Uganda continues to face multiple humanitarian challenges, including disease outbreaks, meteorological disasters and refugee influxes. In 2021, the containment measures following the outbreak of the COVID-19 pandemic gravely affected the economic opportunities available. As a result, an estimated 15.7 million people will require humanitarian assistance in 2022.

UNICEF plans to reach 10.9 million people with basic health services, over 51,000 children with treatment for severe acute malnutrition (SAM), 92,000 people with access to safe water, nearly 38,000 children with mental health and psychosocial support services, and over 107,600 children with access to education. UNICEF intends to support over 173,000 people to safely report sexual exploitation and abuse (SEA).

In a tight global financial situation in 2022 due to the COVID-19 pandemic and numerous humanitarian crises around the world, UNICEF will need US$25 million to save lives and realize the rights of children, adolescents and women in Uganda.

KEY PLANNED TARGETS

- **51,015** children admitted for treatment for severe acute malnutrition
- **1.8 million** children and women accessing health care
- **3.1 million** women and children accessing gender-based violence mitigation, prevention, response
- **2.2 million** people engaged in risk communication and community engagement actions

IN NEED

- **15.7 million** people
- **8.5 million** children

TO BE REACHED

- **2.3 million** people
- **1.2 million** children

FUNDING REQUIREMENTS

- **US$ 25 million**
HUMANITARIAN SITUATION AND NEEDS

The upsurge in COVID-19 cases in March 2021, with a rapid increase in admissions and deaths, prompted the Government to resume containment measures even though the effects on the economy and access to basic services have had a negative impact on vulnerable populations.

The COVID-19 pandemic has significantly impacted the education sector, due to school closures and limited access to alternative remote learning modalities. While the phased reopening of schools enabled candidates to sit their final examinations, the second wave led to new school closures and an increase in learning losses, affecting 15 million learners. By the end of the academic year 2020 in July 2021, 7.3 million children in lower classes (Primary 1-4) had missed nearly two academic years and likely more, with no reopening in sight. The COVID-19 lockdown triggered an increase in violence against children (VAC), particularly for girls. Sexual violence was the most reported form of VAC, making up 38.3 per cent of cases, with neglect being the second highest at 35.8 per cent. Teachers have abandoned the profession, and a large share of children are unlikely to return to schools even when these eventually open. The education sector is facing an unprecedented crisis.

The effects of climate change will continue to impact Uganda in 2022. More than 223,000 people were affected by drought, floods, landslides, heavy storms and fire outbreaks between January and August 2021. An estimated 20,000 people were internally displaced due to the destruction of infrastructure and the risk of waterborne and climate-sensitive diseases. Natural hazards also exacerbate already high levels of food insecurity and malnutrition. The latest Integrated Food Security Phase Classification (IFSPC) completed in 2021 classified 30 per cent of the Karamoja population in Phase 3 (crisis) and above. About one quarter of children under 5 years of age in the Karamoja sub-region are stunted, and 1 child in 10 is wasted.

Uganda hosts 1.5 million refugees, most of whom fled Burundi, the Democratic Republic of the Congo and South Sudan due to insecurity and political instability. The Government of Uganda continues to restrict cross-border movement due to COVID-19, hence the relatively low number of registered new arrivals in the country. Due to overcrowding in urban settlements, poor access to clean water and sanitation, high prevalence of undernutrition and multiple protection risks, an estimated 4.1 million refugees and host communities will need humanitarian assistance by the end of 2022.

STORY FROM THE FIELD

Clapping in tune to the song, seven children jump around in a circle, each taking turns to swirl in the middle in response to a corresponding number. On the adjacent swings, children gently push one another’s seats, while on the monkey bars the seemingly older boys and girls propel themselves forward.

The school closed in March 2020 along with all other educational institutions in Uganda at the onset of COVID-19, but the one-acre playground at Busheka Early Childhood Development (ECD) centre is still filled with songs and sporadic peals of laughter from children aged 2 to 8.

Read more about this story here
HUMANITARIAN STRATEGY

In 2022, UNICEF will continue to work in line with the Comprehensive Refugee Response Framework, support the Grand Bargain commitments and the UNICEF Uganda Country Programme Document, which includes providing vital nutrition, health, water, sanitation and hygiene (WASH), child protection, education and social protection services to Uganda's most vulnerable. UNICEF is committed to needs-based targeting, hence the shift to prioritizing the needs of vulnerable people impacted by COVID-19 in 2022.

