with particular attention to girls.

### **Analytical statement of progress**

The 2016 Uganda Demographic and Health Survey (UDHS) revealed that 83 per cent of Ugandan households used pit latrines, while 7 per cent practiced open defecation. An estimated 78 per cent of households had access to improved drinking water. Only 6 per cent of households had handwashing facilities with soap and 84 per cent of households lacked hand washing facilities.

UNICEF advocated for a progressive shift from conventional drilling of boreholes to the motorization of high-yielding water points in rural growth centres to improve efficiency and address inequities in accessing water. UNICEF Uganda supported the development and operationalization of innovative approaches for motorized solar powered water systems and solar powered water purification units. Approximately 94,000 people gained access to safe water through solar powered water systems in Karamoja (Northeastern Uganda), rehabilitated gravity-fed water systems and 142 boreholes in 12 UNICEF-supported districts.

UNICEF Uganda supported the Government to adapt and implement the rapid appraisal protocol for community-led total sanitation in two districts. This experience will inform the development of a national road map and implementation tools to eliminate open defecation. At decentralized level, 779 communities were triggered and 101 communities were declared open defecation free in 2017.

To strengthen district management capacity in five UNICEF-supported districts with poor WASH indicators, UNICEF supported a bottleneck analysis and the development of a WASH costed action plan. Priority interventions from the costed plans are to be integrated into district development plans.

The Ministry of Education and Sports endorsed a three-star approach for WASH in schools, which aims to incrementally improve the application of WASH standards through behaviour change and infrastructure investments. A national Menstrual Hygiene Management (MHM) toolkit with a reader and audio and video clips for adolescents, parents, caregivers and school management committees was rolled out through the media and in schools in 11 districts.

UNICEF carried out an assessment of the condition of WASH services in 143 health facilities in Karamoja (Northeastern Uganda) and West Nile Region. Most health centres were found to have limited services of handwashing facilities. UNICEF will draw on these findings to prioritize and implement interventions in health facilities.

Approximately 310,700 South Sudanese refugees and host community members in West Nile Region gained access to safe water through operationalization of new motorized solar powered water systems and maintenance of existing systems, coupled with strengthening the capacity of district disaster management committees to implement emergency preparedness and response activities.. UNICEF Uganda also supported local governments in refugee-hosting districts to form water user committees and built their capacity to operate and maintain water points.

With the aim of improving access to basic sanitation in schools, seven blocks of latrines were constructed in Yumbe district (Northern Uganda). As a result, more than 1, 400 pupils in seven schools in refugee and host communities have access to basic sanitation services.

**OUTCOME 2 2.** By 2020, an effective and efficient well-resourced formal and non-formal quality education system that is inclusive, relevant and accessible to all boys and girls with increased school retention, completion and achievement rates.

### **Analytical statement of progress**

The Education and Sports Sector Strategic Plan 2017-2020 was finalized with the approval of the National Planning Authority and launched by the Minister of Education Sports. The plan not only fulfils the requirement to get parliamentary approval of the Government's annual budget but also sets specific targets and strategies to increase the inclusiveness and quality of the education sector, particularly benefiting the adolescent girls and boys. The National Gender in Education Strategy launched in 2017 will contribute to the implementation of the SDGs related to gender equality, including those directly related to girls' education. UNICEF provided technical and financial support for the development of both of these policy instruments. Although the 2017 targets for Lower Secondary enrolment and gender parity were not met, with acceleration in the coming years, the targets of the country programme for Lower Secondary enrolment can still be met.

The Ministry of Education and Sports demonstrated increased capacity for the implementation of complex sector programmes such as the Global Partnership for Education (GPE) funded programme. As the coordinating agency, UNICEF played an active role in achieving consensus among all the parties for restructuring the programme to make it more focused on quality of learning. Successful implementation of the programme is expected to substantially contribute to the improvement in learning achievement of the children in 27 districts.

With GPE funds, UNICEF facilitated the provision of hearing aids to 1,000 needy school children.

A multi-year national Refugee Response Policy, which is based on the Ugandan policy of Refugee and Host Population Empowerment, was at the final stage of preparation. This would not only lead to increased funding for the Refugee and Host Population Empowerment (ReHoPE) strategy but would also provide a framework for coordination of government and partner investments for the education of approximately 1 million refugees and 700,000 children from the host communities. UNICEF played an active role in drafting the strategy and supported the participation of stakeholders in the process.

While early childhood education remained an 'unfunded priority' for the Government, enrolment in community-based ECD centres and private pre-primary schools was growing steadily. With UNICEF support, the Ministry of Education prepared a framework for the monitoring of SDG 4.2 indicators. The primary level completion rate continued to stagnate at approximately 30-32 percent. While the performance of children at the end of the Primary Leaving examination met the target set for 2017, there were serious issues related to learning achievement of children, especially in early grades.

An analysis of the National Population and Housing Census of 2014 showed that 963,000 children were out of school. The 2016 EMIS data showed 96 percent Net Enrolment (93 per cent boys, 99 per cent girls) meaning approximately 360,000 primary school age children were out of school. The EMIS system was identified as key area for strengthening with donor support in 2018.

The share of government budget to education continued to stagnate and although the 2017 target was met, the current trend would not lead to the achievement of the 2020 target of 15 per

cent share of budget. Underfunding of the education sector remained the key bottleneck for the development of inclusive and quality education for all children in Uganda. Only 11.98 per cent of the government budget for 2017/18 was allocated to the education and sports sector. Poor visibility of government support to pre-primary education in the MoES budget limits informed projection of budgetary benchmarks and inhibits donor interest to support the sub-sector.

Despite the development of several policies and strategies to improve the quality of education, low learning outcomes in literacy and numeracy persisted. High teacher absenteeism and low morale, coupled with low community engagement and limited governance in schools, resulted in constrained progress. Low or non-enrolment of children with special needs continued to be a neglected and underfunded area. Violence against children was widespread and caused high school dropout rates.

**OUTPUT 1** Output 2.1. Early childhood development (ECD) By 2020, strengthened national capacity to coordinate, manage and scale up quality integrated early childhood care and development programmes, with a focus on the most deprived and vulnerable children.

### **Analytical statement of progress**

With UNICEF Uganda support, the Early Childhood Development (ECD) Secretariat at the Ministry of Gender, Labour and Social Development established a national technical committee to oversee cross-sectoral coordination of the National Integrated ECD Policy and oriented 86 districts and 16 municipalities on its implementation. A total of 25 districts, 108 sub-counties and 203 parishes established cross-sectoral planning committees for integrated ECD. Twenty-two districts began to converge cross-sectoral ECD services. Although the linkages were yet to be programmatically institutionalized, 14 districts reported the review of integrated ECD implementation in their technical planning committees on a quarterly basis.

UNICEF Uganda supported the use of key family care practices (KFCEPs) to promote quality parenting and create demand for ECD services. A total of 75,445 parents and caregivers (26 per cent male) out of a target of 60,000 were reached with KFCEPs through village health teams, functional literacy groups and other community structures. Civil society and faith-based organizations generated community support for integration of ECD services and identified new avenues for local resource mobilization.

Pre-primary school coverage in 30 districts reached 27 per cent, benefiting 354,736 children (50 per cent female). According to UNHCR data, 53,163 children accessed ECD centres in nine refugee settlements, including 31.5 per cent of Ugandan children. Overall, these centres provided pre-primary access to 36,428 refugee children from South Sudan, the Democratic Republic of Congo and Burundi. UNICEF Uganda, UNHCR and the Office of the Prime Minister (OPM) supported refugee-hosting districts to strengthen their ECD database and integrate the needs of refugee ECD centres into their district planning processes.

The Ministry of Education and Sports (MoES) guidelines for ECD centres and caregiver training framework were revised to strengthen the delivery of integrated ECD services. Approximately 27 per cent of ECD caregivers (3,092 in total) in the 30 districts were trained to provide early learning and quality parenting support, as well as how to implement KFCEPs and engage with other services. An additional 1,376 caregivers were on-track to complete the final module of the training. A total of 454 certified ECD caregivers benefited from supplementary training on parenting support. Increased compliance with licensing and registration (only 33 per cent of ECD centres were licensed in a sample of 5,556 centres) and additional resources are required to ensure that ECD centres meet minimum service standards. Advocacy for budgetary

allocation directly supporting expansion and quality assurance of ECD centres was advanced through review of the MoES early learning policy.

While the Government considered ECD a critical investment for human capital, it remained an 'un-funded priority' in district budgets. Poor visibility of government support to pre-primary education in the MoES budget limited informed projection of budgetary benchmarks and inhibited donor interest to support the sub-sector. Major bottlenecks included unfavourable social norms and unavailability of services, especially in areas with high numbers of refugees. Inadequate capacity for coordination between sectoral agencies for integration of ECD services were also challenges at all levels.

