



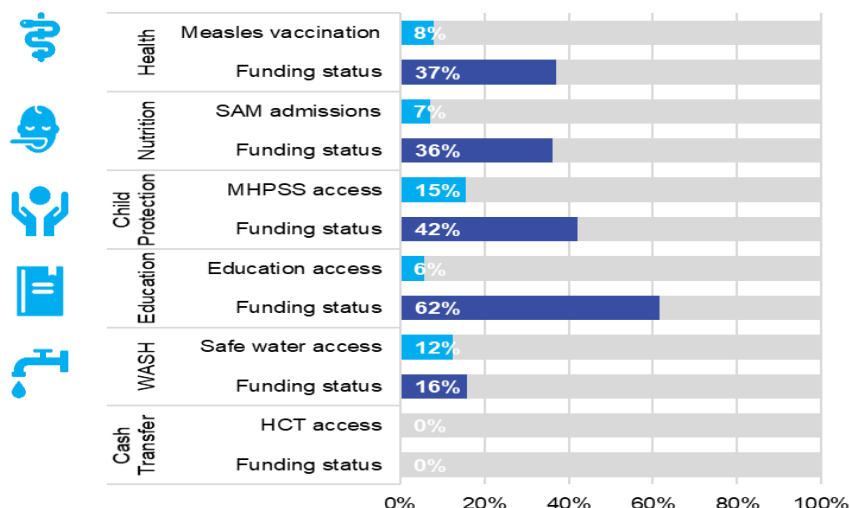
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Reporting period: January - February 2023

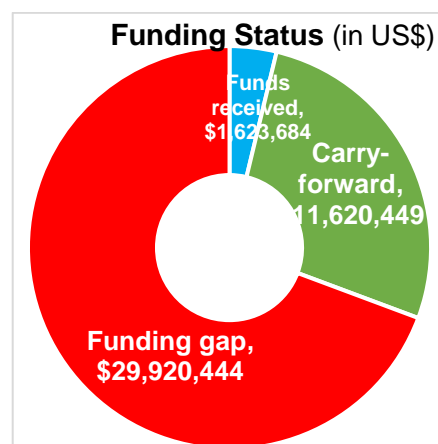
Highlights

- Building on gains made from responding and containing previous disease outbreaks, Uganda Ministry of Health (MoH) and partners remain on high alert for health emergencies and stepping up efforts towards preparedness and response.
- In January and February, UNICEF supported mass screening of children under five years for wasting reaching 59,243 children in Karamoja districts of Amudat, Kotido, Moroto, Nabilatuk, and Napak and 50,692 children in Isingiro, Kamwenge and Kyegegwa refugee hosting districts.
- Between January and February 2023, a total of 1,540 individuals were affected by disasters, of which 28 per cent were children. Of these, 279 individuals were internally displaced.
- During the reporting period, 107,080 children and women received essential health care services, including immunization and antenatal care.
- 13,738 (6,529 male, 7,209 female) children and caregivers accessed Mental Health and Psychosocial Support (MHPSS) from January to February 2023.
- 20,500 people were reached with sufficient quantity and quality of water for drinking and domestic use.
- The UNICEF HAC appeal has a funding gap of 69 per cent.

UNICEF's response and funding status*



UNICEF Appeal 2023 US\$43.2 million



*UNICEF results are attributed to both ORE funding received, as well as reprogrammed funds, regular and other

