Assessing the Capacity-Building Process in Uganda

Introduction

1.1 Background and purpose

This Assessment was carried out at the end of the fifth year of the 1995-2000 Government of Uganda (GoU) — UNICEF Country Programme (CP). It focuses on capacity building (CB) as a key strategy of the CP and situates this specifically in the context of Uganda's decentralisation policy.

It was carried out by a mixed team external to the UNICEF CO, comprised of two lead researchers (one national and one international), and 7 research assistants. In addition, one staff member from UNICEF Evaluation Section in New York provided guidance on overall design, the evaluation framework, and methodology and assisted in analysis. The team operated under the guidance of the planning officer UNICEF-Uganda and a UNICEF Uganda-Government of Uganda (GOU) management team.

The Uganda CP is of particular significance within UNICEF as an example of a programme with a very explicit focus on CB, targeting capacity at various levels of society and experimenting with a cross-sectoral programme as part of the CB strategy. At the time of the Mid-Term Review the programme was viewed by evaluators and programme managers as a “radical departure from previous vertical sectorally-based goal-oriented programmes” (UNICEF Uganda, 1997b: 13).

This Assessment is also significant to the evolving discussion on capacity building within UNICEF but also in broader international circles. CB is widely accepted as the critical overarching strategy for development assistance as has been repeatedly asserted in UN General Assembly statements. During the period of the CP, a convergence in approaches and conceptual frameworks on capacity and capacity building has gradually emerged among a variety of organisations. Conceptual approaches have derived largely from ongoing field experiences. This complementary relation between practice and theory continues. The emerging broadly defined frameworks offer the opportunity to re-examine the experience of the GoU-UNICEF CP in light of current understandings.

The Assessment is therefore intended to feed into discussions around the formulation of the new CP for next programming cycle. In this sense, the Assessment process was designed to give attention to a process of dialogue among programme partners in Uganda around an operational concept of capacity building, an area already noted as problematic by programme managers at the outset. The exercise was in this sense more akin to a formative evaluation of a strategy that will continue to be central to the new CP.

The Assessment is also intended to contribute to a wider UNICEF initiative to more systematically learn from UNICEF experience in capacity building strategies, as well as to develop methodologies for the monitoring and evaluation of capacity building. As such the Assessment draws from ongoing work on the development of analytical frameworks and evaluation tools on capacity building and has served to test and further shape these. It is hoped that the Assessment also will contribute lessons on capacity building of broader relevance for UNICEF globally.

While named an assessment this exercise was accepted to be much closer to a formative evaluation. As is indicated in section 1.2, it is intended to combine both appraisal of the experience as well as to provide an overview baseline assessment.
1.2 Objectives

The objectives of the Assessment were discussed with the UNICEF CO managers with reference to the original ToRs (see Appendix A). It was eventually determined that the Assessment should strive to answer three broad questions:

- Was the approach to CB appropriate?
- Was the approach to CB effective?
- What is the baseline of capacity in broad terms for the next CP cycle?

It was agreed that in addition, a process objective should be to contribute to establishing a broad consensus around a framework which would serve the Country Programme Management Team (CPMT) in future programming, both for assessment of capacity and evaluation of capacity building. The dialogue around analytical frameworks would ideally involve a wide range of key partners at various levels.

1.3 Conceptual framework for analysis of capacity

The Assessment makes reference to a Conceptual Framework for analysis of capacity, in particular for the capacity assessment facet of the exercise, but also as a basis for the Evaluation Framework which follows in section 1.4.

The Conceptual Framework was based on the convergence of literature on capacity building from organisational, institutional and systems approaches drawing from the work of sister international organisations, bilateral agencies and non-governmental organisations (NGOs) as well as from UNICEF country and regional offices. The Conceptual Framework was developed in the course of ongoing work by UNICEF globally on development of guidance and tools for the monitoring and evaluation of capacity building. For this Assessment, an initial draft was presented and discussed with UNICEF Uganda CO staff, key GoU counterparts as well as UN and bilateral agencies present in Kampala. Key Informants were also asked about their understanding of capacity and capacity building, though this was more intended to situate their responses. In the course of this Assessment exercise, between stages of data collection and analysis, the Conceptual Framework has evolved to some degree as different terms were better defined and distinguished through practical application.

The Conceptual Framework which follows presents a general understanding of the inter-related factors that influence capacity. A number of important considerations about CB follow from this.

1.3.1 Understanding capacity

Across the range of concepts and approaches to CB, some very basic common notions emerge about capacity.

- National capacity exists without outside intervention. Outside intervention does not create capacity, though it may be useful or necessary to eliminate barriers and facilitate existing capacities.
- Capacity exists at all levels of social organisation - among individuals, within families, in communities, at the sub-national level, nationally and globally. Capacity at these different levels is clearly inter-related.
- Further, capacity exists within structured organisations as well as in open society.
- Capacity can only be analysed and understood in relation to a specific objective, i.e. the capacity to do what? Analysis will be very different if we examine national capacity to achieve industrial development goals, or to promote and protect children's rights. The more specific the goal, the more specific the

Note that the CPMT by definition included UNICEF and partners, specifically in this case GoU

This work on development of M&E guidance and tools draws most heavily from Hildebrand and Grindle/UNDP (1996), INTRAC (1995, Kaplan (1999); Lushaus et al/IDRC (1995, 1998); PACT (1996); Peter Morgan in number of works for CIDA (1993, 1996, 1997, 1999); John Saxby/CIDA (1999) as well as UNICEF Zambia and Namibia (1994). More recently, the framework presented here was revised further drawing from UNICEF ESAR (draft 1999) and the discussions of joint UNDP-UNICEF workshop looking at planning and monitoring of CB which are captured in a workshop report (UNDP-UNICEF, 2000) and will be presented in a forthcoming draft by UNICEF-NY.

Organisations are taken in a broad sense as any group of people in some kind of structured relationship which works with common purpose, even if ill-defined. Organisations thus include Community Based Organisations (CBOs), Civil Society Organisations (CSOs), NGOs, government at local and national levels, and international organisations.
analysis of capacity.

In addition to the above basic concepts, capacity was also understood to be the product of contextual factors and a range of ingredients or elements that contribute to capacity, all of them interdependent. There are three broad categories of contextual factors that influence capacity:

- There is a range of pressures for change that can be factors in a gradual or very rapid change in national capacity. These include in political influences such as changes in political leadership in a country or neighbouring countries, environmental pressures such as droughts or hurricanes, economic pressures such as international trade trends, technological pressures such as the introduction of Internet.

- These pressures influence the institutional norms and values in a society. Institutions in this sense refer to the 'rules of the game' which guide interactions in the social, political and economic spheres (North, 1994). This includes formal norms - legislation, policy, political parties or processes, and administrative structures and mechanisms. Institutions also includes informal norms - customs, traditions and practice shaping socio-economic class structures, age and gender roles, structures of entitlements (kinship, clientelism, etc.), patterns of civil society organisations and mechanisms of participation. Even in stable contexts, institutions at all levels, formal and informal, must be understood as fluid. Shifts in institutional norms and values can change the demands and expectations that populations have for organisations to perform, including performance by public, private, national and community-based organisations. Thus the institutional norms and values are the 'rules' which guide the range of behaviours and interaction between people and organisations across different levels of society - community, sub-national, national.

- The institutional norms and values in turn influence the stakeholder context. Stakeholder here was taken to mean the wide range of actors who can influence or be influenced by the achievement of a given goal or undertaking. These include thus both the winners, those who have something to gain by achieving a goal, and the losers, those who may lose in power, status, material wealth (Morgan, 1996). The interests of different stakeholder group (or even pivotal individuals) can thus represent opportunities for capacity growth or barriers. Interests and powers of influence must be assessed carefully as seemingly weaker groups in fact are often pivotal actors in achieving certain goals; for example, the most vulnerable families, women and children themselves are key actors in achieving children's and women's rights.

Within this context it was proposed that the best way to understand capacity to achieve a certain goal, was through closer analysis of the network of actors whose interests coincide to some extent around that goal (sometimes called a "work community" or "task network"). Examining this network must start with the question "what must be done by this network to achieve the goal?" This was best answered by identifying the core functions which must be carried out and maintained by the network, in order to achieve the goal (Morgan, 1996). The concept of function refers here, not to the bureaucratic title, but rather to an activity, with established ongoing processes and tasks, related to an overall purpose or goal. Many of the key functions were quite generic and relate to the critical cycle of "triple 'A'" — assessment-analysis-action. Key functions were also related to basic management or operational functions, such as resource mobilisation and logistics. Key functions such as leadership and coordination were critical in linking the different functions and roles together. Other key functions were more technical in nature, related more specifically to the goal, for example, goals in water and sanitation, health, nutrition and early childhood development.

For each function, it was then possible to analyse the strengths and weaknesses. It was

*These institutions, particularly the informal socio-economic institutions, correspond to what is often called 'social capital', a term which places these tangibles on a table as a critical resource (stronger or weaker in different societies) which must be contemplated in development/humanitarian assistance processes and interventions.
suggested that this analysis of strengths and weaknesses can be carried out with reference to frameworks from the field of organisational development. This literature suggests that the following broad inter-related categories of elements contribute to functions:

- **Division of labour/responsibilities**: The broad question here is: who has and/or should be involved in which functions, with responsibility for which specific tasks? This question applies similarly to organisations, families, communities and whole networks. This question points to the effectiveness of the division of labour. It also points to the right of individuals and groups to participate in responding to issues that affect them.