**OUTPUT 2** Output 2.2 By end-2020, enhanced national capacity to increase equitable access, quality and sustainability of primary education that is inclusive and innovative to impart relevant knowledge and skills

### **Analytical statement of progress**

With UNICEF Uganda support, a quality enhancement initiative (QEI) programme was initiated in 600 schools in 20 of the poorest performing districts. QEI is a progressive and school-led process to improve learning outcomes. In 2017, orientation and planning meetings with the schools and district stakeholders were conducted. Full QEI implementation is set to start in 2018.

The development of the Uganda National Inclusive Education Policy (UNIEP) was put on hold until the regulatory impact assessment is finalized. The development of a teacher's handbook and pupils' booklet on inclusive child-to-child learning and a baseline survey on child-to-child learning methodologies were on schedule and will be used to support inclusive education programmes.

A total of 1,920 school management committee (SMC) members from 160 primary schools in 10 districts in Northeastern Uganda were oriented on school improvement planning. This resulted in 67 percent of the targeted schools having functional SMCs and the development of draft school development/improvement plans and action plans.

The Reporting, Tracking, Referral and Response (RTRR) and Violence Against Children in Schools (VACiS) guidelines were disseminated in 109 schools in three districts, reaching 810 teachers (439 males and 371 females) and 25,133 pupils (12,892 boys and 12,241 girls). A total of 1,071 teachers and deputy head teachers were trained in gender and conflict sensitive learning methodologies. Gender parity at primary level was slowly improving, with girls comprising 40 per cent of the school population in nearly all districts in Karamoja.

Bottlenecks included negative cultural norms and practices that prevented children from staying in school and completing their education. District-level coordination of the education sector remained weak and poor data management hampered overall district planning and strategic management of education programmes. UNICEF Uganda will extend support to districts to strengthen management and structures in 2018 and beyond.

**OUTPUT 3** Output 2.3. Adolescent development: By 2020, improved access of adolescents to information, life skills and essential services to reduce their vulnerability to HIV, teenage pregnancy and violence.

### **Analytical statement of progress**

With UNICEF support, the Ministry of Education and Sports developed the Education Sector Support Plan 2017–2020, fulfilling the requirement to receive government budget approval by the Parliament of Uganda. Equity and inclusion are key features of this plan, which aims to improve achievement of key education indicators that lead to a reduction in the number of out-of-school adolescent girls and boys (currently at 900,000), and increase learning achievement for all levels of education. The Gender in Education Policy, launched with UNICEF Uganda support on 11 October 2017, is set to address gender-related bottlenecks affecting education outcomes for girls.

With UNICEF technical support, the Ministry of Gender Labour and Social Development validated and finalized the Multi-Sectoral Strategic Framework for Adolescent Girls. This is a key advocacy and accountability instrument tied in with Vision 2040, UNDAF and the Sustainable Development Goals. It includes nine key outcome areas (HIV and AIDS, teenage pregnancy and maternal health, violence against children, alcohol and substance abuse, education enrolment and retention, education achievement, child marriage, child participation and economic empowerment). Complemented by a comprehensive communication for development strategy, the framework will form a premise for focusing and coordinating ongoing interventions for adolescents implemented through the sectors at the district level and will improve the measurement of results.

With UNICEF support, the Ministry of Education and Sports (MoES) developed a proposal to fight violence against children in schools (VACiS) that attracted funding from the Global Partnership for Education (GPE) and the World Bank. UNICEF supported the implementation of the VACiS strategy and the rollout of the Reporting, Tracking, Referral and Response (RTTR) guidelines for cross-sectoral case management of violence against children in 11 districts with the highest levels of vulnerability. Preliminary evidence showed improved reporting rates of cases of VACiS. The rollout of the National Strategy for Girls Education and The Presidential Initiative on AIDS Strategy to Youth (PIASCY) in 11 districts created conditions for adolescent empowerment through life skills education that complied with PIASCY. A total of 14,476 teachers were trained and 74,279 adolescents (22,917 male and 51,362 female) participated in learning and spreading knowledge/information on adolescent issues through sports, music, arts and drama. The new National Sexuality Education Framework and the Education Sector HIV plan will further contribute to protecting adolescents from teenage pregnancy, sexually transmitted illnesses and HIV.

The emergency response for out-of-school refugee adolescents was expanded, reaching 29,602 adolescents with accelerated learning and livelihood training. The Government, with support from UNICEF and UNHCR, made progress in removing planning bottlenecks in the refugee hosting districts through the production of a draft multi-year Uganda Education Response Plan for the Refugees and Host Communities.

**OUTCOME 3** 3. A comprehensive and functional national and subnational system that prevents gender-based violence and violence against children and delivers quality and equitable response services to survivors and victims.

### **Analytical statement of progress**

In 2017, a large number of children in Uganda, including refugees, received child protection services. A total of 821,335 children 0 to 17 years (49.5 per cent girls) had their births registered. Approximately 587,882 were under the age of 5 years and 11,929 (5-17 years old) were withdrawn from child labour (47 per cent girls). In seven refugee-hosting districts in the

West Nile sub-region (Northwestern Uganda) and the transit centre in Kisoro district (Western Uganda), 98,370 children (40,377 girls) received psychosocial support through structured activities in 77 child-friendly spaces. Another 17,103 unaccompanied and separated refugee children (8,120 girls) were registered in refugee settlements. Of those children, 14,597 children (7,627 boys and 6,970 girls) were placed in appropriate alternative care such as kinship or foster care, and 3,022 children (1,559 boys and 1,463 girls) were reunited with their families or caregivers. A total of 377 children (357 girls and 20 boys) who experienced or were at risk of sexual violence received at least one type of multisectoral support service.

No new data was available in 2017 on the number of children living in institutions. The Government estimated that 50,000 were institutionalized in care. New data on the status of child marriage was expected at the end of 2017. According to the Uganda Bureau of Statistics (UBOS) 2014 National Population and Housing Census, the percentage of children aged 12-17 who had ever been or were currently married was 1.2 per cent for males and 5.7 per cent for females. The same study indicated that the rate of teenage pregnancy for children aged 12-17 was 8.6 per cent.

UNICEF addressed various bottlenecks in the areas of policy and legislation, demand and supply of services. In 2017, the Ministry of Gender, Labour and Social Development (MGLSD) drafted a comprehensive Child Policy, with a strong component on child protection, a National Multi-Sectoral Framework for Adolescents and regulations for the implementation of the Children Amendment Act. The latter two were validated and were ready for approval by the Government.

High level policy discussions were ongoing in partnership with MGLSD, the United States Government and partners, the World Bank and UNICEF on strengthening the child protection system. Discussions focused on building the social welfare workforce at lower levels (the key bottleneck in ensuring children in Uganda are protected from violence, abuse and exploitation in Uganda) and improving linkages between the social welfare and justice sectors. Discussions also addressed streamlining and improving case management and strengthening administrative data sources. Developing a scalable model of a comprehensive system in a few districts was prioritized for 2018. Lessons learned in child protection service delivery in refugee settlements were shared with MGLSD to help integrate the emergency service delivery structures with the national child protection system (e.g. foster care for unaccompanied and separated children).

In 2017 the MGLSD disseminated the preliminary findings of the National Violence Against Children Survey (VACS) to government and non-governmental institutions. Preliminary findings showed that 44 per cent of girls and 59 per cent of boys experienced physical violence before the age of 18; 35 per cent of girls and 17 per cent of boys experienced sexual violence; and 34 per cent of girls and 36 per cent of boys experienced emotional violence. The findings from the study will be used to develop a comprehensive national response plan to impact the lives of millions of children.

UBOS published a U-Survey on female genital mutilation/cutting (FGM/C) in six districts. Findings showed that one-fifth of the surveyed females were circumcised, and 94 per cent of women interviewed felt the practice should be discontinued.

UNICEF continued to support the operationalization of the Uganda Child Help Line (UCHL) National Call Centre and the 16 District Action Centres (DACs). All 2,496 cases reported (1,478 girls, 1,018 boys) received at least one type of service.

The establishment of the DACs improved the capacity of the districts to manage violence against children cases reported to police, social welfare officers and NGOs, which increased by 10 per cent in comparison to 2016. The response rate to cases reported directly at the district level remained lower in comparison to the national level response provided through the national UCHL. In the western districts, out of 282 cases of sexual violence reported (249 girls and 33 boys), 75 per cent received at least one type of support.

Important steps were also taken to ensure a more child-friendly and child-responsive justice system. MGLSD validated a draft child justice strategy, though its approval is delayed to ensure alignment with the new Justice Sector Development Plan IV 2017-2021. This Sector Development Plan for the first time also included a strategic and budgeted output on justice for children.

UNICEF worked more closely in 2017 with the Ministry of Finance, MGLSD and the justice sector to address the key bottleneck of limited government budget allocation to child protection by advocating strategically for inclusion of child protection budget lines in the national budget. UNICEF co-chaired the UNDAF Outcome 2.4 on Gender-Based Violence and Violence Against Children, where there was close collaboration in the areas of adolescent development, specifically, child and early marriage and teenage pregnancy.