Funding overview and partnerships

In 2023, UNICEF is appealing for US\$43.2 million to sustain life-saving services for women and children in Uganda affected by multiple hazards. UNICEF has so far received US\$1.6 million from the Government of Japan and an internal allocation from the Global Humanitarian Thematic Fund (GHTF) to mitigate the impacts of climate change on food security and livelihoods in Karamoja sub-region. UNICEF also has carry-over funds from 2022 totalling US\$11.6 million¹ generously contributed by the UK Government, through the Foreign, Commonwealth, and Development Office (FCDO); the Government of Japan; the US Fund for UNICEF; the Spanish Committee for UNICEF; the German Committee for UNICEF, the United Kingdom of Great Britain and Northern Ireland, the Netherlands Committee for UNICEF; United States Agency for International Development (USAID); United Nations Office for the Coordination of Humanitarian Affairs (OCHA) - Central Emergency Response Fund (CERF) Secretariat; Global Humanitarian Thematic Fund (GHTF) and the European Community Humanitarian Office (ECHO) and the Government of Netherlands. UNICEF expresses its sincere gratitude to all donors for the contributions received. The HAC appeal still has a funding gap of US\$29.9 million or 69 per cent. If funds are available, UNICEF and partners will be able to ensure vulnerable women and children in humanitarian situations access life saving services.

Situation overview and humanitarian needs

EVD

The epidemiological situation remains the same since the declaration of the end of the Uganda Ebola Virus Disease (EVD) on 11 January 2023. The outbreak counted 142 confirmed cases reported, 55 deaths with case fatality rate of 39 per cent and 87 recoveries. During this reporting period, the Ministry of Health (MoH) conducted a joint intra-action review with partners including UNICEF across the EVD response pillars. The MoH, World Health Organisation (WHO) and partners have developed key priorities which are part of the “180 days Recovery Response Plan”, that was developed by MoH, WHO and partners and is now under implementation. UNICEF has aligned its activities to this plan.

COVID-19

By the end of February 2023, the Ministry of Health had recorded a cumulative total of 171,420 COVID-19 cases with a cumulative death of 3,632 (case fatality ratio of 2.1 per cent). A total of 55,797 doses of COVID-19 vaccines were administered bringing the cumulative administered number of doses to 26,406,936 between January and February. Cumulatively, 24 per cent of children between 12-17 years received their first dose with only six per cent receiving the second dose and 4,937,691 (76 per cent) not vaccinated at all. The MoH is still emphasizing the observance of the standard operating procedures (SoPs) and integration of COVID-19 response activities into routine programming.

Measles

Towards end of December 2022, a measles outbreak was confirmed in Kiryandongo and Palabek refugee settlements and Ocea reception centre. First case was reported in Lamwo District, which also hosts refugees. This is as a result of an ongoing Measles outbreak in South Sudan. A cumulative total of 95 cases had been confirmed from January to February 2023.

Cholera

With the confirmation of cholera outbreak in 11 African countries, UNICEF in Uganda continues to engage with the MoH and WHO to finalize the national cholera strategic costed response plan 2023-2030, while prioritizing preparedness activities in case of a national outbreak. The plan is focusing on risk communication and community engagement (RCCE), prepositioning of supplies, Infection Prevention and Control (IPC)/Water Sanitation and Hygiene (WASH) support and continuity of services.

Other Disease Outbreaks

UNICEF continues to support the MoH in planning for other public health events such as Yellow Fever in Wakiso, Buikwe, Kamuli, Kampala and Buvuma districts whose investigations are on-going; and Crimean Congo hemorrhagic fever (CCHF) in Wakiso. Tuberculosis (TB) in Elgon sub region and Karamoja with response being supported by WHO. Rift Valley Fever (RVF) alerts have been received from the districts of Kazo, Mbarara and Mbarara city and investigations by the MoH Rapid Response Team (RRT) are ongoing. Meningitis was confirmed in Palorinya refugee settlement.

Hydrometeorological hazards

According to the Office of the Prime Minister (OPM) and the International Organization for Immigration (IOM),² in 2023, three districts were reportedly hit by disasters. Floods were reported in Kampala while Kanungu was ravaged by heavy storms and wildfires in Kotido. So far, a total of 1,540 individuals were affected by disasters, of which 279 individuals were internally displaced. Some 28 per cent of the affected population are children. Over 40 houses were completely destroyed and over 10 water facilities were affected. The most pressing needs are food assistance, livelihood, nutrition, health, non food items (NFIs), among others.

¹ The carry over comprise of a combination of on-going multi-year humanitarian grants and EVD response grants that are running up to 31 March 2023.

² Uganda Multi-Hazard DRR Infographic Sheet as of January 2023.