- **Space/authority to act**: For capacity at any given level, this must be analysed in relation to each function and key actors involved. For each group or organisation, it is important to understand who has the authority - formal responsibilities, legal base, mandate as well as informal roles and credibility with partners and constituency - to act in favour of the objective. Similarly, it is important to consider whether different stakeholder groups have the space in which to act, i.e. whether institutional norms and relations with other more powerful stakeholders support or constrain their action.

- **Motivation - mission/vision, incentives, attitudes, values**: This group of elements is critical in guiding patterns of behaviour. For organisations a critical element in motivation is a clarity of mission (for example in a mission statement) and its relation to the goals the organisation is trying to achieve. The mission clearly stems from a conceptual framework or way of understanding the world. For networks or communities such a vision may often be less defined, but is equally important. The mission or vision is intricately related to attitudes, values and identity - the organisational cultural - which also shape the capacity of individuals and organisations or communities to take action. This culture is often shaped by relations between leaders, organisations or networks of organisations with a constituency or governing body. Similarly, behaviour is also guided by incentives including income, indirect economic benefits as well as opportunities, recognition and status which individuals within an organisation or a group perceive as encouraging a given action. (These notions correspond to the ‘institutional norms’ mentioned above, though within or specific to a network, organisation or community.)

- **Structure and procedures**: Each of the key functions will be supported or not by informal and formal structures and procedures. These structures and procedures may facilitate or constrain how actors (organisations or individuals) interact as well as how well related functions are connected. This is true in communities and families as well as organisations and networks.

- **Resources**: Each function carried out by key actors requires the appropriate resources. These resources include human resources (number, skills and knowledge; utilisation and retention), financial, material, technological and information. It is just as important for a network, organisation or community to be able to mobilise resources, as it is to possess resources.

- **External relations**: The network and its key functions must eventually be linked back to the broader context, to ensure responsiveness to the wider stakeholder context, the evolving societal institutional norms and values and the pressures leading to change.

*Table draws freely from Hildebrand and Grindle, 1996; Eele/UNICEF Zambia, 1994; INTRAC, 1995; Kaplan, 1999; Lusthaus et al /IDRC, 1995; PACT*
1.3.2 Common characteristics of CB

Related to the above understanding of capacity, there are certain widely accepted characteristics of efforts to strengthen capacity, i.e. CB. In relation to the objectives or intent of CB, the following is generally accepted:

- CB is most commonly associated with the long-term goal of development, more specifically sustainable development. Capacity outcomes/results are valued for their contribution to lasting development outcomes/results. This implies that the desired result is not sustainability of programmes, projects or even organisations, but sustainable development. Further stability is not the desired end; rather it is flexibility and "responsiveness" (Morgan, 1997; Kaplan, 1999) of organisations or systems.

- CB is also widely linked to processes and goals of participation and empowerment. Participation is a qualitative characteristic of the process of CB; i.e. CB should be participatory. Similarly, the process of CB should lead to new and more powerful roles for national (as opposed to international) actors. Thus the notions of participation and empowerment define explicitly the kind of development we wish to achieve. These terms specify that this 'development' must include equality, inclusion of less powerful stakeholders and a fairly broad participation across society — a vision that coincides with a human rights-based approach to programming.

- CB is also based in a notion of partnership. It entails a transformation of the roles and relationships between donors and national partners whose capacity is to be strengthened. It entails partnership leading to national ownership.

In addition, there are a few commonly accepted characteristics of the approach to CB:

- CB must give emphasis to process. Even the desired outcome of CB can be seen in terms of the effects on the development process, emphasising the ongoing nature and less tangible social aspects of development (Kaplan, 1999) which ultimately contribute to sustainable results. It follows also that CB is a long-term endeavour beyond a programme or projects lifespan, though it is considered possible to define intermediate capacity results.

- Increasingly it is accepted that the process of CB is non-linear, does not follow a predictable sequence of input-process-output-outcome, even in the context of a more stable development process.

- CB efforts and expectations must of course be sensitive to context, acknowledging stages of development, the culture of institutional norms and stages in the evolving capacity of an organisation or a society (Kaplan, 1999; Universalia, 1999; PACT, 1996). The intervention and expected results will be different depending on timing and the stage of development.

- Similarly, CB is not neutral. A certain realism is required in CB, acknowledging that there will be 'winners' and 'losers' in development.
the process (Morgan, 1997). CB strategies must take into consideration the effects on power relations among various national stakeholders (Universalia, 1999).

Finally, all of the above underlines that CB is a way of doing business, as opposed to a thing. It suggests that CB requires a model or strategy to change capacity, i.e. a clear understanding of:

- the purpose for which capacity is to be used;
- which specific function or core capacity is to be strengthened;
- which actors are to be involved (whose capacity is to be strengthened);
- what gaps, weaknesses or constraints should be addressed;
- how the different functions and the related constraints/opportunities are interconnected; and
- how change will be achieved (inputs, activities & processes).

1.4 What is good CB? -- putting Uganda Country Programme experience in context

While the evaluation framework outlined above provides a fairly simple reference to assess a CB strategy, it is important to re-emphasize that the framework represents a relatively new standard of comparison. Obviously, the concept of CB is not new. However, at the time that the CP was formulated (1994), the connections between organisational development, institutional development and systems analysis frameworks and approaches were not well articulated. It was therefore important to situate the CB strategy in the GoU-UNICEF CP in this context. UNICEF has long pursued various facets of what we would now encompass in a CB strategy. However, it was only following the 1992 Multidonor Evaluation that UNICEF formally adopted capacity building among its four key strategies (alongside service delivery, empowerment and advocacy). No operational definitions were established for any of these concepts at the time. UNICEF began working more systematically to develop a framework for understanding capacity and CB in 1997, with a first working draft developed in 1998, which has been progressively revised. (Uganda was one of the countries invited — counterpart and CO — to participate in that process). Further, many of the critical works proposing conceptual frameworks from systems perspective to CB, only came out after the beginning of the Uganda CP (See CIDA, 1996, 1997; UNDP, 1996). Conceptual frameworks by both UNDP and UNICEF continue to evolve as suggested by discussion in a joint workshop in Harare, November 1999. At the same time, works focusing on organisational development approaches have continued to evolve with fairly recent publications, for example, by Oxfam (1998), IDRC/Universalia (1995, 1998), PACT (1996).

1.5 Methodology

The Assessment used a mix of methodologies as appropriate to the different levels and scope of investigation as well as to the process objective of dialogue around a conceptual framework of capacity building. Existing quantitative data was analysed where relevant, while most new data collection was qualitative.

Data collection methods included:

- Desk review,
- Focus Group discussions,
- Key informant interviews,
- Consultative meetings with UNICEF staff and key actors key actors at national and district levels,
- District capacity analysis workshops.

1.5.1 Overview of the CP design

The Country Programme was designed to contribute to the implementation of the UNPAC. The overall objective of UNPAC was to achieve survival, protection and development goals related to children and women for the year 2000, building on existing government policies and sectoral plans. (UNICEF Uganda and GoU, 1994.).
Country Programme was intended to contribute to the achievement of the following two broad objectives in the long term:

- "That all Ugandan children are born into a social environment that fully embraces their rights, is fully cognisant of their basic needs and makes all efforts to meet these needs with available resources.

- That, within their social environment, all Ugandan women and girls enjoy equal rights as do males to development opportunities and are freed from all forms of discrimination." (UNICEF Uganda and Government of the Republic of Uganda, 1994: 14)

In the analysis of how this is to be achieved, an underlying set of key functions are clearly identified as a core focus for CB across the whole CP: that is the “Triple A” model considered to cover “the three basic elements of all management or coping processes”. The elements include “awareness of a problem and its magnitude (assessment); analysis of its key elements; and taking action to contain it, leading to a cyclic process of re-assessment, re-analysis and eventually to more effective action” (UNICEF Uganda and Government of the Republic of Uganda, 1994:15).

The CP design, presented as a three-dimensional structure in the Master Plan of Operations, was qualified as innovative albeit complex during the 1997 Mid Term Review exercise. The CP combined (UNICEF Uganda and Government of the Republic of Uganda, 1994: 18):

- four cross-cutting components which described different “levels or categories of action” - “community level”, “service providers & facilitators”, “mobilisation and management of resource for service delivery” and “policy and quality assurance measures”;

- four programmes - three multi-sectoral programmes (the Health, WES and Basic Education, Child Care and Adolescent Development, BECCAD, programmes) and one cross-sectoral programme (the Communication, Coordination and Advocacy Programme, CCA) intended among other things to strengthen “triple A” (assessment, analysis, action) processes particularly among actors who are outside the traditional sectoral groups but are involved in resource mobilisation;

- a series of “cross-cutting functions and skills” - gender analysis, information management, communication skills, environmental analysis, understanding of nutritional status as an indicator of programme performance, and finally, overlapping with the components above, “mobilisation and management of resources”.