**OUTPUT 1** Output 3.1. By 2020, an integrated national child protection system that prevents and responds to violence, exploitation, abuse, discrimination and neglect and ensures the care of vulnerable children.

### **Analytical statement of progress**

UNICEF Uganda supported the Government to address policy and legislative gaps in child protection. A National Child Policy was validated and was awaiting approval by senior management at the Ministry of Gender, Labour and Social Development (MGLSD). The National Strategy to End Child Marriage and Teenage Pregnancy was rolled out to an additional 25 districts (cumulatively reaching 55 districts to date).

The National Violence Against Children Survey final report was drafted and shared with the MGLSD for approval. With UNICEF support, the associated action plan will be integrated with the Child Policy action plan. An alternative care framework for unaccompanied and separated children was rolled out in supported districts in the Western and Northern Regions of Uganda. The national database on gender-based violence was rolled out to an additional seven districts, bringing the total to 24 districts. UNICEF supported the operationalization of the Uganda Child Helpline (UCHLP) national call centre and the 16 District Action Centres (DACs). All 2,496 reported cases (1,478 girls and 1,018 boys) received at least one type of response service. Of those, 689 were cases of sexual violence (680 girls and 9 boys), and four were cases of online sexual abuse (two boys and two girls). The establishment of DACs improved the capacity of the district to manage child violence cases reported to police, social welfare officers and NGOs, which increased by 10 per cent in comparison to 2016. The response rate to cases reported directly at the district level remained lower in comparison to the national level response provided through UCHL.

Twenty-five villages in Karamoja (Northeastern Uganda) declared abandonment of female genital mutilation/cutting (FGM/C) out of 30 targeted in 2017, bringing the total number of

villages to do so to 108. Approximately 11,000 community members participated in the declarations and were reached with messages and community dialogues to end the practice.

A total of 98,370 refugee children (40,377 girls and 57,993 boys) received psychosocial support in child-friendly spaces and 14,597 unaccompanied and separated children were provided with alternative care services. These numbers reflect an achievement below target due to a reduction in the influx of refugees vis-à-vis projected figures for 2017. In addition, 377 children (357 girls and 20 boys) were provided with multisectoral support in response to sexual violence, most of which occurred in their country of origin.

In 2018, UNICEF Uganda will prioritize addressing existing bottlenecks to improve the response to child protection issues, including the weak social welfare workforce, poor response and follow-up of cases at district level, a scarcity of administrative data on violence against children, limited allocation of funds to child protection, and persisting social norms condoning violence and harmful practices.

**OUTPUT 2** Output 3.2. By 2020, a child-friendly and responsive justice system which (as an integral part of the child protection system) effectively and efficiently protects and serves all children, and operates in the best interest of children.

#### **Analytical statement of progress**

The justice sector included a separate justice for children (J4C) budget allocation of US\$3.7 million in its new Sector Development Plan. In alignment with the Children's Act, draft regulations on diversion have been put on hold. The initiative was delayed due to a lack of clarity on institutional mandates and the need to harmonize the draft in line with international standards. Draft guidelines for police were finalized and will be validated in January 2018.

The Ministry of Gender, Labour and Social Development (MGLSD) conducted regional consultations on the feasibility of ratifying the Convention on the Rights of the Child optional protocol 3. Overwhelmingly, the agreement was that Uganda should ratify the protocol. UNICEF Uganda began discussions with MGLSD and the Ministry of Foreign Affairs on the next steps toward doing so.

By September 2017, the continued capacity building of JLOS institutions (especially the police) and the support for J4C coordinators sitting in 13 High Court Circuits led to the diversion of 3,212 of 4,659 children (69 per cent) whose cases were eligible for diversion in 60 districts under the JLOS J4C Programme. Only 482 out of 864 eligible cases (56 per cent) were registered in 27 districts – indicating the urgent need for the diversion regulation and guidelines to be rolled out.

The Uganda Police appointed five senior officers as heads of the Directorate of Criminal Investigations (CID) and Child and Family Protection Units (CFPUs) in Karamoja (Northeastern Uganda), strengthening district-level decision-making. Capacity building for the Judiciary led to the redesign of registers to capture children's issues, making the justice system more child-friendly and responsive.

Inspection visits in 2017 indicated an increase in case recording from 4,582 to 5,251, with certain cases newly reflected in the system from village to district level. This was partially attributed to capacity building efforts extended to 141 officers in 10 districts in 2016, geared at equipping officers with skills to investigate cases that previously would have been neglected as minor issues. The lack of real-time data collection remains a bottleneck.

The limited capacity of judges, prosecutors and other court users to effectively use the audio-visual links installed in seven courts remained a bottleneck.

In 2018 UNICEF will support the Government and partners in addressing bottlenecks such as the lack of community-based programmes for diversion and non-custodial measures to ensure the reintegration of children in conflict with the law and to reduce recidivism and lack of an integrated and computerized case and data management system for children to improve reporting and decision-making on children's cases, especially in the Uganda Police. UNICEF will accelerate training support to specialize judicial officers on J4C.

**OUTPUT 3** Output 3.3. A comprehensive Birth and Death Registration system that will provide the necessary framework for the universal, continuous and free of charge birth registration of all children in Uganda.

#### **Analytical statement of progress**

UNICEF extended technical and financial support to the National Identification and Registration Authority (NIRA) and 135 Government of Uganda and missionary hospitals, and supported scaling up of birth registration services and use of the Mobile Vital Records System (from 77 District Local Governments at the end of 2016 to 87 at the end of 2017). Political and technical staff from 10 selected districts across Uganda were oriented on the legal framework for birth registration. Birth 'notifiers' in hospitals and health centres as well as those at the sub-county and parish levels were also oriented on how to register births and issue birth notifications. As a result, 848,475 children aged 0 to 17 years (49.4 per cent girls) had their birth registered through the MVRS and were issued with birth notifications by the end of the year. Of those children, 606,598 (71.5 per cent) were children under five years of age and 12,193 were refugee children born in Uganda.

Human resource constraints at NIRA continued to affect the pace of developing the Civil Registration and Vital Statistics (CRVS) policy, costed Strategic Action Plan and Communications Strategy, all of which are critical in facilitating universal coverage of CRVS services. The attainment of universal birth registration services nationally, including certification, was further hampered by low public knowledge and appreciation of the importance of birth registration and the changes in access to, and delivery of, CRVS services since the enactment of the Registration of Persons Act 2015.

UNICEF, in partnership with Plan International, funded a CRVS baseline study, whose findings will in part inform the development of the CRVS policy and costed strategic plan. The national CRVS coordination mechanism, launched by the Minister of Internal Affairs in the last quarter of 2017, is envisaged to play a fundamental role in the development of a national CRVS policy, a costed CRVS strategic plan, a CRVS communications strategy, and the revision and updating of training materials to support capacity development of registrars and 'notifiers'.

**OUTCOME 4** 4. By 2020, improved equity-sensitive and child-friendly policies, programmes and budget allocations based on high-quality evidence and strengthened oversight

#### **Analytical statement of progress**

UNICEF continued to work with the Uganda Bureau of Statistics (UBoS) to strengthen the national statistics system. In March 2017 UBoS released the Uganda Demographic and Health Survey (UDHS) 2016/17. Key indicators were reported two months after completing data

collection. This unprecedented achievement was largely driven by the use of computer assisted personal interviews (CAPI) technology supported by UNICEF.

Child poverty analysis was fully integrated in national statistics. In September, UBoS launched the Uganda National Household Survey 2016/17 (UNHS), for which UNICEF and the World Bank provided technical support. The launch took place only two months after data collection was completed and the UNHS report included a dedicated section on child poverty and deprivation analysis alongside Uganda's traditional tools for monetary poverty analysis. By partnering with the University of Bristol, UNICEF built the capacity of UBoS staff to collect consensual poverty quantitative and qualitative data. UNICEF continued to work on further analysis of the UNHS data, including a child poverty and deprivation report. By partnering with the World Bank and UBoS, UNICEF also provided technical and financial support to update Uganda's poverty maps.

UNICEF's leading role in the production of timely and increasingly more disaggregated national statistics also led to the inclusion of the Multiple Indicator Cluster Survey (MICS) early childhood development (ECD) module in the UDHS 2016/17 and the formulation of Uganda's first ever ECD index, as well as the introduction of a disability and functionality module into the UBoS UDHS survey series. Data collection for the latter was completed in April 2017.

In partnership with the Office of the Prime Minister (OPM), the Ministry of Gender, Labour and Social Development (MoGLSD), the Kampala Capital City Authority (KCCA), the National Planning Authority (NPA), and UBoS, UNICEF Uganda launched a pioneering study on 'Emerging Global Challenges: Climate Related Hazards and Urbanization'. This report provides a unique outlook on the impact of climate shocks on child welfare along with detailed information on the status of children living in urban areas. As a follow-up and in partnership with KCCA, a concept note was developed to support the design of an urban-based social protection scheme that is to be fully integrated in the national social protection framework.