Food insecurity in the Karamoja sub-region

In Karamoja, the lean season began in January, two months earlier than usual with an increasing number of households expected to face Crisis (IPC Phase 3) outcomes and some households will likely deteriorate to Emergency (IPC Phase 4) as the size of their food consumption gap widens. According to FEWS NET³, there are few income-earning opportunities due to protracted insecurity. The sub region has now faced three consecutive years of poor harvests, and structurally low economic activity. According to Uganda National Meteorological Authority (UNMA) seasonal rainfall outlook for March April May (MAM) period, Karamoja sub region is expecting seasonal rains around late March to early April which might give way to steady rains reaching peak levels around early to mid-May. Overall, there is a high chance of receiving near normal rainfall during the forecast period.

Refugees

As of February 2023, Uganda is home to over 1.5 million refugees and asylum-seekers, of which 58 per cent are children. Uganda has received more than 14,500 new arrivals from the beginning of 2023 with 61 per cent originating from South Sudan and 39 per cent from the Democratic Republic of the Congo. The population increase is linked directly to new arrival registration mostly in Rhino, Kampala, Palabek, and Nakivale. Of the total registered population, 1,481,827 (97.4 per cent) are refugees and 39,597 (2.6 per cent) are asylum seekers with 91 per cent residing in the settlements. South Sudan (57 per cent), the Democratic Republic of Congo (32 per cent), Somalia (4 per cent) and Burundi (3 per cent) are the top four countries of origin in Uganda of the registered population. DRC and South Sudan situations have distinct contingency plans to which all partners including UNICEF have contributed.

Summary analysis of program response

Health

During this reporting period, UNICEF continued to engage with MoH and partners, through the National Task Force (NTF) for public health emergencies, while prioritizing continued delivery of essential health services, risk communication and community engagement, IPC/WASH, follow up and support to EVD survivors. The MoH and implementing partners including UNICEF have continued to support and implement the COVID-19 stabilization response plan for Uganda and focusing on the vaccination of the missed target groups including children aged 12 to 17 years. A total of 107,080 targeted children and women received essential health care services, including immunization and antenatal care. Similarly, a total of 48,270 children under one year received measles vaccination during the routine programming and emergency response.

UNICEF supported Jinja District local government (DLG) and Jinja City health offices to analyze service data in District Health Information System II (DHIS2) to understand the gaps in continuity of essential health services as a result of EVD outbreak. The Maternal, Child Health (MCH) services were the most affected. This helped the district health team to take corrective actions. UNICEF oriented village health team members (VHTs) on continuity of essential health services (CEHS) while integrating IPC messages. UNICEF supported MoH to conduct the second round of house-to-house Novel Oral Poliomyelitis (polio) Vaccine type 2 (nOPV2) campaign⁴ in five districts of Kampala, Wakiso, Mukono, Mubende and Kassanda as they had missed due to the EVD outbreak.

In response to the Measles outbreak, UNICEF, alongside WHO, UNHCR and the International Rescue Committee (IRC) supported the MoH to carry out the Measles Rubella (MR) mass campaign in Kiryandongo district targeting 11,938 children under five years. The campaign attained a coverage of 68 per cent reaching 8,118 children with MR vaccine. With the low coverage attained, the effort is still on to identify missed children in order to utilize the available vaccine doses for the intended purpose.

Nutrition

During the reporting period, UNICEF provided support to the Ministry of Health in conducting Data Quality Audits (DQAs), coaching and mentorship of districts and health facility service providers and managers in Western and West Nile sub regions. UNICEF supported mass screening of children under five years for wasting reaching 59,243 children in Karamoja districts of Amudat, Kotido, Moroto, Nabilatuk, and Napak and 50,692 children in Isingiro, Kamwenge and Kyegegwa refugee hosting districts. 5,126 children with severe wasting were admitted for treatment.