Figure 4: Three-dimensional programme framework

The components are described in more detail as follows (UNICEF Uganda and GoU, 1994: 15):

- “strengthening and facilitating the ability of all important actors at community level to take informed decisions and actions that will lead to improved behaviour and practices for women and children;

- reinforcing the capacity of service providers, facilitators and managers to improve the performance, efficiency and coordination of delivery systems to meet priority community needs and create effective demand for basic social services;

- strengthening the capacity of managers and decision-makers to plan,
manage and coordinate the mobilisation and allocation of resources to meet service delivery needs as well as to account for and measure the impact of the use of these resources;

- facilitating the development of an enabling environment at all levels and a common framework of policies and coordinated approaches to support positive behaviour and improved delivery of services."

In relation to each of these components and the cross-cutting functions and skills, the four programmes developed a range of activities or interventions, some of which were adjusted over the course of the CP. Each of the programmes is complex and entailed numerous planned interventions targeting different levels as is illustrated in the programme models developed in Appendix F. These are analysed further below.

**1.5.2 Scope of the assessment**

Two levels of analysis were used. A broad level of analysis was carried out in relation to the appropriateness of the CB strategy of the CP and its four programmes (a mix between multi-sectoral and cross-sectoral programmes). This broad level of analysis was also used in relation to the overall capacity context, as it evolved over the five years and could be characterised today. This level of exploration was supported by the desk review, a more limited number of key informant interviews at national level as well as consultative meetings.

By contrast, in order to examine the effectiveness of CB strategies, which required new data collection at field level, it was necessary to narrow the scope.

A decision was taken to give special attention to the one crosscutting programme, the Communication, Coordination and Advocacy (CCA) Programme. This decision was based on concern over the linkage between broad crosscutting CB efforts of the CCA programme and more substantive development goals vis-à-vis changes in children’s and women’s rights, a concern which had been raised in the MTR process. At the same time, it was clear that linkages between the CCA programme and the more sectoral programmes, or the absence of such linkages, would be difficult to capture without more in-depth study of concrete sectoral programme examples. The CO senior staff also argued that no one programme was representative of the range of CB strategies adopted across each of the four programmes of the CP. It was therefore agreed that the new data collection would focus on a selection of “interventions”, one from each programme, based on the UNICEF CO section chiefs’ perspectives on what would be critical issues or facets of programming in the next CP cycle. This selection produced a mix of interventions:

- Under the CCA Programme, the chosen focus was the set of activities to support more rational allocation of resources focusing on greatest need. This in fact cast wide, including most of the activities under the CCA programme, with the exception of the Functional Adult Literacy project and the newer work with the WES programme on communications packages for behavioural change.

- Under the Health Programme, the chosen focus was support to the functioning of health management committees (including Parish Development Committees).

- Under the Water and Environmental Sanitation (WES) Programme, the selected focus was the support to management information systems.

- Under the Basic Education, Child Care and Adolescent Development (BECCAD) Programme, the choice of focus was dictated by the understanding that the Child Protection facet of the BECCAD programme would be replaced in the new CP by a broader “mainstreaming” of a child rights across all sectors. It was therefore decided that the best strategic focus of the Assessment would be on efforts to raise awareness and sensitivity to child rights. Given the probable shift towards mainstreaming, it was accepted that it would not be necessary to attribute attitude change to specific programme efforts.
1.5.3 Field data collection

Given that the focus of data collection was on understanding the ‘how’ and ‘why’ of the implementation of CB, the methodologies adopted were designed for depth of analysis, as opposed to wide coverage. Several stages of purposive sampling were used to identify information-rich cases. Sampling was guided by the need to examine CB efforts at successive levels of local government targeted by the CP and the relationships between levels.

The district level was to be targeted as one common administrative level to begin data collection for all programmes. Three districts were selected where at least 3 programmes could be found operating together, whether or not this was at different administrative levels. These districts were Mpigi, Mbarara and Bushenyi. In each case, descriptions of perceived and reported programme performance in the district were collected from UNICEF staff as a reference district profile.

Within each district, contrasting strong and weak cases were selected at sub-county level and at least one additional level, parish or village, depending on where programme strategies extended. For each District, key informants, focus groups members and participants of the stakeholder consultation workshops were selected representing a range of perspectives on each selected programme. A more detailed explanation of this sampling as well as interview guides, workshop process and implementation of each is provided in Appendix C: Methodology.

1.5.4 Process

The assessment process was interactive and participatory. At various stages of data collection efforts were made by the CB team to get the input of the management team and the key stakeholders in the country programme implementation. The figure below gives a graphical representation of the process.

1.5.5 Assumptions and limitations

The Assessment was designed to follow a fairly defined framework as outlined in section 1.4. By design there were clearly a number of assumptions as well as issues and questions not covered by this exercise. Similarly, particularly in relation to the CP context and the practicalities of implementation, a number of additional limitations arose.

The following are the key assumptions and limitations defined by the evaluation framework itself:

- Given the focus on the CB strategy, the Assessment was not intended to cover wider evaluation issues, in particular appraising the relevance of child rights goals or overall effectiveness of the CP. The focus was specifically on the CB strategy.
- As suggested by the methodology, it was assumed that there was no single objective truth among the various stakeholders; rather different perspectives were to be gathered and contrasted for better understanding.
- With respect to the focus on effectiveness as opposed to impact, it was noted by the team...
and the UNICEF evaluation managers that even appraisal of results vis-à-vis programme objectives (i.e. effectiveness) would be complicated by the very fact that CB objectives in the CP were not consistently specific, measurable or timebound. It was agreed that it would not be feasible to systematically explore broader impact, given the wide variety of multi-level interventions, differing from programme to programme.

- In general, it was accepted that attribution of results to any one partner (UNICEF, GoU, other partners) would not be measurable.

- In relation to each of types of changes or results examined following the framework, it was accepted that the Assessment would only be able to document signs of change and then, based on perspectives of different stakeholders and analysis of context, to make some judgement on the plausibility of change being attributable to the CP.

- Also as follows from framework, it was understood that the overview of capacity intended as an initial baseline for the new CP would be very broad. It was not feasible to analyse capacity in relation to more specific child rights goals, given the time and financial budget for the Assessment.

In addition, there were a number of limitations stemming more from the Uganda CP context:

- As was noted in the MTR, no effective monitoring system had been developed to track progress in CB. Given the context outlined in section 1.4, this would have been an outstanding achievement. However, absence of data more specifically related to CB was still limited at the time of the Assessment. This meant that there was a great reliance on the qualitative data collection carried out for the Assessment.

- Given the absence of guidance on the CB concept it is not surprising that the CB strategy in the Uganda CP was vaguely defined. In many cases it was necessary to infer the overall CB strategy, leaving the Assessment conclusions open to errors in interpretation. This was to some extent overcome through a process of validation and cross-checking of initial findings and conclusions with key informants.

Finally, a number of limitations arose in the course of implementing the Assessment, many associated with logistical constraints and corresponding delays:

- The two lead researchers and later the research assistants all received orientation on the evolution of the framework for analysis of capacity and CB — 10 and 3 days respectively (with follow-up in the field for research assistants). However, even the time originally allocated was undermined by unexpected schedule conflicts and other events. All team members generally agreed that more time should have been allocated to the initial orientation of the team to the conceptual framework.

- Possibly as a result of the limited time for orientation as well as overall time constraints, the research assistants were unable to probe sufficiently in field interviews. This was particularly a limitation in data collection on the four key interventions selected for case study. While interviewees selected successfully represented experiences across the four interventions, the depth of information collected was limited.

- Interviews at national level were limited. An important second round of interviews with CO staff was not held and was substituted by a phase of commenting on the initial draft report.

- The sequencing of intermediate products had been planned in detail to ensure that findings derived from the key informant and focus groups interviews at district level, as well as the documentary review would feed into consultation workshops. These workshops were intended both for validation of information from these other sources as well as new data collection. Unplanned delays including
logistics problems in a very tight schedule meant that this linkage was not made. The cross-checking of information from different sources and methods therefore took place only at the analysis stage for the first draft report.

- Insecurity was identified as a key factor in capacity and effectiveness of capacity building. However, for the assessment, budget & accessibility hindered the selection of a case district that would allow this focus using the same methodology. It was agreed that a desk review and interviews with key informants at the national level be carried out to gather view about the effects of insecurity on capacity and capacity building.
This section provides an overview of the key elements of the Ugandan context, 1995-2000, which are likely to have influenced national capacity, and hence the CB strategy of the CP. The analysis follows the broad framework described in section 1.3, covering: key factors influencing change in context (economic, political, insecurity, environment), the evolution of institutional norms and values affecting the opportunities to realise children's and women's rights, an overview of the stakeholder context. The section then concludes with an overview of the evolution of capacity in the context of decentralisation. As this section traces the evolution through to the present, it stands as a general assessment of the capacity context today, as the UNICEF CO and partners prepare the new CP.

2.1 Pressures for change - economic, political, insecurity, environment

The context in which the CP evolved was in general very favourable to the development of a capacity building strategy in partnership with a broad range of national actors. The context was not however without challenges.

Throughout this decade Uganda has been looked upon increasingly as the “star among countries of sub-Saharan Africa” for its phenomenal macro-economic achievements (UNICEF Uganda, 1997b: 5; Namirembe-Bitamazire et al., 1997:2). This has triggered considerable international attention on development progress in Uganda. The government has introduced policy reforms including structural adjustment policies, liberalization and privatisation of services. The country has experienced sustained low-inflationary growth throughout the period. In response, Uganda was the first country to benefit from the Highly Indebted Poor Countries Initiative with debt relief from creditors equivalent to US$350 million in net present value over the next 20 years. This international attention has supported the decentralisation policy discussed further below.