In partnership with the Ministry of Finance, Planning and Economic Development (MoFPED) and the Economic Policy Research Centre (EPRC), UNICEF provided technical support to the budget process in order to revisit the balance between social vs. economic allocations and strengthen the national equity agenda in both planning and budgeting processes.

Under the auspices of the joint partnership 'Rethinking Public Finance for Children: Monitoring for Results', UNICEF Uganda's PF4C policy brief series and the National Social Service Delivery Equity Atlas represented pivotal milestones in budget transparency, making data available to monitor the delivery and impact of national programmes affecting children and vulnerable Ugandans. The online Atlas platform, which shows time trends and correlations between public spending and key sector outcomes, was being finalized and will offer strategic insight in support of the Government's quest to strive for economic growth with equity.

UNICEF Uganda, in partnership with Ecorys, was finalizing the fiscal space and political economy analyses, which will strengthen UNICEF advocacy capacity through a better understanding of the role of political economy factors in processes and decisions around the creation and use of fiscal space for investments in children in Eastern and Southern Africa.

UNICEF Uganda contributed to knowledge exchange on policy issues affecting the realization of children's rights by supporting EPRC's launch of the Uganda Children's Portal ([www.eprcug.org/children](http://www.eprcug.org/children)), an online one-stop shop with information on the situation of children in Uganda, and by hosting a speaker series.

UNICEF Uganda worked in close partnership with the Government to popularize both the National Social Protection Policy and Children Amendment Act. UNICEF continued to

collaborate with the Uganda Social Protection Platform and other partners to develop advocacy activities to popularize the Social Protection Investment Case as well as child rights issues. The National Child Participation Strategy was launched in November.

UNICEF strengthened its work on child rights governance and made good progress in supporting MoGLSD to update the State Party report to the Convention on the Rights of the Child (CRC). A new partnership with the Uganda Human Rights Commission (UHRC) was established to strengthen the Commission's capacity on child rights, in particular through a study on the implementation of the CRC in Uganda.

UNICEF also engaged with the Uganda Parliamentary Forum for Children (UPFC) and the newly established National Children's Authority (NCA) to develop advocacy activities on child rights and popularize the Children's Amendment Act.

UNICEF continued to partner with other UN agencies to 'deliver as one' in support of the institutionalization of all Sustainable Development Goal (SDG)-related work in Uganda, including SDG monitoring. Together with UNDP, UNICEF co-chaired the UN Technical Working Group on the SDGs and helped coordinate the SDG Data Task Force.

Key challenges included limited coordination between national planning and budgeting efforts, and insufficient funding for national surveys and social protection.

**OUTPUT 1** Output 4.1. Evidence, budget, policy and institutional analyses By 2020, Strengthened national capacity to provide robust and credible evidence, budget, policy and institutional analyses for children, focusing on reducing disparities and promoting social inclusion.

#### **Analytical statement of progress**

With UNICEF support, the Uganda Bureau of Statistics (UBoS) successfully integrated child poverty diagnostics in UNHS 2016/17. The national statistical system was strengthened by training 18 UBoS staff members in the collection and analysis of qualitative data on child poverty. The UNHS main report was released in September 2017. A national child poverty and deprivation report was being developed.

With technical and financial support from UNICEF, UBoS produced the National Population and Housing Census Children's Report and Equity Analysis. The topics covered in both publications were based on selected CRC articles highlighting the percentage and location of children whose rights were not being realized.

The tabulation plans for the 2016 UDHS (which fully integrated the Multiple Indicator Cluster Survey yearly childhood development module) and the 2017 Disability and Functionality survey were completed with technical input from UNICEF. . Data analysis for both reports was completed and the reports were being finalized for printing. In collaboration with New York Headquarters, UNICEF Uganda supported the ECD cognitive study aimed at improving the MICS ECD module approach to estimating the ECD Index.

In partnership with the Ministry of Finance, Planning and Economic Development (MoFPED) and the Economic Policy Research Centre (EPRC), UNICEF provided technical support to the

budget process to revisit the balance between social and economic allocations and strengthen the national equity agenda in both planning and budgeting processes.

UNICEF Uganda's Public Finance for Children (PF4C) policy brief series and the National Social Service Delivery Equity Atlas represented pivotal milestones in budget transparency by making data available to monitor the delivery and impact of national programmes affecting children and vulnerable Ugandans. Work continued on the online Atlas platform, which will be launched in early 2018. The platform shows time trends and correlations between public spending and key sector outcomes and offers strategic insight in support of the Government's quest to strive for economic growth with equity.

A fiscal space and political economy analysis also was carried out, aimed at strengthening UNICEF's advocacy capacity through a better understanding of the role of political economy factors in processes and decisions around the creation and use of fiscal space for investments in children in Uganda.

To strengthen the evidence base, UNICEF supported the launch of a children's portal and a study on 'Emerging global challenges: Climate related hazards and urbanization'. This provided unprecedented insights on the status of children living in urban areas and the impact of climate shocks. UNICEF also hosted a speakers' series on this issue.

Despite improvements, limited coordination between national planning and budgeting efforts and the infrequent collection of sufficiently disaggregated data for key indicators remained key bottlenecks. More frequent and disaggregated data is required to better inform evidence-based decision making, and to meet the SDG requirements. UNICEF will continue to work closely with UBoS and other stakeholders to address these issues.

**OUTPUT 2** Output 4.2: Child-sensitive and inclusive social protection By 2020, strengthened capacity to develop a child-sensitive and inclusive social protection policy framework and action plan to provide a comprehensive vision and commitment to the progressive realization of universal coverage of social protection.

### **Analytical statement of progress**

UNICEF Uganda strengthened existing partnerships with the Government through the Expanding Social Protection secretariat. A focus was placed on developing the implementation framework for the National Social Protection Policy and a roadmap was finalized that establishes clear social protection coordination mechanism.

UNICEF continued to be a key stakeholder in sectoral coordination. UNICEF handed over the chair of the Development Partner Social Protection Working Group, but remained an active member and co-chair of the UNDAF social protection working group and joined the recently established technical working group on cash-based activities for the refugee response. Through these fora, UNICEF Uganda continued to support national efforts to develop an integrated Management Information System (MIS) for social protection.

UNICEF Uganda continued to strengthen government capacity in social protection through targeted trainings and participation in international meetings. This included supporting a three-person delegation from the Ministry of Gender, Labour and Social Development (MGLSD), the Ministry of Finance and the Uganda Social Protection Platform, a civil society partner, to attend a course on designing and implementing social transfer programmes at the Economic Policy

Research Institute (EPRI) in South Africa. This helped to foster intersectoral recognition and understanding of the importance of social protection and increased intersectoral collaboration.

Collaboration with civil society organizations, particularly with the members of the Uganda Social Protection Platform (USPP), was further strengthened to develop advocacy activities to popularize the investment case as well as child rights issues. An initial project was successfully completed and resulted in increased engagement by key stakeholders (policymakers, parliamentarians, academia, religious/community leaders, civil society and media) at national and regional levels for comprehensive social protection. Key outputs included policy briefs based on the Social Protection Investment Case, a national dialogue with champions from civil society, regional workshops and dialogues with parliamentarians and members of local government. UNICEF plans to build on this partnership and further support USPP to advocate for child-sensitive social protection.

Building on the evidence from the Social Protection Investment Case and the study on the impact of climate change and urbanization on Uganda's children, UNICEF Uganda partnered with Kampala City Council Authority to explore the development of an urban child-sensitive social protection programme, with a focus on adolescent girls.

There was limited appreciation for the contribution of social protection vis-à-vis national development objectives and targets and low prioritization of funding for child-sensitive social protection. UNICEF Uganda will continue to engage in evidence generation and advocacy on the contribution of social protection to national development while working to strengthen the national social protection system.

**OUTPUT 3** Output 4.3. Child Governance By 2020, an enabling environment for child rights governance that includes building the capacity of national institutions and civil society to advocate for children and advance child rights, while creatively designing avenues for children to participate in national policy discussions

#### **Analytical statement of progress**

UNICEF Uganda worked closely with the Government and other national institutions to strengthen their capacity and the enabling environment to strengthen child rights governance.

UNICEF supported the Ministry of Gender, Labour and Social Development (MGLSD) to update the State Party report to the Committee on the Rights of the Child (CRC) through a consultative process that also engaged children.

The Government launched the National Child Participation Strategy in November, which was developed with support from UNICEF Uganda and Save the Children. UNICEF plans to build on this momentum and continue its partnership with the MGLSD, the National Children's Authority (NCA) and other stakeholders to implement the strategy.