UNICEF supported Karamoja sub region and refugee hosting districts to educate primary caregivers on appropriate infant and young child feeding (IYCF) through on job coaching and mentorship of health workers on quality nutrition service delivery⁵. A total of 30 health workers from Koboko and Yumbe districts were reached with on job coaching in Integrated Management of Acute Malnutrition (IMAM). To further strengthen Maternal Infant Young Child and Adolescent Nutrition (MIYCAN) counselling in West Nile, 205 health promoters (200 VHT members and five health assistants) were

³ Famine Early Warning Systems Network

⁴ Available data shows that the campaign reached 86,659 children (117 per cent) of targeted children in Kassanda, while 129,037 children (105 per cent) in Mubende received nOPV2.

⁵ 270 health workers in Isingiro; 318 health workers in Kikuube; 170 health workers in Kyegegwa and 30 healthworkers in Bundibugyo had first time training on Maternal Infant Young Child and Adolescent Nutrition (MIYCAN).

trained in community MIYCAN Care Group service delivery package, 40 parish chiefs were trained in community MIYCAN and 41 lead mothers/fathers on care group methodology and responsibilities.

Additionally, about 390 members of the Sub county Disaster Management Committees (SDMC) in the three districts of Kaabong, Kotido and Moroto were trained in disaster risk reduction, preparedness and response. This training is expected to strengthen the Emergency Preparedness and Response (EPR) for nutrition and put in place disaster risk management plans that include nutrition aspects. Relatedly, nine districts were supported to draft nutrition EPR plans for 2023. To improve community level nutrition service delivery, 1,020 VHTs were oriented in community MIYCAN component and quarterly meetings held with all community workers at sub county level in Kamwenge District.

Child Protection

In response to the protection needs of refugee children, those affected by the nutrition crisis and the EVD outbreak, UNICEF provided critical life-saving child protection services. To date, UNICEF and partners have reached 13,738 individuals with mental health and psychosocial services (MHPSS) (3,648 boys, 4,060 girls, 2,881 male caregivers, 3,149 female caregivers), the large majority of which were reached in the EVD recovery context. During the reporting period, 102 (44 male, 58 female) unaccompanied and/or separated children received appropriate alternative care services. To continue ensuring availability of quality MHPSS services for children, UNICEF trained and deployed 332 health and social welfare staff, including community structures on MHPSS. 957 children (527 girls, 430 boys) have benefitted from individual case management services to date. 102 children, including 11 refugee girls, 15 refugee boys and 47 girls and 29 boys in the EVD recovery context benefitted from alternative care services. Five refugee children (4 girls, 1 boy) affected by sexual violence were supported with multi-sectoral protection services.

To prevent violence and improve social norms related to children's protection in emergency contexts, UNICEF continued to work through partners, government structures and community volunteers reaching 312 children (142 boys, 170 girls) and 1,781 adults (937 female, 844 male) with social and behaviour change communication interventions. As part of UNICEF's efforts to continue strengthening the inclusion of refugee children in the national system, UNICEF continued to implement targeted interventions in Obongi refugee hosting district, including the dissemination of the National Child Policy and support for holding regular Child Wellbeing Committee (CWC) meetings inclusive of refugee actors.

GBV & PSEA

The different forms of emergencies in the country have particularly impacted women and girls, creating even an increased risk of Sexual Exploitation and Abuse (SEA) as well as Gender Based Violence (GBV). UNICEF continues to support scale-up and accountability on protection from sexual exploitation and abuse (PSEA) and GBV interventions in all of its programming as well as amplifying prevention and response at the community level. UNICEF upholds a policy of zero tolerance of SEA, while exhibiting respect for victims/survivors especially children's victims, complainants, and whistle-blowers. During this reporting period, 1,637 (800 male, 837 female) community members had their knowledge enhanced on PSEA, including access to one of UNICEF's reporting channels on SEA, and 4,509 (1,875 male, 2,634 female,) individuals benefitted from GBV risk mitigation, prevention and response services.