Nonetheless, the external debt at the time was still US$3.4 billion (1998). It is also important to highlight that economic advances in the country have led to gains in per capita income, but regional disparities as well as urban-rural disparities have remained high throughout the period of growth (UN, 1999: 5).

At least one of the major factors in regional disparities has been continued insecurity in the north and west, in as many as 12 of the Uganda’s 45 districts. The insecurity stems from the actions of the Lords Resistance Army (LRA) in the north, intricately entwined in the 18-year civil war in neighbouring Sudan, as well as conflict in the west more directly associated with the war in the Democratic Republic of Congo (DRC). The CP was initiated in a more optimistic “post-war” period (UNICEF Uganda and GoU, 1994). In relative terms, a phenomenal improvement in security had been achieved. However, the trends in regional political-military alliances situate both of these conflicts firmly in a much wider arena, in which Uganda is but one player. The pressures of these cross-border conflicts have heightened throughout this period. The uncertainty of the regional picture around these conflicts ensures that insecurity will remain an issue of concern in the next CP cycle.
The affects of these conflicts have been dramatic, with displaced populations and refugee populations estimated at 530,000 and 190,000 respectively in 1999 (UNICEF, 119a: 5), the refugee population coming from Sudan, Rwanda and DRC. Half of the displaced population has been concentrated in two districts in the north alone (Kitgum and Gulu), with figures around 300-350,000 from at least 1997 (UNICEF Uganda, 1997b: 7; UNICEF, 1998b). Another one-third of the displaced population is concentrated in three districts in the west and north-west (Bundibugyo, Kasese and Masindi). The situation in the west has worsened since 1997. In addition, the problem of children abducted primarily by the LRA has persisted throughout the period with the total number estimated at 10,000 based on the recording systems established at district level. Children have also been reported abducted in the west.

This instability is likely to have myriad effects on communities and families, beyond the loss of immediate material and financial resources. This is likely to include: erosion of kinship and community support systems; specifically erosion of values around caring for the more vulnerable including children and women; a disempowering of organisations at decentralised levels including their loss of credibility as important actors in the community and the undermining of the structures and mechanisms they provide for realising community level actions. At the same, the instability is likely to increase demand on the scarce resources of local government and civil society organisations (CSOs), all of which has the potential to contribute to tense relations between displaced and host populations.

Finally, the conflict undoubtedly places demands on central level resources. In the CP Mid-term Review, government shifting of resources to defence was reported to be one of the factors undercutting counterpart resources committed to the CP (UNICEF UGANDA, 1997B: 21).

In addition to the conflict-related humanitarian crises, there have also been periods of environmental crisis, with severe flooding and associated cholera outbreak in 1998; landslides in Mbale and Bundibugyo in 1998 and earthquakes in Kabarole districts.
recognised the broad, complex nature of poverty, setting national standards for basic services and providing for public spending at both national and sub-national levels.\(^9\)

The government has also taken up the international push for the 20/20 Initiative, a compact between developing and industrialised countries calling for an investment of 20 percent of developing countries’ budgets and 20% of Official Development Assistance to basic social services. Uganda stands out among all participating developing countries as having made the most progress in ensuring a greater % of the population have access to health care, primary education and safer water and sanitation.

In 1998/99 GoU will allocate 15% of total government expenditure to primary education (UNICEF Uganda, 1998b:53).

There has also been the shift towards Sector-Wide Approaches to Programming (SWAPS) and Sector Investment Programmes (SIPS), with the GoU developing SIPs in health, education (1998), agriculture and roads. This has provided structure for coordination within sectors, including potentially on CB strategies. However, it is reportedly not clear how these frameworks take into consideration bottom-up processes of planning or decentralisation discussed further below (UN, 1999:4).

The Ugandan Government was active in discussing CB prior to the 1995-2000 CP, and had prepared a National Capacity Building Plan in 1994 with the support of the World Bank. This was not a detailed blue print remaining at a very broad level of analysis without the focus on more specific goals. However, it demonstrated the interest and opening for discussion around more coherent approaches to CB in relation to more specific goals.

The period 1995-2000 has been characterised by commitment to national process of decentralisation. Through the 1995 Constitution and the Local Government Act of 1997, the GoU defined a decentralisation policy that emphasises devolution of political, administrative and financial powers to districts and lower local government administrative structures. This thrust has also been associated with “improved governance” and democratisation (DFID, October 1999; UNICEF UGANDA, 1997B:5).

Under the decentralisation process, implementation was phased with a few districts taken on each year as shown in Table 2 below.

Source: Decentralisation Secretariat, 1999

Administrative structures headed by the Chief Administrative Officers (CAO) were empowered to implement and plan local services provision. Resources are programmed at the national level and delivered in the form of conditional grants to Local governments. However, the Local Government Act, providing many of the specifications on this process, did not come into effect until 1997. The Development Budget, a key to the implementation of decentralisation was planned to be devolved with effect from the 1999/2000 fiscal year (UN, 1999: 4). The general perception remains to date that there is not a very strong awareness, understanding and utilisation of the decentralisation laws and policies at decentralised levels (UN, 1999:2)

In the context of these broader shifts in national planning and decentralisation, an effort has been made to change the culture of planning and management. National and local governments

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\(9\) UNICEF acted as secretariat to two task forces (community participation and education) and spearheaded a broad coalition of groups in advocating for the development of National minimum standards in health education. (UNICEF Uganda, 1997b: 44)
have progressively introduced the tools and techniques of results oriented management, value for money accounting, action planning, programme budgeting and objective performance appraisal (UN, 1999:4).

In addition, at the national level more recently at least there have been very clear efforts to address the issue of corruption. Work has been advanced on legislation to encourage politicians to disclose their assets and income. A 1998 “Integrity survey” in 45 districts again demonstrated efforts for increases in transparency/accountability (KI-N10). However, in a 1999 study in Apac district, communities expressed great concern over corruption in society in general, in the judiciary, in police and the army, as well as the civil service (Apac DLC et al., 1999: 39). In data collection for this Assessment, concern over transparency and the need to strengthen transparency in the future were consistently voiced by interviewees at more decentralised levels (See Appendices E and G) as well as in at few national level interviews.

2.2.2 Institutional norms vis-à-vis child rights

Even entering into the 1995-2000 period, there was both the Uganda National Plan of Action for Children (UNPAC), 1992/93, and the 1995 Constitution, establishing significant opportunities for the promotion and protection of children’s and women’s rights. Both the Constitution and the Children’s Statute which followed in 1996 (coming into effect in 1997) were drafted with the Convention on the Rights of the Child as a core reference to ensure compatibility. The Constitution makes a strong statement for women’s representation in local government as well as for a number of children’s rights issues, including the right to basic education.

During the course of the CP, additional formal norms were established furthering opportunities for the realisations of child rights and women’s rights. These pieces of legislation, formal commitment and public reports as listed in Box 1 must be seen both as the product of UNICEF’s advocacy work alongside numerous national and international partners, critical contributions to CB. They also represent the evolving environment for other CB activities throughout the period.

In reviewing the GoU report, the Committee on the Rights of the Child commended the high priority given to a number of the issues affecting child rights touched on in Box 2. The Committee did note that there were a number of areas where formal legislation, policy and measures in Uganda remained a subject of concern (UN, 1997: 2-7) either as incompatible with the Convention or inadequate:

- the incompatible definitions of the “child”, “youthful offender” and “minor” in a range of legislation on schooling, marriage/divorce and juvenile justice;
- the measures for holding children in detention;
- the measures to ensure non-discrimination and fulfilment of rights of “girls, orphans, children with disabilities, abandoned children, children born out of wedlock, children from single-parent families, children living and working on the street, and children victims of abuse and/or economic or sexual exploitation”;
- the measures to prevent abuse, including sexual abuse of children;
- the legislation to protect against economic exploitation of children;
- the reintegration of child victims of war.

The 1997 report of the Committee also highlighted the persisting constraint of cultural norms, practices and attitudes, particularly in relation to a number of key child rights issues: the implementation of the principles of the best interests of the child, respect of views of children, and child rights to participate; the protection against discrimination towards girls, children with disabilities and children living in rural areas. A 1999 qualitative study in four parishes in Apac district does seem to confirm a tension around peoples understanding of the child rights, children’s best interests and the need to respect their views (Apac DLC et al., 1999: 37-38).
Box 1: Formal institutional norms in relation to child rights

2.3 The stakeholder environment

Within the above institutional context, a wide range of actors are or have been mobilised in favour of child rights. Again, the creation of some of the networks bringing to different actors around child rights has been part of the work of the CP. At the same time, this evolving stakeholder environment has been a key factor in the realisation of other CB interventions.

The evolution of the stakeholder environment appears to be driven by at least three significant changes: the strong emergence of CSOs, the shift in roles under decentralisation and changes in social patterns at community level.

Throughout the period of the CP, accompanying the process of decentralisation, there has been a proliferation of CSOs — NGOs and community-based organisations (CBOs) (UNICEF Uganda, 1997b: 5). In 1998, a number of these groups came together in the NGO Forum, though this entity has yet to be legally recognised by the government. These civil society actors have increasingly become involved in planning and implementation of social sector programmes, as well as in CB strategies (UN, 1999). This broader involvement of actors in the decentralised planning process has been supported also by the increasing number of "organisations, institutions and agencies with a vested interest in community based development" (Namirembe-Bitamaze et al., 1997:2).