UNICEF will support district local governments to incorporate humanitarian preparedness and response into their mid-term and annual district plans and adopt the decentralized systems strengthening approach for programming for both development and emergency settings and strategies, in alignment with governments' COVID-19 preparedness, response plan and strategies to mitigate the impact of COVID–19. In the COVID-19 context, UNICEF will ensure support to preventive health guidelines, roll-out of Government pandemic control protocols and mechanisms, safe reopening of schools, remote learning, and procure and distribute critical WASH supplies and services to schools, communities and health facilities; and build capacity to prevent disease transmission. UNICEF’s nutrition programme will primarily focus on scaling up interventions with a focus on building systems for preventing and treating wasting and other forms of malnutrition.

To strengthen service delivery, UNICEF will focus on decentralization, scaling up preparedness planning and response, capacity building and community-based support. UNICEF will ensure that supplies reach the end-user through field teams. In high-risk communities, UNICEF will apply and scale up field monitoring to incorporate beneficiary feedback (through civil engagement mechanisms including U-Report, among others); promote accountability to affected populations (AAP) in line with the Uganda Country Office AAP strategy; build linkages between communities; ensure gender equality representing adolescent girls, women's rights and youth engagement; improve the demand for and delivery of targeted protection and basic services; and guide responsive district and sub-district planning and budgeting.

UNICEF aims at delivering integrated life-saving interventions to affected populations, including risk communication and community engagement (RCCE), infection prevention and control (IPC) and the prevention of and protection from sexual exploitation and abuse (SEA) and the accountability to affected populations (AAP). UNICEF will also provide case management and continuity of essential health and HIV services, immunization, child protection and community-based psychosocial support, including referrals to specialized mental health services, education, and HIV/AIDS services.

UNICEF will mainstream gender-based violence, including risk mitigation measures and gender sensitivity, and apply a conflict sensitivity lens to all UNICEF programmes.

Progress against the latest programme targets is available in the humanitarian situation reports: https://www.unicef.org/appeals/uganda/situation-reports

This appeal is aligned with the revised Core Commitments for Children in Humanitarian Action, which are based on global standards and norms for humanitarian action.

2022 PROGRAMME TARGETS

**Nutrition**
- 51,015 children aged 6 to 59 months with severe acute malnutrition admitted for treatment
- 1,301,264 primary caregivers of children aged 0 to 23 months receiving infant and young child feeding counselling

**Health and HIV and AIDS**
- 1,804,350 children and women accessing primary health care in UNICEF-supported facilities
- 101,985 children under one year vaccinated against polio

**Water, sanitation and hygiene**
- 125,000 people accessing a sufficient quantity of safe water for drinking and domestic needs
- 35,000 people use safe and appropriate sanitation facilities
- 280,000 people reached with critical water, sanitation and hygiene supplies (including hygiene items) and services

**Child protection, GBViE and PSEA**
- 37,872 children and parents/caregivers accessing mental health and psychosocial support
- 3,133,121 women, girls and boys accessing gender-based violence risk mitigation, prevention and/or response interventions
- 173,166 people who have access to a safe and accessible channel to report sexual exploitation and abuse by aid workers
- 1,838 unaccompanied and separated children accessing family-based care or a suitable alternative

**Education**
- 93,103 children accessing formal or non-formal primary or secondary education
- 14,436 children accessing formal or non-formal education, including early learning

**Cross-sectoral (HCT, C4D, RCCE and AAP)**
- 10,983,000 people reached through messaging on prevention and access to services
- 2,196,600 people engaged in risk communication and community engagement actions
- 7,688,100 people with access to established accountability mechanisms
FUNDING REQUIREMENTS IN 2022

UNICEF requires US$25 million to realize the rights of children, adolescents and women affected by the refugee influxes, COVID-19 pandemic, communicable disease outbreaks and climate-related shocks in Uganda in 2022. This requirement is in line with the revised 2021 UNICEF COVID-19 Response Plan, which includes US$13 million to respond to the needs. The additional US$12 million covers funding needs related to the refugee response (US$5 million) and mitigation and management of non-COVID-19-related crises (US$3.5 million), including disease outbreaks and meteorological disasters (US$3.5 million). As sexual violence was the most reported form of violence against children (VAC), particularly for girls, the child protection, gender-based violence in emergencies (GBViE) and preventing sexual exploitation and abuse (PSEA) sectors will be prioritized in 2022.