A new partnership with the Uganda Human Rights Commission (UHRC) was established to enhance UNICEF's efforts to advocate for the realization of children and women's rights. Work on an assessment of the status of implementation of the Convention on the Rights of the Child (CRC) in Uganda – a capacity building activity for UHRC in addition to filling programme information gaps – was completed in 2017. This will form the basis for further strengthening UHRC's role in child rights monitoring.

UNICEF Uganda engaged with the Uganda Parliamentary Forum for Children (UPFC) and the

newly established NCA in specific areas, namely social protection and public finance and involving these stakeholders in the work highlighted above, namely, the CRC assessment and CRC reporting to equip them with information specific to their mandate and constituencies.

UNICEF co-chaired the UN Technical Working Group on the Sustainable Development Goals (SDGs). The working group supported the development of the national framework for the implementation of the SDGs and is supporting national efforts to develop an SDG monitoring framework.

Key bottlenecks included the relatively low capacity on child rights and child rights monitoring, specifically of key actors such as UHCR, NCA and civil society partners. UNICEF engaged with Parliament of Uganda on substantive issues at the national level and plans to adapt its approach going forward to engage more at the local (district) level.

**OUTCOME 5** 5. Innovative and participatory approaches and partnerships that increase public awareness and understanding of child rights in Uganda, create a social movement to position children on the national development agenda and promote positive individual behaviour and social change

#### **Analytical statement of progress**

Throughout 2017, UNICEF Uganda's public communications and advocacy reached 25 million people through traditional media, 20 million people through social media and 30,000 people via the UNICEF Uganda website – all of which led to UNICEF messages and content being seen more than 630 million times.

UNICEF Uganda continued its national #BestStartInLife early childhood development (ECD) campaign, including a 14 radio and TV spot mini-drama series highlighting key family care practices. The campaign was driven by 17 partner media outlets that gave their national audiences opportunities to engage in the campaign by sharing how they were giving children the best start in life.

UNICEF's public advocacy in 2017 also resulted in increased government interest and willingness to invest in three major areas a national child support grant/social protection programme to lift poor Ugandan children out of poverty; adolescent girls, especially in efforts to keep them in school and reduce child marriage, teenage pregnancy and HIV infection; and refugee and host community children, in particular the South Sudanese refugee children in Uganda. UNICEF continued to publicly advocate for children in Uganda via the production of more than 15,000 multi-media materials, including infographics, videos, human interest stories, photographs, press releases and blogs, which further enhanced the public's engagement on children's issues.

Citizen engagement via U-Report continued to grow, with more than 22,000 people joining the platform in the first half of the year. More than 100,000 Ugandans engaged in child rights discussions using U-Report and approximately 7,000 with specific questions received answers from civil society partners on HIV, sexual and reproductive health, legal issues affecting children and youth, general health related inquiries and cases of violence.

A new partnership with the National Information Technology Authority of Uganda strengthened UNICEF Uganda's advocacy to sustain all of UNICEF Uganda's innovative mobile phone systems, including helping to negotiate sustainable rates for SMS, USSD and Internet access with telecommunication companies.

A National Adolescent Communication for Development (C4D) strategy was validated and an Early Childhood Development (ECD) C4D strategic framework and key family care practices (KFCPs) package were developed. KFCP plans with the Inter-Religious Council Uganda were supported in 15 Karamoja and Acholi districts. Seventy school clubs were established in seven Karamoja districts and they developed action plans. The number of club members reached more than 1,500, with 61 per cent of all club leadership positions filled by girls.

A multimedia menstrual hygiene management (MHM) campaign was broadcast in four languages in 21 districts and a TV and radio campaign was broadcast for the three rounds of polio vaccinations. Radio spots and radio talk shows on Marburg were also supported on three radio stations in the two affected and four at-risk districts.

Five communication packages were developed for six key stakeholder groups and an expanded programme on immunization (EPI) message kit was developed for health workers. Eight hundred district health team members, 30 central facilitators from key line departments and 700 health extension workers were trained on communication for the EPI in 10 Busoga districts. Two radio campaigns were aired for integrated Child Health Days and routine immunization and information, education and communication (IEC) materials were developed for Ebola and Avian influenza. Thirteen types of IEC materials focusing on infant and young child feeding practices (IYCF) and micro-nutrient powder were developed for Karamoja.

Political buy-in on UNICEF Uganda's innovative financing agenda was secured with UNICEF Uganda's concept for a blended finance Uganda Children's Endowment Fund championed by the First Lady. Key results from UNICEF Uganda's concerted political advocacy and mobilization efforts included willingness of the Ministry of Finance to support an endowment fund and a Child Support Grant and agreement by the Permanent Secretary of the Ministry of Information and Communications Technology to champion a micro-levy on all mobile money transactions, including convening all telecommunications companies in Uganda.

Significant interest from major international organizations to collaborate on the blended finance fund was also generated, most notably from the Commonwealth, EU DevCo, ECHO, Uganda National Bureau of Statistics (UBS), Reed Smith, Children's Investment Fund Foundation (CIFF) and a global Impact Investing Summit. Reed Smith and UBS provided in-kind support to start defining the financial structuring of the fund.

Four companies and one apex association became the first private sector organizations in Uganda to start assessing their business practices according to the Children's Rights and Business Principles (CRBPs). The companies were NTV, Capital FM, NBS TV, and Deloitte. The Federation of Ugandan Employers also began to assess its organizational practices vis-a-vis the CRBPs. This set the stage for their membership of hundreds of companies to follow suit. A partnership with the Dutch National Committee to champion the CRBPs within the extractives sector also was developed.

**OUTPUT 1** Output 5.1 A social movement created to drive the public action that accelerates the realization of the fundamental rights of children in Uganda, especially the most deprived

#### **Analytical statement of progress**

Throughout 2017, UNICEF Uganda's public communications and advocacy reached 25 million people through traditional and social media nationally, approximately 15 million people through

social media internationally, and 30,000 people via the UNICEF Uganda website– all of which led to UNICEF Uganda’s messages and content frequented/seen more than 630 million times.

UNICEF Uganda continued its national #BestStartInLife early childhood development (ECD) campaign, including 14 radio and TV spot mini-drama series highlighting the key family care practices required to ensure the optimal development of children from pregnancy to eight years of age. The campaign was driven by 17 partner media outlets that provided their national audiences opportunities to engage in the campaign by sharing their experiences on how they were giving their children the best start in life. Eight additional media outlets, including a leading national radio station, also expressed their interest in partnering on the campaign going forward.

UNICEF Uganda’s public advocacy in 2017 resulted in increased government awareness and interest in a national child support grant/social protection programme to lift many of the 55 per cent of children under 5 who are living in poverty in Uganda out of poverty and in adolescent girls, especially to keep them in school and reduce child marriage, teenage pregnancy and HIV infection.

UNICEF also participated in flagship global CAUSE Framework initiatives, such as Father’s Day and World Children’s Day. UNICEF Uganda leveraged the global Father’s Day activation to highlight several exemplary fathers in Uganda who were doing their best to give their children the #BestStartInLife. For World Children’s Day, UNICEF partnered with 10 media outlets to have children take over their newscasts and programmes on November 20, 2017.

UNICEF Uganda continued to strengthen its voice to publicly advocate for children in Uganda via the production of more than 15,000 multi-media materials, including infographics, videos, human interest stories, photographs, press releases and blogs, which has further enhanced the public’s engagement on children’s issues.

**OUTPUT 2** Output 5.2 Social Accountability strengthened by empowering children, youth and the most excluded populations to make their voices heard and set their own priorities, control their own resources and influence government and private institutions to be more responsive, inclusive and accountable

### **Analytical statement of progress**

Citizen engagement via U-Report continued to grow, with more than 22,000 people, the majority of whom were youth, joining the platform in the first half of the year. More than 100,000 Ugandans engaged in child rights discussions using U-Report, and approximately 7,000 specific questions were answered by from civil society partners on HIV, sexual and reproductive health, legal issues affecting children and youth, general health-related inquiries, and cases of violence.

New partners used U-Report in 2017 to advance key programme objectives for children. The Ministry of Health specifically requested the support of U-Report in the campaign to distribute 24 million long-lasting insecticide treated nets. The Uganda Red Cross Society committed to recruit 500 volunteers per branch to increase the resilience of communities and the Inter-Religious Council of Uganda started recruiting leaders from each of their father, mother, and youth groups to facilitate a two-way dialogue about integrated ECD.

A new partnership with the National Information Technology Authority of Uganda (NITA-U) was established that will support the Government to sustain all of UNICEF Uganda’s mobile phone

systems, including helping to negotiate sustainable rates for SMS and USSD and providing internet access for the Government and citizens.