At the same time, the decentralisation and restructuring process has also redefined the roles of government bodies at national and decentralised levels. Politicians and civil servants at decentralised levels have themselves become key actors in defining priorities and realising actions. Decentralisation has even made provision of one elected official in charge of children's affairs at district and lower levels. However, it is recognised that the
attitudes and values supporting these roles, and particularly supporting the new relationship between levels, has yet to fully take hold (UN, 1999: 6). Significant conflicting interests appear to exist between politicians and civil servants at decentralised levels, undermining common interests around development or human rights issues.

At community level, it appears that shifts in family structures and patterns of socialisation have very much reduced the community's role in educating and caring for children, leaving this role to the smaller family unit (see Appendix: Workshop synthesis) and/or peers (Apac DLC et al., 1999: 37-38).

Amidst these broad shifts in the stakeholder environment, there are certainly a number of strong coalitions or networks that have formed around specific issues either representing opportunities for or directly supportive of children's and women's rights.

At the general level of GoU-donor coordination there is the Donor Social Sector Sub-Group, co-chaired by USAID and UNICEF, which brings together over 35 bilateral, UN agencies and NGOs, as well as the Ministries of Local Government (MoLG), Public Service and Planning and Economic Development (MPED). It has been possible in this forum to promote greater harmonisation of donor policies and interaction with districts. Achievements thus far include agreement on four categories of allowances (including when, who and how much to pay); principles for interaction with districts; and guidelines for the application of these principles (UNICEF Uganda, 1997b: 44).

Similarly around the Poverty Eradication Action Plan (PEAP) process, in 1996, a wide range of actors were involved including the World Bank, UNDP, UNFPA, WHO and UNICEF along with bilateral organisations (Denmark, Netherlands, Norway, Sweden, the UK and the US) and NGOs (Oxfam, SCF-UK) (UNICEF Uganda, 1997b: 44).

In terms of support to decentralisation and district planning, a smaller group of organisations involved including DANIDA, UNCDF, UNICEF and the World Bank meet informally (UNICEF Uganda, 1997b: 44). Since 1998, the MOLG Donor Coordination Unit was established to coordinate donor support to districts.

Both the World Bank and UNDP are both specifically interested in capacity building through broad institutional and systems approaches which necessarily call for wider coordination and collaboration. It was said in one interview for this Assessment that currently "everybody (every department of government) is taking part in CB" (KI-N2).

Broadly supportive of child rights in general, there are of course the CP partners including the traditional government bodies such as the Ministry of Health (MoH), the Ministry of Education (MoE), the Directorate of Water Development under the Ministry of Water, Lands and Environment, the Ministry of Justice, the Ministry of Disaster Preparedness and Refugees, Presidents Office, the Ministry of Gender and Community Development (MGCD), as well as the newly formed National Council of Children. In the context of decentralisation CP partners have also included the MoLG and MPED. Outside the negotiating partners in the CP, a wide range of international and national NGOs remain active allies around key issues and implementation. International NGOs include Save the Children (SCF-UK), Red Barna, Red Barnet. National NGOs include the Uganda Child Rights NGO Network (UCRNN), Uganda Association of Women Lawyers (FIDA), FOCA, the Forum for African Women Educationalists (FAWE) Hope After Rape (HAR), Feed the Children, Straight Talk Foundation, etc. At local levels, there are reported Child Rights Clubs in many schools. Finally, the local and international media appear to be part of this network and are sensitised to child rights issues.

In the health sector, the MoH coordinates a sectoral forum with donors. Particularly in the development of the Health SIP, UNICEF, World Bank and WHO collaborated effectively with the MoH. UNFPA, WHO and a wide range of NGOs collaborated in the national steering committee that provides guidelines and sets standards for the services provided to adolescents. (UNICEF Uganda, 1997b: 44). A UNAIDS Theme Group has been formed, for which UNICEF is currently the chair. Similarly, in the education sector with
the MoE leading coordination initiatives.

There are a number of groups working together around impact of armed conflict on children in Uganda, especially children abducted by rebel forces. UNICEF has been involved with different groups on three levels: “advocacy on the extent of the problem and its resolution (with the Save the Children Alliance, World Vision, Amnesty International, HURINET); assistance to gathering data on the numbers and status of missing children (through Local Councils, church leaders); and psychosocial counselling to children escaping abduction (with World Vision, Red Barnet and AVSI).” (UNICEF Uganda, 1997b: 44)

Finally in the area of WES, a national task force was established on sanitation to build national and district support for improved sanitation at all levels. The task force is comprised of three line ministries as well as over 20 other UN agencies, bilateral aid organisations and NGOs. WHO is the key UN partner in this effort. DANIDA and Sida are also actively involved. (UNICEF Uganda, 1997b: 44)

2.4 Evolving capacity under the policy and practice of decentralisation

The institutional and stakeholder context above details a number of factors which strongly influenced capacity in Uganda as well as the CB efforts of the CP. It was also important to examine the overall trends in capacity at decentralised levels. Where capacity or constraints to capacity have changed over the course of the CP, it was impossible to measure to what degree the CB strategy of the GoU-UNICEF CP contributed to that change. However, by tracing out this evolution, it was possible to situate the GoU-UNICEF CB efforts in context.

Under the decentralisation process, national level bodies were primarily tasked with supervision, setting standards and monitoring performance (Nzabanita, Amos et al., and 1997:8), and the powers and functions for districts expanded as illustrated in Box 2 below:

### Box 2: Functions of districts

*Source: Local Government Act 1997

<table>
<thead>
<tr>
<th>Functions targeted by GoU-UNICEF CP</th>
</tr>
</thead>
<tbody>
<tr>
<td>- Primary and secondary education*</td>
</tr>
<tr>
<td>- Hospitals</td>
</tr>
<tr>
<td>- Health Centres*</td>
</tr>
<tr>
<td>- Control of communicable diseases*</td>
</tr>
<tr>
<td>- Road construction, rehabilitation, maintenance</td>
</tr>
<tr>
<td>- Agricultural extension</td>
</tr>
<tr>
<td>- District planning*</td>
</tr>
<tr>
<td>- Land surveying</td>
</tr>
<tr>
<td>- Land administration</td>
</tr>
<tr>
<td>- Physical planning</td>
</tr>
<tr>
<td>- Forest and wetlands</td>
</tr>
<tr>
<td>- Street children and orphans*</td>
</tr>
<tr>
<td>- Community development*</td>
</tr>
<tr>
<td>- Trade licences</td>
</tr>
<tr>
<td>- Licensing of produce buying</td>
</tr>
<tr>
<td>- District information services*</td>
</tr>
<tr>
<td>- Social welfare and development*</td>
</tr>
</tbody>
</table>

Naturally, the differentiation of roles and responsibilities has been an evolving process, particularly with key legislation and guidance coming out with over the course of the CP: the Local Government Act came into effect in 1997; the Local Government Development Programme - Phase I is just starting now. A number of the critical cross-cutting functions for any of the sector or issue responsibilities have been particularly under scrutiny.

Among the key roles in the decentralisation process is the coordination role. This is particularly true considering the high-level donor support in general and directly at decentralised levels. The coordination role is one which has been and continues to be widely seen as weak, both at national levels and at decentralised levels (See Appendices E, G). Advances have been made however, with the creation of the Donor Coordination Office in the MoLG in 1998. A 1999 study still underlined the absence of a Central Planning Authority (UN, 1999: 6) as an issue in coordination.

Key Informants repeatedly cited the planning function as weak. Various sources discussed in more detail in the following sections indicate generally that District Planning Units were extremely weak, and while progress has been made, more is required. It is still considered that planning capacity at the centre and local levels
was constrained by weak planning culture, limited resources to transform plans into actions, lack of standards on service delivery, low retention of qualified staff, and low civil society participation (UN, 1999: 6). At least one-third of Districts are still without having prepared a District Development Plan (UN, 1999:4).

Particularly at decentralised levels, the leadership role has been a constraint. This includes formal leadership of local councils and politicians, but also informal opinion leaders. In a qualitative study in one district, a range of issues were identified in relation to leadership. To some extent these issues reflected cultural/attitudinal constraints in terms of transparency, sense of responsibility to a constituency, a culture of communication and participatory approaches. However, other issues related to more concrete resource issues such as mobility to extend the presence of the leaders at district, sub-county and parish levels (Apac DLC et al., 1999: 12, 14-15).

Related to the above, districts were also repeatedly noted in all sectors as having limited human or financial capacity to provide sufficient follow-up support up at sub-district level (i.e., within sub-counties and parishes) (AIDTS, 1997b:17-18; KI-N6). Further, it was noted in a thematic evaluation at the time of the MTR that support offered to extension workers by external agencies has been erratic and poorly coordinated (AIDTS, 1997b). Yet supervision and follow-up at decentralised levels was highlighted as critical in advancing decentralisation (UNICEF Uganda, 1997b: 26). The interviews conducted at decentralised levels for this Assessment suggest that this is still the case.