UNICEF’s funding requirements have been formulated with system-strengthening objectives in mind considering the presence of other actors on ground with the capacity to cover gaps. The requirement for 2022 has decreased compared to 2021 as through partnerships and coordination mechanisms on geographic locations and convergence programming with other partners. UNICEF will support in-country logistics and capacity-strengthening along the supply chain to include storage, warehousing, pre-positioning and data management. Without sufficient funding, over 2.3 million vulnerable people will not have access to essential health, protection, education and WASH services.

Who to contact for further information:

Munir A. Safieldin  
Representative, Uganda  
T +256 417 171 010  
msafieldin@unicef.org

Manuel Fontaine  
Director, Office of Emergency Programmes (EMOPS)  
T +1 212 326 7163  
mfontaine@unicef.org

June Kunugi  
Director, Public Partnership Division (PPD)  
T +1 212 326 7118  
jkunugi@unicef.org
ENDNOTES

1. UNICEF’s public health and socioeconomic COVID-19 response, including programme targets and funding requirements, is integrated into the standalone country, multi-country and regional Humanitarian Appeals. In alignment with the Global Strategy to accelerating equitable access to COVID-19 tests, treatments and vaccines fall under the Access to COVID-19 Tools Accelerator (ACT-A) global appeal.

2. Population figures for 29 districts adapted from Uganda Bureau of Statistics (UBOS) projected population by district for 2020, adding 3.6 per cent as the projected annual population increase.

3. This figure represents the total population living in the 29 UNICEF focus districts, which will need support throughout the pandemic, including those needing safe channels to report sexual exploitation and abuse.

4. The focus districts are: Yumbe, Isingiro, Kamwenge, Kyegowga, Koboko, Madi Okollo, Terigo, Kikuube, Adjumani, Kyirandongo, Lamwo, Obongi, Kasese, Mubende, Ntungamo, Abim, Amudat, Kampala, Kaabong, Karamoja, Moroto, Nabulutak, Nakapiripirit, Napak, Kamuli, Mukono, Tororo and Wakiso. 50.8 and 49.2 per cent of the population in need are women and men, respectively. Disability is estimated at 8 per cent of the total population - 53.9 per cent children and 46.1 per cent adults.

5. Calculated on the basis of 10 per cent children under 1 year targeted for immunization, 6.5 per cent of lactating women, 6.5 per cent of pregnant and postnatal mothers and 194,315 school children targeted for education support. The adult population includes 50.9 per cent women and 49.1 per cent men; and the child population includes 49.9 per cent girls and 50.1 per cent boys, as per the recent population projections (May 2020) from UBOS, recognized by the Government of Uganda. Prevalence of disability is 8 per cent among children and 11 per cent among adults, as per the Uganda Functional Difficulties Survey, 2017. UNICEF is committed to needs-based targeting, which means covering the unmet needs of children; and will serve as the provider of last resort where it has cluster coordination responsibilities. UNICEF is committed to needs-based targeting, which means covering the unmet needs of children; and will serve as the provider of last resort where it has cluster coordination responsibilities.

6. Calculated as the sum of 6.5 per cent children under 2 years indirectly targeted for infant and young child feeding and 194,315 school children targeted for education support. All those to be reached live in UNICEF’s 29 focus districts. Of the total number of children to be reached, 49.9 per cent are girls and 50.1 per cent are boys, as per the latest population projections (May 2020) from the Uganda Bureau of Statistics, recognized by the Government of Uganda. Disaggregations by disability are currently not available. The additional and remaining needs of children will be addressed and coordinated through discussions and complementarily with other partners through platforms such as the Refugee Humanitarian Partner Group, the Education in Emergencies Group and the Inter-Agency Coordination Group.

7. Ibid.

8. Ibid.

9. Ibid. Despite the significant impact, the number of children in need of education support reduced from 8.2 million in 2021 to 7.1 million in 2022, following the partial reopening of schools.


11. Ibid; Centre for Women in Governance (CEWIGO) report on impact of the COVID-19 pandemic on the rights of women and girls in Uganda.


17. Karamoja Integrated Food Security Phase Classification Snapshot 2021. This represents 30 per cent of the total population of Karamoja who are considered at risk of food insecurity, according to the latest Integrated Food Security Phase Classification (IFSPA) completed in 2021. This includes school-aged children. The same IFSPA classified 30 per cent of the population in Karamoja (361,000 people) as experiencing high levels of food insecurity (IPC Phase 3 or above) with 10 per cent in emergency levels (Phase 4). Meteorological and natural hazards continue to impact Uganda, exacerbating food insecurity and deepening poverty and vulnerability.