Water, sanitation, and hygiene (WASH)

During the reporting period of January - February 2023, UNICEF responded to Ebola preparedness and response in health facilities as well as safe re-opening of schools through provision of standard WASH supplies package to institutions and communities. Construction works to install sustainable solar-powered water supply systems, including 20,000 litre elevated water storage tanks for health facilities have been completed in four sites as part of the recovery actions after the Ebola outbreak. These systems have been established at Butologo HCIII and Kiyuni HCIII in Mubende District, Kalwana Ebola Treatment Unit (ETU) in Kassanda District and supported the connection of Jinja Regional Referral Hospital (RRH) and Maga-maga HCIII to the National Water grid in order to provide these facilities with a regular water supply. The four solar powered water supply systems will benefit 20,500 people with access to safe water hence improved IPC measures. To enhance sustainability, community structures have been trained on the Operation and Maintenance (O&M) of the systems. In addition, five mobile toilets were provided and installed in Jinja and Maga-Maga HCIIIs to improve sanitation within health facilities serving an estimated 1,200 people. In support of safe re-opening of schools to sustain improved hygiene standards and to protect the gains made during the recent EVD outbreak, IPC-WASH supplies were procured and distribution is ongoing to 336 health facilities and 330 schools in Kassanda, Mubende Kagadi, Kyegegwa, Wakiso, Jinja and Kampala districts and expected to be concluded by Mid-March 2023.



Figure 1: Mobile toilets installed at Jinja Regional Referral Hospital. Picture taken by Paul Kejira

Education

UNICEF and Ministry of Education and Sports (MoEs) supported the School Health Team (SHT) to roll out training on school disease preparedness and response measures reaching 1,283 (734 male, 549 female) teachers ahead of school reopening for first term in early February 2023. The training covered the very high-risk districts of Mubende, Kassanda, Kagadi, Bunyangabo and Kyegegwa. During the reporting period, the Education Response Plan (ERP) was approved by MoES. The three and half year plan is costed at US\$450 million and targeting 674,895 children in refugee settlements and host communities in 13 refugee hosting districts. UNICEF continues to support the ERP Secretariat (MoES) in the preparations for official launch of the plan and other resource mobilization initiatives.

In Karamoja sub region, UNICEF and partners supported mobilization of communities in six districts to send children back to school and joint monitoring of school re-opening was conducted by UNICEF and teams from MoES, MoH and Ministry of Gender Labour and Social Development (MoGLSD). The key gaps identified included high drop-out rate in the upper primary classes, out of date school management committees (SMCs) and poor records keeping in some schools.

In Western Uganda, the district education departments conducted joint monitoring visits in the beginning of the term to assess status of the ECD centers and establish those that meet the minimum requirement for licensing and registration. The Integrated Early Childhood Care and Development (IECD) multisector coordination meeting was held in the districts of Kyegegwa, Isingiro and Kikuube with participants including officials from district education department, sub-county officials and NGO partners. UNICEF partners Finn Church Aid (FCA) and Uganda Muslim Supreme Council (UMSC) supported enrolment of 10,214 (5,014 male, 5,200 female) children in ECD centres in the districts of Isingiro, Kamwenge, Kikuube and Kyegegwa. In Isingiro District, War Child Canada supported enrolment of 746 (342 male, 404 female) adolescents in Accelerated Learning programmes. During this reporting period, 10,960 children accessed formal and non formal education including early learning.

Social behaviour change (SBC), accountability to affected populations (AAP), and localization

At the national level, UNICEF actively contributed to the finalization of the “National post-EVD 180 Days Recovery Response Plan” and the EVD After-Action-Review (AAR). Specific recommendations to the Risk Communication and Social Mobilisation-Community Engagement (RCSM-CE) pillar include building capacities for emergency preparedness especially at the community and district levels; creating sustainable systems for social listening, community feedback and SBC evidence generation at the district level and building a roster of qualified ready-to-deploy Risk Communication and Community Engagement (RCCE) specialists and anthropologists at the national and sub-national levels. As of February 2023, UNICEF and partners reached 749,248 people with messages on prevention and access to services, 264,864 people participated in engagement actions and 29,719 people shared their concerns and asked questions through UNICEF established feedback mechanisms.