In terms of whether the right actors are involved in various key functions, a number of constraints have been noted. To some extent the organisational structures defined in the process of decentralisation go some ways to ensuring stronger participation by local populations in decision-making. For example, by 1999, women were reported having 33 percent representation of women on Local Councils. However, the same source noted the cultural/attitudinal constraints in ensuring full and meaningful participation by women (UN,1999: 4). Limitations were also noted in special interest groups actually getting budget allocation (UN, 1999: 5) suggesting that corrective processes must target the mainstream. Similarly, the absence of a culture and process for participatory planning was noted early in the CP, and continues to be apparent (UNICEF, 1998b; UN, 1999:5).

Constraints have also been noted in a number of sources in the relations between political and technical (Apac DLC et al., 1999; KI-N3, KI-N11; Nzabanita, Amos et al., 1997), as well as central and local government actors (UN, 199: 6).

At the same time, a number of references have been made to increased involvement of formal and informal leaders — church, political leadership, LCV, etc — at the very least in sensitisation efforts (See Appendices E, G).

The most frequently documented constraint to all of these functions at the district level and below, has been the limited resources at decentralised levels. A number of studies around the time of the Mid-Term Review detailed the situation.

There were numerous problems in decentralisation of resources. A 1996 study indicated that only a third of the resources intended for the provision of services such as health care and education actually reach the service level (Economic Policy Research Centre, 1996). Government Treasury was reported initially at least to be slow to comply with the mandatory transfer of equalisation grants. (Okullo-EPAK, 1996).

More complicated still, most of resources decentralised have been until now in the form of conditional grants linked to salaries or earmarked for specific national programmes, leaving very little for development activities in response to bottom-up planning processes (Nzabanita, Amos et al., 1997:15). Decentralisation of the recurrent budget has just now been essentially completed and decentralisation of the development budget initiated in 1999/2000. The constraint of conditional grants appears to be a continued concern. Economic and infrastructure development not matched by strengthening of capacity of individuals/staff and institutions/organisations (UN,1999: 5). Further, while certain social sectors supported by national programmes appeared to have benefit from
conditional grants, in particular Universal Primary Education, health services, particularly primary health care services, reportedly suffered.

Table 3:

<table>
<thead>
<tr>
<th>Year</th>
<th>Percentage Increase</th>
</tr>
</thead>
<tbody>
<tr>
<td>1995-1997</td>
<td>50%</td>
</tr>
<tr>
<td>1996-1998</td>
<td>16%</td>
</tr>
<tr>
<td>1997-1998</td>
<td>43%</td>
</tr>
<tr>
<td>1998-1999</td>
<td>13%</td>
</tr>
</tbody>
</table>

Source: UN, 1999:14

Resource constraints were also associated with difficulties in raising taxes. Initially at least most local governments reportedly failed to collect more than 50% of projected revenues (Ekullo EPAK A3, 1996). District level politicians were seen to be hesitant to collect taxes around election times (Asingwiire N. and Muhangi D., 1997). Similarly, studies made reference to the continued expectations for external funding (Asingwiire N. and Muhangi D., 1997; Apac DLG et al., 1999; UN, 1999: 6). Where credibility of local government is questioned, unwillingness to pay taxes is also of course mentioned (Apac DLC et al., 1999: 42 ). It was reported by at least one key informant for this Assessment that tax revenues at local levels have increased (KI-N3).

Resource constraints have also of course been linked to cultural/attitudinal factors — corruption, poor adherence to financial regulations — and knowledge/skills of human resources — poor prioritisation, inadequate budget skills, lack of experience (UN, 1999: 6; Nzabanita, Amos et al., 1997).

Finally a very critical resource which was lacking at district-level, undermining all decentralised functions, was information, specifically district level data on which to plan. A number of the CP initiatives sought to address this, but this has persisted as problem (UN, 1999:5).

The situation of limited resources in turn played a significant role in undermining the incentives for district level work. In 1997, the retrenchment of the civil service was seen to negatively affect the quality as well as the scope of coverage of basic health and social services, with low salaries among remaining staff affecting morale (UNICEF Uganda, 1997b:21). Incentives and motivation were reported as a constraint in interviews carried out for this Assessment, particularly at sub-district levels (See Appendix E).

At the same time the mechanisms and the attitudes, values and culture of decentralised and more democratic decision-making needed to be developed. The MTR and even recent annual programme reviews have highlighted the need to cultivate the attitudes and values which can support participatory planning techniques (UNICEF Uganda, 1997b: 29; UNICEF, 1998b: 54). A recent qualitative study in Apac noted that in most areas studies (4 parishes) village council meetings were rare and in some cases dated back to the 1996 elections three years before. Further where meetings were held, documentation of decisions was weak or did not happen. Finally, it was noted that “local council executives usually hold meetings and make decisions on matters that may require village, parish or sub-county council meetings” (Apac DLC et al., 1999: 42 ).

This rough overview of factors influencing capacity cannot illustrate degrees of improvement or change in factors influencing capacity. Clearly, many of the issues require long-term efforts to bring about sizeable change. The following sections examine more closely the appropriateness and relevance of the CB strategy of the GoU-UNICEF CP, and focusing more specifically on selected interventions, examine the effectiveness of CB efforts.
Appropriateness of the CB strategy

Neither the MPO nor other subsequent documentation presents an explicit conceptual framework situating the CB strategy. As mentioned in the introduction, this was not to be expected. Yet much of what is understood as capacity and capacity building today is reflected in less explicit terms in the programme design. There are also certain challenges and areas in which the design could be strengthened.

3.1.1 Focus on functions and capacities in relation to substantive goal

The premise of the Framework proposed in section 1.3 is that a CB strategy requires clarity on which functions or capacities are to be strengthened in relation to a specific goal; for example, in relation to child health goals. At a very general level, the CP design does make a very clear focus on a generic pivotal set of functions related to “Triple “A”” — assessment, analysis and action.

However, the focus on specific functions and or capacities is not helped by the way in which the three-dimensional programme framework was defined. The framework makes mention of numerous functions or capacities, but does not separate them conceptually from the actors to be involved, or the constraints to be addressed. The components in the framework are a mix of levels of entry points/actors (e.g. community, service delivery providers), and specific functions that should involve actors at various levels (e.g. resource mobilisation, policy development). In addition, the cross-cutting dimensions also touch on key functions: information management, communications, as well as two facets of situation analysis functions, environmental analysis and gender analysis.10

Nonetheless, with the above serving as a reference for the design, each of the four programmes more or less explicitly seems to target various key functions at different levels of society. These are summarised in Table 4, though programme staff’s own definition of the programme models does not always identify these functions as clearly as listed in the table. (See Programme Models Appendix D.)

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10 This conceptual confusion is also suggested by the annual reporting on the CP. Reports follow the structure of programmes, components and cross cutting skills, yielding often repetitive reporting results under each heading, without a coherent picture of how these results come together around changed capacities and subsequently changed performance and outcomes.
In the programme models, the three sectoral or multi-sectoral programmes do appear to make the logical links between supporting functions at national, sub-national and community levels, eventually contributing to programme goals or objectives in terms of children's and women’s rights. This linkage is more forced in the CCA programme which has few interventions at community level, and makes a jump in logic between support to community level management and the ultimate objective of reduced malnutrition. This may stem from the awkwardness in formulating a cross-cutting programme, of which the CCA was a first for the CO. (This is discussed further in section 3.2.4 below.)

3.1.2 Which actors were involved in targeted functions

Beyond identifying key functions, it was also crucial that a CB strategy consider who should be involved in each function, targeting specific actors in relation to well-defined roles.

The Uganda CP makes a very clear reference to the involvement of a wide range of “partners”. In the very formulation of the cross-cutting components, there is an emphasis on the respective roles of families and communities, service providers, facilitators, managers, key decision-makers involved in resource mobilisation and management (sectoral and non-sectoral planners) and central level policy-makers. Both the CP programme structure and the sector programme structures were designed to target the political (Resistance Council/Local Council system) and technical arms of government as well as the civil society sector (NGO, CBO) and donors. Much more detailed identification of actors is provided in the Programme Models in Appendix D. However, following the CP framework, these different actors are identified in relation to the four components, effectively in relation to the different levels of intervention. This also reflects the principle clearly recognised by the CP design to use existing structures.

There appears to be a lack of clarity around different types of partnerships, whether they be purely operational, involve CB efforts or involve indirect relationships.

At a very broad level, the MPO states that the capacity building strategy should serve to enhance the ability of families and communities (UNICEF...
Uganda and Government of the Republic of Uganda, 1994) to bring about change for women and children. This proposes a very significant overall orientation for the CB strategy, in which all the CB interventions at different levels — for example, with service delivery providers, facilitators, managers, and planners — are viewed in terms of how they strengthen capacity at community level. Such an orientation sets up families and communities as actors as opposed to “beneficiaries” and is consistent with the notion that populations have a right to participate in resolving problems that affect them.

While the overall orientation of the CB strategy seems clear, in the various programmes, the logical connections between entry-points in the process of reaching out to the communities and the actors whose capacity can be expected to change varies. From programme to programme, there is a significant variation in use of the term “community”. Where the WES programme targets village level (LC1), the Health programme targets parish levels (LC2) and the CCA and BECCAD programmes focus largely on district and sub-county levels (LCV and LC3). This raises the question of whose capacity can reasonably be expected to change, through what sequence of events, starting at what entry point. In practice, except WES, the programmes strive to strengthen the role of families and communities through intervention at levels several times removed, though still at decentralised levels.