18. Population figures for 29 districts adapted from the UBOS Projected population by district for 2020, adding 3.6 per cent as the projected annual population increase in Uganda.

19. 915,000 is the summation of people in need under refugee, health emergencies (non COVID-19), climatic shocks and health emergencies (COVID-19), without double counting.

20. Calculated based on the proportion that 50 per cent of all children in need of COVID-19 response are in need of a basic child response (MHPSS).

21. Children in need (CIN) of education services is calculated based on Uganda Bureau of Statistics (UBOS) national 2022 projection figures for 3-18 years, which is 45 per cent of the total population. CIN includes 100 per cent of children 3-18 years in the 29 districts of focus.

22. The indicator target is based on the number of primary caregivers reached in the last complete year before the HAC 2022 and hence also in line with the UNICEF approved target for 2022 RWP.

23. Primary health care includes prenatal delivery and postnatal care, essential newborn care, immunization, treatment of childhood illnesses and HIV care.

24. UNICEF’s target is 50 per cent of the resulting 23 per cent of PIN for the following priorities: pregnant women account for 6.5 per cent of PIN; 24 per cent of the pregnant women population are teenage girls, lactating women are 6.5 per cent of PIN; and an additional 10 per cent of PIN which covers the WASH target, and 107,568 target for school-going children.

25. This target considers 6.5 per cent of population in need in the 29 focus districts as the population of children under 1 year and 100 per cent of children eligible for polio vaccination as per UBOS projections 2022. UNICEF will reach 10 per cent of that population while others are targeted by other partners including UNHCR, other implementing partners and CBOs.


27. Due to space constraints, the following acronyms appear in the appeal: GBViE (Gender-based violence in emergencies); PSEA (Prevention of sexual exploitation and abuse). Despite the significant impact, the number of children in need of education support reduced from 8.2 million in 2021 to 7.1 million in 2022, following the partial reopening of schools.

28. Overall, there is an increase in the child protection (CP) in the HAC request for 2022 compared to 2021, and therefore an increase in the share required for adequate prevention interventions. The significant increase in target derives from the budget increase. The larger budget requested for CP (including GBV prevention) is allowing us to plan a large nationwide media campaign through TV, radio, social media which will allow reaching a much larger target audience.

29. Reduction from 2021 is due to a realistic way of setting the target in 2022. Government partners who highly contribute to this indicator are not yet on board and now focused only on NGOs able to report.

30. The Education target was calculated based on the total number of children aged 3-18, equivalent to 45 per cent of the population (UBOS).

31. The population targeted is higher than the total number of people/children to be reached because the target includes mass media activities.

32. 2022 targets for feedback and engagement indicator increased significantly due to the expanded scope achieved in 2021; for example, feedback mechanisms established and the community resource persons/influencers mobilized and trained, respectively.

33. Figures are provisional and will be updated once the 2022 UNICEF COVID-19 Response Plan is finalized.

34. Communication for development is cross-cutting and related funding requirements constitute 10 per cent of the health and other sectoral budgets.

35. 10 per cent of Nutrition budget ($US488,496) is budgeted for C4D, community engagement and AAP.

36. The budget for health includes HIV/AIDS programming, reflecting the aggregation of child and adolescent health in 2021 rolling work plans: 10 per cent of the health budget ($US688,146) is allocated for C4D, community engagement and AAP. The decreased health budget for 2022 is due to the existing investments made in 2020. In 2021, UNICEF is targeting 50 per cent of the target and other stakeholders will cover the rest. UNICEF Uganda will coordinate activities and ensure district-specific 4W matrices are updated regularly to avoid duplication of activities or leaving out some populations. Other partners include UNHCR, WHO, INGOs and CBOs, among others.

37. 10 per cent of WASH budget ($US944,947) is budgeted for C4D, community engagement and AAP.

38. The increase in budget for CP, GBViE and PSEA for 2022 compared to 2021 is due to increased needs due to the prolonged COVID-19 pandemic. The budget for prevention of sexual exploitation and abuse programming within the child protection request equates to $US896,234. Ten (10) per cent of the budget ($US44,912) is budgeted for C4D, community engagement and AAP. The remainder is allocated to child protection activities, including approximately 15 per cent that will contribute to gender-based violence prevention and response; targeted programming for women and girls; capacity building; and engagement of women and girl-led organizations in the response.

39. 10 per cent of the Education budget ($US369,230) will be allocated to C4D, community engagement and AAP activities.