**OUTPUT 3** Output 5.3 National Capacity enhanced to plan, implement, monitor and coordinate evidence-based programme communication strategies to advance child rights through positive individual behavior and social change

#### **Analytical statement of progress**

In 2017, a national Adolescent Communication for Development (C4D) strategy and the Sports for Development framework were validated. An early childhood development (ECD) C4D strategic framework and key family care practices (KFCPs) package were developed. UNICEF Uganda implemented the nutrition-integrated C4D strategy in 21 supported districts. KFCP plans with the Inter-Religious Council Uganda were supported in 15 Karamoja and Acholi districts. C4D plans for the expanded programme on immunization (EPI) were also developed for 16 sub-counties in 10 Busoga sub-region districts.

A total of 280 district local government leaders were oriented on C4D. One hundred and seventy community development officers (CDOs) and deputy community development officers (DCDOs) and 6,786 parish development committees and functional adult literacy groups were trained to roll out KFCP. A total of 611 religious leaders in Karamoja and Acholi also were oriented on the KFCPs and 1,083,897 men and women were reached at parish level. In the seven districts of Karamoja, 3,934 voluntary health team members were trained on KFCPs.

UNICEF supported the establishment of 70 school clubs in seven Karamoja districts, with action plans in all 70 school clubs developed by pupils and teachers. Club members and patrons were subsequently recruited and equipped with tools and resource materials and club leaders were oriented on their roles. There were 1,513 club members (820 girls, 693 boys) and 61 per cent of all club leadership positions were filled by girls.

Eight hundred district health team members, 30 central facilitators from key line departments and 700 health and health-related extension workers were also trained on EPI communication in 10 Busoga sub-region districts.

For the #BestStartInLife ECD campaign, 14 radio and 14 TV spots were produced and broadcast. A multimedia menstrual hygiene management (MHM) campaign was broadcast in four languages in 21 districts and a TV and radio campaign was also broadcast for three rounds of polio vaccinations. Radio spots and radio talk shows on Marburg were also supported on three radio stations in the two affected and four at-risk districts.

Five IEC packages were developed for six key stakeholder groups and an EPI message kit was developed for health workers. Two radio campaigns were aired for integrated Child Health Days and routine immunization and IEC materials were developed for Ebola and Avian influenza. Thirteen types of IEC materials focusing on infant and young child feeding (IYCF) and micro-nutrient powder were also developed for Karamoja.

IEC materials for the Marburg outbreak were developed in five different languages, with 228,164 posters and leaflets distributed to the two affected and four at-risk districts.

**OUTPUT 4** Output 5.4 Strategic partnerships with private sector established with a view to advocate for and promote child rights

### **Analytical Statement of Progress**

UNICEF Uganda's innovative financing agenda secured political buy-in in 2017. The concept for a blended finance Uganda Children's Endowment Fund to sustainably finance a national child-focused social protection programme (that is, a child support grant) over the next 25 or more years) was endorsed and championed by the First Lady. The Minister of State for Youth and Children's Affairs further championed the initiative to key government stakeholders, including the President, Prime Minister, Ministry of Finance, Ministry of Information and Communications Technology, Ministry of Foreign Affairs, and the Ministry of Gender, Labour and Social Development. Advocacy supporting the initiative as a structured Presidential Initiative on Children also gained traction at the end of 2017.

The Ministry of Finance Planning and Economic Development (MoFPED) expressed interest in supporting an endowment fund and a child support grant. The Permanent Secretary of the Ministry of ICT agreed to champion a micro-levy on all mobile money transactions to be channelled into the Fund, including convening all telecommunications companies in Uganda. The Ministry of Foreign Affairs connected UNICEF Uganda with some potentially strategic international partners to develop and invest in the fund.

Significant interest from major international organizations to partner on the blended finance initiative was also generated, most notably from The Commonwealth, EU DevCo, ECHO, the Uganda Bureau of Statistics (UBoS), Reed Smith, the Children's Investment Fund Foundation (CIFF) and a global Impact Investing Summit. Reed Smith and UBoS provided in-kind support to start defining the financial structuring of the blended finance fund.

Four companies and one apex association became the first private sector organizations in Uganda to start assessing their business practices according to the Children's Rights and Business Principles (CRBPs). The companies were NTV, Capital FM, NBS TV, and Deloitte. The Federation of Uganda Employers also began to assess their organizational practices vis-a-vis the CRBPs Children's Rights and Business Principles – a significant development considering that it sets the stage for its membership of hundreds of companies to follow suit.

A partnership with the Dutch National Committee to champion the CRBPs within the extractives sector also was developed.

### **OUTCOME 6** Special Purpose Outcome

#### **Analytical statement of progress**

UNICEF Uganda had well-established governance committees with appropriate membership and terms of reference that were updated and approved by the Representative in February 2017. The governance committees included the joint consultative committee (JCC); country management team (CMT), programme management team (PMT), operations management team (OMT), partnership review committee (PRC); and the contract review committee (CRC), among others.

As the highest-level governance committee, the CMT oversaw the achievement of key priorities in programme management and operations. The CMT, PMT and OMT met monthly, with few exceptions. This resulted in enhanced monitoring and assurance in the achievement of the key

priorities established in the work plans.

All-staff meetings were held at the beginning of every month and provided a forum for sharing updates on key priorities and emerging issues. Staff members were provided with opportunities for learning through the delivery of training activities relating to ethics, human resources (HR) reforms and other related topics.

Management indicators, including the status of direct cash transfers (DCT) liquidations, inventory movement, funds utilization, funding situation and donor reporting, and travel authorizations open over 15 days were regularly monitored and reported in CMT, PMT and monthly all-staff meetings. This supported tracking of UNICEF Uganda's performance on programme and management priorities as per the Annual Management Plan.

Workplans were completed and signed by the end of February, and the annual management plan was submitted to the UNICEF Regional Office on 15 February.

UNICEF Uganda's risk profile was updated during the first quarter of 2017. An action plan with risk mitigating measures for four high-risk areas (fraud and misuse of funds; results-based management; financial management; and safety and security) and one medium-risk (funding and external stakeholders' relations) was prepared and implemented.

The Harmonized Approach to Cash Transfers (HACT) Assurance Plan was finalized during the first quarter of 2017 and was updated on a quarterly basis. As of 22 December 2017, all six planned micro-assessments of partners had been completed; 630 of 198 planned programmatic visits were completed; 84 of 71 planned financial spot checks were completed; and 18 of the 19 scheduled audits were finalized.

UNICEF Uganda continued to follow up on the implementation of audit recommendations made by both the Office of Internal Audit and Investigations (OIAI) and by the UN Board of Auditors (UNBOA). As of 22 December 2017, 25 of the 30 recommendations made by OIAI (83 per cent) were implemented and ready for closure. Seven of the 10 audit recommendations made by UNBOA (70 per cent) were implemented and were ready for closure as of 22 December 2017.

UNICEF Uganda submitted 1,591 payment requests to the Global Shared Services Centre (GSSC) in Budapest for processing in 2017. A rigorous review of the quality of supporting documentation and the timely response to queries from GSSC resulted in prompt processing of payments. Liquidity was adequately managed and the established benchmark for treasury was met throughout the year.

Finance refresher training was conducted for all programme staff. This helped improve the quality of supporting documents and the speed at which payments and liquidations were processed. Payments to implementing partners, vendors and suppliers and the DCT liquidations were also processed on time. With streamlined processing of financial transactions, more than 95 per cent of payments and transfers that were adequately backed up with supporting documents were processed within two working days and 100 per cent of the DCT liquidations were appropriately filled. Certified funding authorization and certificate of expenditure (FACE) forms were processed within two working days.

In 2017, UNICEF Uganda completed the recruitment for 33 positions, 74 per cent of which were completed within the 90-day benchmark. UNICEF Uganda continued to focus on gender and geographic balance in recruitment efforts. The gender balance stood at 52 per cent female and

48 per cent male. A total of 105 contracts for services were raised, valued at US\$ 1.1 million.

The 2017 staff learning and development plan sought to promote staff growth and development and improve performance. As of 22 December 2017, all 14 approved training activities were completed.

## **OUTPUT 1 6.1 Governance and Systems**

### **Analytical statement of progress**

UNICEF Uganda had well-established governance committees with appropriate membership and terms of reference that were updated and approved by the Representative in February 2017. The governance committees included the joint consultative committee (JCC); country management team (CMT), programme management team (PMT), operations management team (OMT), partnership review committee (PRC); and the contract review committee (CRC), among others.

As the highest-level governance committee, the CMT oversaw the achievement of key priorities in programme management and operations. The CMT, PMT and OMT met monthly, with few exceptions. This resulted in enhanced monitoring and assurance in the achievement of the key priorities established in the work plans.

All-staff meetings were held at the beginning of every month and provided a forum for sharing updates on key priorities and emerging issues. Staff members were provided with opportunities for learning through the delivery of training activities relating to ethics, human resources (HR) reforms and other related topics.

Management indicators, including the status of direct cash transfers (DCT) liquidations, inventory movement, funds utilization, funding situation and donor reporting, and travel authorizations open over 15 days were regularly monitored and reported in CMT, PMT and monthly all-staff meetings. This supported tracking of UNICEF Uganda's performance on programme and management priorities as per the Annual Management Plan.