Nonetheless, a number of activities are designed specifically giving attention to strengthening the role of families and communities (more often the latter) in this indirect manner. In each case, the related functions are more or less explicit. The activities, most introduced or more fully advanced in the latter half of the CP, include:

- the training of district and sub-county planners in Participatory Rural Appraisal (PRA) techniques to support their skills in involving community members in district planning processes;
- establishment and training of Parish Development Committees (PDCs) to ensure involvement of village and parish representatives in problem solving, planning, social mobilisation, management of parish level health activities.
- establishment and training of water source committees at village level (LC1) to support village level role in management;
- introduction of Community-Based Management Information Systems (CBMIS) at district level and through districts at LCI and LC1, and decentralisation of the Village Infrastructure Inventory system to LCI, both supporting information management functions.

Thus, albeit indirectly and not always explicitly, CB effort have targeted the role of communities in a number of key functions.

It is also important to note that the WES village level committees, the PDCs and the Sub-County Health Management Committees are all designed to establish the involvement of women in these organisational structures. The BECCAD programme highlighted the involvement of youth in the process of HIV/AIDS awareness raising and education. At the same time, a number of interviews conducted for this Assessment pointed to concerns that the appropriate local actors were not involved in programme activities. A few interviews pointed to the need to involve men more often in sensitisation efforts around health and water issues. A few interviews pointed to the tensions between civil servants and political actors at decentralised levels, highlighting the need to balance the involvement of both.

In terms of involving other key actors, while national NGOs and CBOs figure in the CP design at decentralised levels, there are varying reports on the actual practice in implementation. One evaluation reports that the nature of the relationship with NGOs was most often contractual and inadequate in terms of coordination and consultation (Namirembe-Bitamazire et al., 1997: 62). The MTR report highlights the involvement of NGOs and CBOs in district and sub-county planning exercises and the inclusion of NGO activities in district work plans. However, field data collection in the course of this Assessment does not in fact suggest very high levels of coordination with NGOs and CBOs, with problems in coordination being one of the

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11 Three at district level and one at national level
12 Two at district level and two at national level
frequently cited constraints. This suggests a lack of clarity in terms of how NGOs and CBOs were to be involved and in what role.

The CP design is also notably weak for the absence of specific references to possible linkages to other international actors - UN organisations, bilateral agencies, and international NGOs — who are active at decentralised levels. These actors are identified in general as stakeholders at the level of each programme, and in specific in relation to the interventions designed to support policy intervention. In practice, UNICEF and GoU have enjoyed active and fruitful coalitions at national levels, as illustrated in the description of policy developments favouring children and women in section 2. However, the same international bodies are not identified as key actors in interventions targeting district, sub-county, parish or village. Yet they are very much active at these levels. The significant exception to this appears to be the WES programme, where GoU, UNICEF and other key international actors (DANIDA and UNDP) coordinated a geographic division of labour, reducing therefore overlap at district levels.

### 3.1.3 Key constraints / weaknesses

A good CB strategy requires that, in relation to each of the targeted functions mentioned above, the programme clearly addresses specific constraints or weaknesses. Further it is important that the constraints or weaknesses addressed be 'actionable' and pivotal in terms of releasing capacity.

In reviewing the programme models developed with programme managers (Appendix D) based on the type of interventions described, the categorisation in Table 5 can be derived, comparing types of immediate constraints to capacity which are addressed (called "gaps targeted" in the table). The shaded sections represent factors that generally influence capacity at broader systemic levels, reaching beyond individuals.

<table>
<thead>
<tr>
<th>Gaps targeted</th>
<th>WES</th>
<th>Health</th>
<th>BECCAD</th>
<th>CCA</th>
</tr>
</thead>
<tbody>
<tr>
<td>Attitudes (individual)</td>
<td>6</td>
<td>2</td>
<td>7</td>
<td>18</td>
</tr>
<tr>
<td>Skills/knowledge (individual)</td>
<td>13</td>
<td>10</td>
<td>17</td>
<td></td>
</tr>
<tr>
<td>Resources — material</td>
<td>1</td>
<td>4</td>
<td>4</td>
<td></td>
</tr>
<tr>
<td>Organisational structures</td>
<td>4</td>
<td>1</td>
<td>4</td>
<td>1</td>
</tr>
<tr>
<td>Skills (systemic, institutional)</td>
<td>6</td>
<td>6</td>
<td>2</td>
<td></td>
</tr>
<tr>
<td>Networks/coordination mechanism</td>
<td>1</td>
<td>1</td>
<td>2</td>
<td></td>
</tr>
<tr>
<td>Training</td>
<td>7</td>
<td>2</td>
<td>2</td>
<td></td>
</tr>
<tr>
<td>Information monitoring system</td>
<td>9</td>
<td>2</td>
<td>8</td>
<td></td>
</tr>
<tr>
<td>Operational guidelines systems</td>
<td>8</td>
<td>3</td>
<td>6</td>
<td></td>
</tr>
<tr>
<td>Attitudes (mass system)</td>
<td>4</td>
<td>4</td>
<td>2</td>
<td></td>
</tr>
<tr>
<td>Policy- making</td>
<td>3</td>
<td>5</td>
<td>6</td>
<td></td>
</tr>
<tr>
<td>Other</td>
<td>11</td>
<td>10</td>
<td>10</td>
<td></td>
</tr>
</tbody>
</table>

*Attitudes and Skills/knowledge at the individual level refer to direct training/sensitisation activities which were often not separated; Skills (systemic, institutional) refers to support to supervision systems or training institutions; Attitudes (mass/system) refers to efforts to influence values through mass campaigns or broad advocacy beyond participants in an activity. Other was used for interventions that were difficult to classify.*

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13 This table represents a numerical count of types of interventions as outlined by the programme models. This in and of itself requires some interpretation. It does not weigh the different interventions, either by budgetary allocation or perceived importance by programme managers. It is in fact important to underline that some single interventions may have been considered more strategically important than others.
This table only provides a rough image of the programme interventions. However, the table does suggest that the programmes in general attempted to address a wide range of constraints to capacity, some with potential impact at the level of wider systems and longer term processes.

These interventions with potential for broad systems impact included some of the efforts to increase community involvement in key functions, such as the development of the PDC organisational structures and the introduction of decentralised information systems such as CBMIS and VII. Other systems level interventions included the introduction of content related to Integrated Management of Child Illness (IMCI) in existing training institutions and systems for supervision of health professionals. Similarly, the introduction of tools and systems to support accountability at district level through the WES and CCA programmes (not in programme models, but noted by key informants, KI-N2).

However, the table above also reveals a very strong focus on training and sensitisation directed at increasing skills/knowledge and changing attitudes and values at the level of individuals. Almost half of all interventions fell in this category. Even where these individually focused training efforts were intended to strengthen systemic functions, such as the planning function targeted by the CCA programme, the over-reliance on training and sensitisation appears very narrow.

This focus of CB efforts on one gap or factor influencing capacity — specifically skills/knowledge or awareness — can only be expected to have limited results. It is not clear however that this limitation in the design was fully recognised by programme managers. In an evaluation of training commissioned by the CPMT at the time of the MTR, the framework of analysis does examine training effects both at the level of the individuals trained and in the organisational context. However, the framework presents no clear analysis of the myriad factors which limit or favour trainees applying acquired knowledge or skills in that organisational context (see AIDTS, 1997a: 4). As compared to the capacity analysis framework in section 1.4, the programme design suggests unrealistic expectations with respect to potential impact of training on organisational performance.

By contrast, the WES and Health programme models demonstrated a wide array of activities addressing different constraints in relation to each function targeted. For example, in targeting both improved management of health resources (Health Programme) and information management functions under WES, the programme models demonstrate a range of activities targeting development of standards/guidelines, policy development, building of networks, strengthening of organisational structures.

A weakness observed in all of the programme models is the absence of a broader analysis of capacity constraints, including those constraints that may not be addressed, but must be kept in consideration. (In a logical framework approach, this analysis would be comparable to the identification of assumptions and risks.) Such detailed analysis of capacity constraints is unlikely to be feasible in the initial overall programme design. However, it should be developed as the programme evolves. In fact, as the Uganda CP evolved, numerous constraints were identified at various stages of programme implementation, as is illustrated further below in section 3.3.

Finally, it must be noted that the programme models and overall programme documentation generally reveal only the larger, long-term strategy. Existing programme documents do not necessarily provide the obvious place for detailed planning of more micro-level 'soft' strategies. Yet, this can be critical to CB. To some extent evidence of this level of strategy development can be found in annual reporting. A few smaller activities do in fact appear to contribute to the CB strategy.

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14 In some cases the analysis of programme models presents a more negative image than programme progress reports suggest. In examining programme models, working back from one specific function, categorising all the related activities, there are some cases where all the activities planned were training/sensitisation efforts; for example, efforts to strengthen planning/resource management functions at district and sub-county levels in the CCA programme, and efforts related to COPE in BECCAD programmes are uniquely or largely comprised of training/sensitisation activities. However, at least in the case of CCA programme, progress reports reveal that a wider array of activities were carried out.

15 There is the possibility to outline such smaller scale strategies in the Country Programme Management (CPMP) and Annual Management Plans (AMP) internal to UNICEF and the new programme preparation guidelines do emphasise this. However, this remains internal to UNICEF.
whether or not this was explicitly conceptualised as such. These included, for example, four activities that had the potential to build up a network of actors across decentralised levels, for coordination, planning or information sharing:

- the organisation within the WES programme of inter-district information-sharing meetings and intra-sub-county planning meetings involving various actors; and

- within the CCB approach of the Health programme, the coordination of inter-district exchanges.

