

UNICEF HUMANITARIAN ACTION REPORT 2009

UGANDA

ACCELERATING LIFESAVING CHILD SURVIVAL INTERVENTIONS FOR KARAMOJA'S CHILDREN

Wearing handmade masks showing the names of childhood illnesses, a group of hearing-impaired children, affiliated with the Kangole Primary School's special education unit, made a presentation during the launch of a UNICEF-supported accelerated child survival campaign in north-eastern Uganda's Karamoja subregion, on 1 October 2008.

The children, from Namuduka Village in Moroto District, one of Karamoja's five districts, used sign language to communicate messages of solidarity to tackle preventable diseases. "Let's join hands in the struggle and unite the community in our fight to control the high death rates," they said.

Why the campaign? Simply because Karamoja is one of the worst places to be a child in Uganda. Under-five mortality in Karamoja stands at 174 deaths per 1,000 live births compared to 137 deaths for the rest of Uganda, and infant mortality stands at 105 compared to 76 nationally. At least 1 child out of 10 is acutely malnourished. Less than 4 per cent of households own the required two insecticide-treated mosquito nets needed for the effective prevention and control of malaria, and less than 6 per cent have one net, compared to the regional target of 60 per cent with at least two. The subregion is also facing a chronic situation of undernutrition which, combined with poor health indicators and a persistently high burden of disease, exacerbates the vulnerability of children.

Extremely low access to and utilization of basic health, nutrition and education services, as well as cultural factors, inadequate service-seeking behaviour, insecurity and a highly mobile pastoralist lifestyle place Karamoja significantly behind the rest of the country for meeting the health- and nutrition-related Millennium Development Goals (MDGs). Hence, the need to accelerate and expand community-based high-impact lifesaving child survival interventions, such as a campaign-style approach that brings basic indicators to acceptable levels, builds upon the gains and, in the long run, strengthens linkages with primary education and child protection services.

Throughout October, in all five Karamoja's districts (Moroto, Kotido, Nakapiripirit, Kaabong and Abim) UNICEF supported the Government of Uganda to immunize 88,000 children under age five against polio and 80,000 against measles; to administer vitamin A to 186,000 children and deworming tablets to 163,000; vaccinate 232,000 women of childbearing age (aged 15-49 years) against maternal and neonatal tetanus; distribute two mosquito nets to each household; and identify and refer for treatment all children with acute malnutrition. In addition, the campaign promoted handwashing with soap, exclusive breastfeeding and other healthy behaviours at community level. These simple and cost-effective interventions are expected to drastically improve the health and nutritional status of children in the subregion and, in the longer term, provide the foundation for the region's continued development. Emphasis was placed on the hardest-to-reach and worst performing areas.

Mobilized by UNICEF for the campaign was a network of partners, including the Ministry of Health, Ministry of Water, Lands and Environment, Ministry of Education and Sports as well as the Local Government; members of Parliament; religious and cultural leaders; civil society; and sister UN agencies (UN Population Fund, World Food Programme and World Health Organization).

"Through this campaign, we reaffirmed the right of all Ugandan children to grow up in an environment which safeguards their right to survive and thrive – a responsibility that falls squarely on the shoulders of every member of society," said UNICEF Representative in Uganda, Keith McKenzie. "The campaign also marked an effort to part the dark clouds of misunderstanding about Karamoja so that these no longer overshadow the steady progress made by Uganda towards meeting the MDGs," he added.