Workplans were completed and signed by the end of February, and the annual management plan was submitted to the UNICEF Regional Office on 15 February.

UNICEF Uganda's risk profile was updated during the first quarter of 2017. An action plan with risk mitigating measures for four high-risk areas (fraud and misuse of funds; results-based management; financial management; and safety and security) and one medium-risk (funding and external stakeholders' relations) was prepared and implemented.

UNICEF Uganda continued to follow up on the implementation of audit recommendations made by both the Office of Internal Audit and Investigations (OIAI) and by the UN Board of Auditors (UNBOA). As of 22 December 2017, 25 of the 30 recommendations made by OIAI (83 per cent) were implemented and ready for closure. Seven of the 10 audit recommendations made by UNBOA (70 per cent) were implemented and were ready for closure as of 22 December 2017.

## **OUTPUT 2 6.2 Financial Resources and Stewardship**

### **Analytical statement of progress**

UNICEF Uganda continued to nurture the capacity of staff and implementing partners on the Harmonized Approach to Cash Transfers (HACT). Through clear communication, UNICEF staff and partners benefited from orientations on HACT requirements and procedures. The HACT Assurance Plan was finalized in February, 2017 and was updated on a quarterly basis. It formed the basis for capacity assessments, cash disbursement and reporting, assurance activities and capacity development. The plan was implemented through engagement of staff and selected audit firms. As a result, by December 2017, all six planned micro-assessments of partners had been completed; 630 of 198 planned programmatic visits were accomplished, 84 of 71 planned financial spot checks were conducted and 18 of 19 scheduled audits were finalized.

To improve the quality of supporting documents and to speed up the payment and liquidation processes, a finance refresher training was conducted for all programme staff. With streamlined processing of financial transactions, payments to implementing partners, vendors, suppliers and DCT liquidations were also processed on time.

The recovery of value added tax (VAT) remained a top priority in 2017. Drastic measures were taken to obtain proof of payment and filing for VAT from vendors and submitting claims to URA. As of November 2017, more than 80 per cent of outstanding VAT for the period 2014–2016 and 40 per cent for 2017 was recovered from URA. UNICEF Uganda introduced a VAT clause in all purchase orders requiring vendors to file VAT and submit proof of filing to UNICEF within three months. In consultation with the interagency OMT and URA, UNICEF began requiring vendors to provide proof for VAT filing before releasing payments for goods and services received.

After a search and cost-benefit analysis, UNICEF Uganda decided not to relocate to another commercially rentable premise. In August 2017, the United Nations Department of Safety and Security (UNDSS) conducted a safety and security assessment of the current office premises and made recommendations for putting in place safety and security risk mitigating measures. Also in August, a blast vulnerability assessment (BVA) to determine the impact of threats due to extreme events such as a blast was carried out by a BVA expert from New York. Implementation of the resulting recommendations and action plan began in 2017 and will be completed in the first quarter of 2018. UNICEF Uganda considered a building office premises at a plot owned by UNICEF in Mbuya in the Southeastern part of Kampala. UNICEF applied to extend the current land lease for 99 years and to change the terms of use of the land to allow for the construction of an office building.

## **OUTPUT 3 6.3 Human Resources Management**

### **Analytical statement of progress**

UNICEF Uganda submitted two requests for changes to the staffing structure to PBR, in March and in September 2017. The first submission aimed to strengthen UNICEF's capacity to respond to the influx of refugees from South Sudan; support national efforts to prevent and control disease outbreaks; improve the performance of the expanded programme on immunization (EPI); strengthen the rollout of communication for development (C4D) interventions and support evidence generation and equity mapping to inform advocacy and programming. It included 20 proposed changes, with eight establishments, seven reporting line changes and five abolished positions. All recommendations were approved by PBR in March

2017. As of November 2017, 75 per cent of all approved recommendations had been completed.

An ad hoc PBR submission was made in September 2017 which sought adjustment of job descriptions of two positions (ICT manager and health specialist - systems strengthening); the establishment of one position (senior database assistant U-Report) and a change of reporting line for a senior programme assistant position.

UNICEF Uganda completed the recruitment for 33 positions during the year. Of these, 74 per cent were completed within the 90-day benchmark. The gender balance stood at 52 per cent female and 48 per cent male. A total of 105 contracts for services were raised, to the value of US\$ 1.1 million.

The 2017 staff learning and development plan sought to promote staff growth and development and improve performance. As of December 2017, all 14 approved training activities had been completed.

## **OUTCOME 7** Special Purpose Outcome

### **Analytical statement of progress**

In 2017, the office strengthened its coordination structures for adolescent development, integrated early childhood development and gender, with a focus on systems strengthening and promoting inter-linkages between programmes. This was done through more systematic support for local government planning, coordination and budgeting.

Uganda was a pilot country for the Comprehensive Refugee Response Framework (CRRF), which was formally established in March 2017 under the patronage of the Office of the Prime Minister (OPM) to enhance planning and implementing of the Refugees and Host Population Empowerment (ReHoPE) strategy. UNICEF worked with UNHCR and other UN agencies to finalize the ReHOPE action plan and fundraising strategy.

The June 2017 Solidarity Summit for Refugees and Host Communities raised US\$366,525,938 in pledges toward the implementation of CRRF and Settlement Transformation Agenda (STA) of Uganda.

UNICEF Uganda supported the Office of the Prime Minister to advocate for risk-informed development plans in refugee-hosting districts. This first attempt highlighted practical challenges with integration of contingency humanitarian needs in Development Plans at sub-national and sector-level suggesting the need for a strategic shift in the standard development planning approach. Inadequacy of existing data systems and the absence of standard guidance to support integrated risk-informed planning and surge was a major constraint. This support was designed to ensure gains made in those districts were consolidated and they have the capacity to provide services to both the host population and the refugee influx.

UNICEF chaired the Development Partners Group under the CRRF. As part of the RBM rollout, UNICEF Uganda developed a comprehensive programme monitoring framework with relevant tools and clear guidance on process and knowledge management. This was integral to building the capacity of UNICEF staff and partners to plan and monitor the results of a complex and decentralized programme with an annual throughput of US\$60 million. Staff members were able to systematically track and document progress against set targets for children, analyse bottlenecks and work on corrective actions with partners at national and sub-national levels.

The research and evaluation committee was established to guide UNICEF Uganda activities in the annual monitoring, evaluation and research plan. UNICEF's timely contribution to positive changes in the lives of children living in Uganda was documented, analysed and communicated in an effective and efficient manner.

The gender working group focused on mainstreaming gender into programmes and working with partners to promote gender-sensitive basic social services. With the support of the ICT and T4D Specialist, under the leadership of the Deputy Representative, the T4D working group monitored the quality of ongoing and newly developed ICT-based innovations.

UNICEF co-chaired the Human Capital pillar of the UNDAF with UNFPA. As part of the UNDAF, UNICEF collaborated with UNFPA to develop a division of labour framework in the areas of health, adolescent girls and monitoring and evaluation. The purpose of the Division of Labour was to ensure complementarity and avoid duplications at national and district level.

In 2017, UNICEF participated in four joint programmes in HIV/AIDS, gender-based violence, FGM/C and child marriage. Joint planning and implementation of the four joint programmes strengthened coordination between government, UN agencies and implementing partners, thus reducing duplication and enhancing monitoring and reporting on common results.

More than 75 per cent of PCAs were signed within the 45-day benchmark. Grant management was generally on track. There were challenges with the capacity of partners to implement and report in a timely manner. Quality assurance in terms of HACT was ongoing as per the plan and reports were submitted to the Regional Office on a quarterly basis. To date 309 per cent of planned programme visits, 100 per cent of planned micro-assessments and 117 per cent of planned spot checks were completed.

As of 31 December 2017, UNICEF Uganda had US\$68,761,423 at hand, of which 98 per cent was utilized. The funds available included 108 per cent of ORR funds received against a ceiling of US\$40,773,000; 43 per cent received as emergency funds against a ceiling of US\$52,870,000 as well as RR funds of US\$21,358,431. Major funding gaps were in education and child protection.

UNICEF Uganda continued to experience challenges with liquidations of DCTs over six months, which peaked at 11 per cent in November (against a target of less than 4 percent). Measures were put in place as part of HACT strengthening to manage and monitor the reporting and liquidation of direct cash transfers. Thirty eight donor reports were submitted on time to donors.

## **OUTPUT 1 7.3 Cross Sectoral**

### **Analytical statement of progress**

Uganda was host to 1.4 million refugees. Of those 296,409 arrived after 1 January 2017. The large influx of refugees created a huge need for protection services for children, who represented 60 percent of the refugee population.