- Orientation of District Local Councils

- Joint monitoring

It was not possible within the scope of this Assessment to identify and explore more systematically all of the smaller annual activities with such potential, in particular exploring how well each activity was designed to contribute to addressing identified capacity gaps.

3.1.4 Linkages/coherence in overall strategy

As mentioned above, in developing the cross-cutting “components” of the CP in each programme, there is generally a very clear articulation of the causal links between the policy environment, key functions at service delivery and community levels, and eventual substantive changes in children’s and women’s rights. This is a very important basis for a coherent CB strategy, linking interventions across different levels of intervention — national, sub-national, community, family.

There also seems to be a strong logical linkage between the various functions targeted; for example, between the central function of resource mobilisation, and related functions of planning, research, monitoring and information management. Similarly, in the health sector, strong linkages are made between family care giving, liaison between services and community, health services management.

However, despite the common framework, there are surprisingly few links across programmes. There are by contrast many opportunities.

- Planning functions are addressed in various programmes, yet the plans — health plans, BECCAD plans, and District Plans of Action for Children (DPACs) and later District Development Plans (DDPs) under the CCA programme — do not seem to be connected. It was noted in the MTR that, while efforts had substantially strengthened planning for children, “support to district planning has been fragmented, with each programme supporting separate sensitisation and training packages” with seemingly little coordination for consistency across (UNICEF Uganda, 1997b: 29). By contrast, annual reports in 1998 and 1999 do indicate links between WES programme planning at district level and the DPAC/DDP process (UNICEF, 1998a; UNICEF, 1999a).

- All of the programmes include activities designed to establish information systems at decentralised levels, yet there appears to be little effort to connect them, across levels or across sectors at any one level. The skills and information derived from CBMIS and SCS processes do not appear to feed one into the other, even at the level of cross-checking and informing discussion, which would be feasible. The CBMIS was linked to the Health Programme from 1997, but it is unclear that any systematic link was made between the WES village information inventory and CBMIS. Again, this lack of coordination among programmes in the collection of routine information was also noted in the MTR (UNICEF Uganda, 1997b 42).

- Various organisational structures are supported and in some cases established yet there seem to be few efforts to link these as a network. The effort to establish PDCs does seem to be supported by both the WES and BECCAD programmes. It is also unclear whether there are any links planned or supported between the PDCs, the WES Village Water Source Committees, the District Planning Units (DPUs) supported by the CCA Programme, or the multi-sectoral BECCAD committees.

Further, in the design of a cross-cutting programme, the links between the intermediate outputs of the CCA and sectoral programmes are not very explicit. Instead, the interventions of the sectoral programmes, particularly targeting resource mobilisation, seem
to repeat, but not connect with the main thrust of the CCA. The strongest planned linkage was between the CBMIS and Health Programme as mentioned above. Again, the lack of explicit links may be partly attributed to the difficulties in representing the design of a cross-cutting programme (i.e. a problem at the level of presentation). However, the evidence at implementation levels suggests that the cross-cutting connection was in fact weak (this is discussed more in section 4). Discussions with Programme staff attributed this to CP budget management that is managed along sector lines and potentially could support sector specific process versus cross-sectoral.

It should be stated that the linkages across programmes were to be addressed as the CP evolved through office management structures. One of the evaluations for the MTR notes the creation of component teams and cross-dimensional teams and their numerous cross-programme meetings. However, the meetings apparently stayed largely at the level of information sharing and the component and cross-dimensional focal point responsibilities were considered in general to be an unrealistic burden (Longwe, Clarke et al., 1997; KI-N-U1). Thus, while concrete activities or tasks often tend to facilitate teamwork, it seems that wide a range of possible cross-programme activities were not pursued.

Further, linkages across programmes were confounded operationally by the fact that each programme used different criteria to select districts in which to operate (Namirembe-Bitamazire et al., 1997: 26). Where a common criteria was used, programmes waited for districts to request support. While this was clearly very important to ensure commitment and ownership among local actors, it severely challenged possibilities of systematic cross-programme linkages. The analysis in section 4 suggests that this approach led to very disperse results. The development of the various programme interventions in the same district, let alone the same sub-county or parish, appears to have been more by chance. Yet this clearly seems to have been an opportunity missed: key informants both from UNICEF and other organisations note that cross-sectoral coordination is easier at district than at national levels (KI-N11, KI-N-U1).

### 3.1.5 Analysis of 4 key interventions

With regard to the four key “interventions” identified by programme managers for focus during the assessment and as having potential for the new CP, there are a number of important observations in terms of their design. Most obvious is that each of these interventions has very different logical connections to bringing about change in capacity. Two of these interventions explicitly address functions (resource allocation and MIS), one addresses the establishment of an organisational structure which in turn are linked to numerous functions, and one addresses a set of broad societal values that influence capacity.

**CCA — Resource allocation**

Resource allocation is clearly a core function in achieving any goal. In the context of scarce resources and structural adjustment policies, it is particularly critical in terms of achieving children’s and women’s rights.

The CCA programme identifies and targets a number of complementary functions related to resource allocation: planning, information collection/management and coordination. In relation to each of these functions, it appears to address primarily the issues of knowledge/skills (cost analysis, gender analysis, planning frameworks, frameworks for analysis of the situation of women and children) and attitudes (child rights, gender), often targeting political leadership at LCV level as well as civil servants.

In relation to efforts to strengthen planning, the programme design did undergo a number of significant shifts. In 1996, emphasis shifted from the development of separate plans for children (the DPACs), to a “mainstreaming” of child-related concerns in the constitutionally required district and sub-county development plans (DDPs and SCDPs) (UNICEF Uganda, 1997b: 18). Activities also entailed the development of guidelines for more systematic processes, initially for the DPAC process, later serving as a reference.  

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16 The BECCAD committees themselves were at best cross-sectoral and at worst a truncated multi-sectoral structure fitting only UNICEF programme management structure. Discussions with CO staff suggest that this approach to creating local structures to fit the CP management was recognised as problematic and later abandoned.
for the DDP process. Support was also targeted at the NCC, to strengthen its role of reviewing DDPs for inclusion of child rights concerns. This broader focus on existing mainstream planning mechanisms and processes, as opposed to the creation of parallel ones, did offer greater potential for new skills acquired in training activities to be utilised. Further, in 1998 the CCA added training in PRA approaches to introduce more participatory attitudes and techniques in the planning process. However, a number of questions still arise in terms of the likely potential impact. It would be important to analyse systematically who was trained, and how well placed they were to influence organisational culture around planning and information management processes. It appears that the programme concentrated on building technical capacity of civil servants in non-sectoral structures. Less attention appears to have been given to addressing the skills, networks or mechanisms required for more effective interaction between the civil service and the political structures, where the authority to make decisions on development priorities lies. Similarly, it is unclear that linkages between non-sectoral and sectoral processes were pushed strongly, with the exception of linkages between DDP and WES programme planning later in the course of the CP. Further, the wide range of international organisations active at District level do not appear to have been involved. Worse still, it has been suggested in key informant interviews that the same districts often received training related to planning processes from a number of other international actors (KI-N11; KI-N-U1).

It also seems that short term expectations for resource allocation were perhaps unrealistic given the limited resources available for discretionary planning and complex practices in resource allocations as was highlighted in a 1997 study (Nzabanita, Amos et. al., 1997). This should not take away from the fact that on a much longer-term basis, as more resources came through District levels, expected results could be very significant.

More positively, at district level, the CCA programme also introduced the Sentinel Community Surveillance (SCS), a survey methodology to provide information to district level decision-makers, as well as to give timely feedback to the communities involved. Skills training was provided as well as general support in the planning and implementation of a number of rounds of SCS surveys. In addition, the CBMIS model was developed and introduced. Both were intended to have an impact on decision-making/planning at their respective levels. Both methodological packages went well beyond technical designs, incorporating planning and specific techniques for the involvement of information users and the targeting of decision-making fora at various levels — districts through the SCS, and sub-counties and parishes through the CBMIS. As such, both approaches addressed much more than knowledge and skills gaps, tackling mechanisms connecting information management to planning and decision-making functions. Both systems also introduced or were based on a change of attitudes in relation to information management systems and the roles appropriately played by central and decentralised level actors. As later discussed in section 4, it is unclear whether the traditional attitudes were sufficiently addressed as a constraint.

Health Programme —
Health management committees
This intervention entails the support to and strengthening of organisational structures at various decentralised levels - PDCs at parish levels, Sub-country Health Committees (SCHC) and Health Unit Management Committees (HUMCs) at LCIII, and District Health Committees.

The entry points for CCB ranged from the district level to the village level as reflected in the key steps and activities shown in Box 3. While the SCHCs and HUMCs were structures that did exist prior to the CCB intervention, the PDCs did not exist; PDCs were intended to promote behaviour change and demand for services at the household level. Key functions of the PDC identified in the programme model also included information management/monitoring, prioritisation of needs, resource mobilisation.

The membership of the PDC was to be drawn from all the villages that form a particular Parish as well as from the Parish Executive Committee. Two people, one female and the other male from each village and 5 persons from LCII executive were to form the PDC. The PDC-recruited Community Resource Persons in turn were