In 2017, UNICEF worked in collaboration with the Government, CSOs and other UN agencies to deliver critical life-saving health and nutrition, WASH, child protection, education and HIV/AIDS services to approximately 1 million people, among whom 650,000 were children. UNICEF's 2017 Humanitarian Action for Children (HAC) appeal for Uganda was US\$52.87 million, of which US\$16 million was realized. UNICEF support to the government-led response by the Ministry of Health was instrumental in the containment of an outbreak of Marburg virus disease in October 2017.

UNICEF Uganda maintained a surge roster and ensured ongoing deployment of staff for enhanced support at field level. Daily situation updates were shared internally and externally on the evolving humanitarian situation, achievements and response gaps. Threats faced by children in 2017 included measles, malaria, and cholera outbreaks as well as floods and landslides. UNICEF Uganda maintained a sufficient minimum level of readiness for emergency response to ensure effective and predictable humanitarian action.

UNICEF's capacity to coordinate and respond to humanitarian crisis was strengthened through the Humanitarian Action Group (HAG), which met monthly to review workplans and progress on the implementation of humanitarian programmes. Through a stand-by contingency arrangement with the Uganda Red Cross Society (URCS), UNICEF improved emergency preparedness and humanitarian response to affected populations. Support was provided to relevant ministries and local governments to strengthen coordination mechanisms and pre-position supplies as part of preparedness activities. Operational support to programmes through the zonal offices was essential to efficient delivery of humanitarian response. This included regular situation monitoring, programme coordination, distribution of supplies and end user monitoring at the field level.

Training on risk informed programming was provided to 27 UNICEF Uganda staff members, making it possible for programme teams to draft a GRIP-informed 2018 Emergency Preparedness Plan. Uganda was a pilot country for the Comprehensive Refugee Response Framework (CRRF) for which a coordination secretariat was formally established in March 2017 under the patronage of the Office of the Prime Minister (OPM) to enhance planning and implementing of the Refugees and Host Population Empowerment (ReHoPE) strategy.

UNICEF worked with UNHCR and other UN agencies to finalize the ReHOPE action plan and fundraising strategy. The June 2017 Solidarity Summit for Refugees and Host Communities raised US\$366,525,938 in pledges toward the implementation of CRRF and Settlement Transformation Agenda (STA) of Uganda. UNICEF Uganda supported OPM to advocate for Risk-Informed Development plans in refugee-hosting districts. This first attempt highlighted practical challenges with integration of contingency humanitarian needs in Development Plans at sub-national and sector- levels, suggesting the need for a strategic shift in the standard development planning approach. Inadequacy of existing data systems and absence of standard guidance to support integrated risk-informed planning and surge were constraints.

## **OUTPUT 2** Output 7.4 Planning, and Monitoring and Evaluation

### **Analytical statement of progress**

The office developed good quality planning documents that defined 2017 priorities. The 2017/2018 Rolling Workplans for the programmes were endorsed and signed by the Representative and respective government partners. The Annual Management Plan and its annexes (including the HACT plan and IMERP) were approved by the CMT and submitted to Regional Office in February. The 2017 COMPACT of mutual accountability was completed in January and priorities were incorporated in the PERs of CMT members.

The concept note for the Midterm Review of the 2016-2020 CPD was drafted and submitted to the Representative and the Country Management team by 30 November.

The 2016 annual report was submitted to Regional Office by 8 January and was on the portal by 18 January 2017. The report on the 2016 Annual Management Plan and COMPACT of Mutual

Accountability was submitted to the Regional Director by 8 January. The team successfully guided and organized mid- and end-year reviews and the portfolio review with the Ministry of Finance. Reports were submitted in Insight.

UNICEF worked with the adolescent development specialist and the ECD specialist to develop the National Adolescent Development Framework and the IECD M&E framework with the Ministry of Gender, Labour and Social Development.

Implementation of the IMERP stood at 87 percent as of 30 November 2017. The management response for the nutrition evaluation was developed and will be uploaded on Evaltrack. The evaluation of the project on community bottleneck analysis linked to planning and monitoring at the sub-national level will be uploaded once the report is finalized.

More than 75 per cent of PCAs were signed within the 45-day benchmark. Grant management was generally on track. There were challenges with the capacity of partners to implement and report in a timely manner. Quality assurance in terms of HACT was ongoing as per the plan and reports were submitted to the UNICEF Regional Office on a quarterly basis. To date, 318 per cent of planned programme visits, 100 per cent of planned micro-assessments and 118 per cent of planned spot checks were completed.

As at 31 December 2017, UNICEF Uganda had US\$68,761,423 at hand, of which 98 per cent was utilized. The funds available included 108 per cent of ORR funds received against a ceiling of US\$40,773,000; 43 per cent received as emergency funds against a ceiling of US\$52,870,000 as well as RR funds of US\$21,358,431.

UNICEF Uganda continued to experience challenges with liquidations of DCTs over six months, which peaked at 11 per cent in November against a target of less than 4 percent. Measures were put in place as part of HACT strengthening to manage and monitor the reporting and liquidation of direct cash transfers. Thirty-eight donor reports were submitted on time to donors.

## Document centre

### Evaluation and research

Title	Sequence Number	Type of Report
Karamoja FSNA, June 2017	2017/023	Survey
FGM-C Survey Report	2017/022	Survey
Educational Needs Assessment of Adolescent	2017/021	Research
End of project Evaluation Enhanced Resilience Karamoja Program (ERKP)	2017/020	Evaluation

### Other publications

Title
Community engagement and its implications for latrine coverage and better hygiene and sanitation practices: Policy Brief No. 2/17
Water pump stations bring safe water closer to refugees and host communities.
Addressing severe acute malnutrition among children in refugee hosting districts.

Training of health workers improves delivery of immunization services.
Early Childhood Development centres transforming lives in refugee hosting districts.
Bio-latrines in Tororo improve school sanitation, save costs and protect environment.
Strengthening Evidence Based District Planning of Health Systems Using the Score Card.
Father's Day Hero in Bidibidi Refugee Settlement, Northern Uganda.
Official launch of the Irish Aid-supported education programme in Karamoja.
Scaling up treatment of malnourished children in Karamoja
Early Childhood Development: Social Skills
Early Childhood Development: Handwashing
Early Childhood Development: Age appropriate play
Early Childhood Development: Importance of reading
Early Childhood Development: Early learning centres
Care for Child Development (CCD), play and Communication
Complementary feeding
Male engagement, immunisation and birth registration
Engaging with unborn child and maternal nutrition
Exclusive Breastfeeding
Newborn care & early initiation of breastfeeding
Antenatal care and the importance of a stress free environment
Engaging with unborn child and maternal nutrition
What is Early Childhood Development?
Early Childhood Development Policy?
Improving maternal and new borne care
World Children's Day 2017: #KidsTakeOver the media in Uganda
Uganda National Household Survey (UNHS) report
Uganda Demographic and Health Survey 2016 – Key indicators report
Investing in Child Protection – Budget brief
Investing in Human Capital Development– Budget brief
Investing in Health – Budget brief
Investing in Social Development– Budget brief
Investing in Water and Environment – Budget brief
Investing in Education – Budget brief
Improving water access through sub-county level equity prioritization: Policy Brief No. 3/17
Emerging Global Challenges: Climate Related Hazards and Urbanization - Protecting Uganda's Children
Playing against the odds: Achieving better literacy outcomes in the Acholi sub-region: Policy Brief No. 1/17
Uganda Poverty Maps 2012/13
The Uganda Child Helpline Service: Annual Report 2016
Female Genital Mutilation / Cutting Survey Report
National Child Participation Strategy
Communication for Development Strategy for the Adolescent Girl Framework
Marburg IEC Materials
Religious Leaders' Booklet
Polio IEC Materials

Key Family Care Practices Manual
UNICEF Uganda – Emergency Folder with briefs.
UNICEF Uganda - 2016 Advocacy Folder with programme briefs
UNICEF Uganda - 2016 Annual report

### Lessons learned

Document Type/Category	Title
Lesson Learned	UNICEF response to the 2017 Marburg virus disease outbreak
Innovation	Community and District Empowerment for Scale-up

### Programme documents

Document Type	Title	Name
Reviews	UCO End-Year Review (2017)	UCO 2017 End Year Review Report.pdf
MTR	Uganda 2018 MTR Roadmap	Uganda_MTR_2018_Roadmap 120118.docx
MTR	Uganda 2018 MTR Concept Note	Uganda_MTR_2018_Concept Note 120118.docx
Country Update	Status update on follow up action points in the 2017 Global Staff Survey	2017.12.21 Follow-up Actions on Issues Raised in the Global Staff Survey -Updates 21.12.2017.pdf
CPMP	Country Programme Management Plan	Uganda CPMP-IB main document - 13 March 2015-2.docx
CPMP	Uganda CPMP-IB main document	Uganda CPMP-IB main document - 13 March 2015-2.pdf
Country Update	Situation Analysis of Children	5. Situation Analysis - 2015 UNICEF Uganda SitAn.pdf
CPD	UCO Country Programme Document	2015-PL10-Uganda_CPD-EN-18May2015.pdf