In preparation for the Integrated Child Health Days (ICHDs), UNICEF and the Ministry of Health are developing an integrated message package and strategy for the current public health emergencies. The prevailing emergencies include Rift Valley Fever (RVF) in some parts of Mbarara, Malaria, Measles in Lamwo and Kiryandongo districts, and the threat of Cholera due to the onset of the rainy season.

Other ongoing interventions include the reactivation of district and sub-county RCCE committees, strengthening of community structures through bimonthly meetings, on-site visits and orientation of schools and community dialogue meetings and community drives in densely populated areas. These activities are implemented in partnership with the district local governments (DLGs), Uganda Red Cross Society (URCS) and Lutheran World Foundation (LWF) in all the EVD-affected districts and CUAMM for districts affected by drought and malnutrition in the Karamoja sub region.

Humanitarian leadership, coordination, and strategy

UNICEF's humanitarian response in Uganda is carried out with partners in line with the Comprehensive Refugee Response Framework, Grand Bargain commitments and the current Country Programme Document (CPD), emphasizing district-level systems strengthening. District actors are supported to incorporate humanitarian preparedness and response into their annual and midterm district plans.

The Government's National Response to disease outbreaks builds on significant investments made by UNICEF and partners in recent years to support national health systems and incorporate learning from previous health emergencies. UNICEF, in collaboration with the Ministry of Health and other partners, is focussing on public health awareness through risk communication and community engagement, coordination and leadership and information and communication technology through the National and District Task Forces. UNICEF is supporting national and district specific nutrition coordination meetings around nutrition emergency response and governance.

UNICEF Uganda is supporting Emergency and Planning and Response (EPR) initiative by scaling up support to selected districts and sub-county disaster management committees on capacity-building efforts in partnership with Office of the Prime Minister. The partnership is focusing on the provision of EPR soft skilling and practical simulation exercises.

UNICEF participates in the in-country interagency Prevention of Sexual Exploitation and Abuse (PSEA) Task Force, and technically supports the Humanitarian Interagency Coordination Group (HICG) led by the United Nations Resident Coordinator's Office at the national and sub-national levels. UNICEF is actively engaged in the UN HICG activities including emergency planning and coordination meetings for flooding and Karamoja nutrition response. The support to HICG includes developing a joint contingency plan for natural disasters and acceptable thresholds and supporting the request for a joint Central Emergency Response Fund (CERF).

Human interest stories and external media

Stories: www.unicef.org/uganda/stories-field

UNICEF Uganda human interest story: [How a UNICEF-EU-IGAD motorized water scheme increased access to water and improved sanitation | UNICEF Uganda](#)

Next SitRep due: May 2023

UNICEF Uganda: www.unicef.org/uganda

Uganda Humanitarian Action for Children Appeal: <https://www.unicef.org/appeals/uganda>

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Annex A: Funding Status*

Funding requirements 2023					
Sector	Requirements	Funds available		Funding gap	
		Humanitarian resources received in 2023	Resources available from 2022 (carry-over) ⁶	US\$	%
Nutrition	7,281,879	1,103,482	1,531,225	4,647,172	64
Health	9,014,266	172,167	3,162,923	5,679,176	63
Water, sanitation & hygiene	12,198,083	0	1,922,947	10,275,137	84
Child protection, GBViE and PSEA	6,305,839	348,035	2,311,189	3,646,615	58
Education	4,364,510	0	2,692,166	1,672,344	38
Social Protection	4,000,000	0	0	4,000,000	100
Total	43,164,577	1,623,684	11,620,449	29,920,444	69

* As defined in the 2023 Humanitarian Action for Children Appeal for 12 months

⁶ The carry over comprise of a combination of on-going multi-year humanitarian grants and EVD response grants that are running up to 31 March 2023.

Annexe B: Summary of programme results

Indicator disaggregation by SVD pillars	UNICEF and implementing partners' response		
	2023 target	2023 results	Progress
Health			
# of children vaccinated against measles	602,174	48,270	8%
# of children and women accessing primary healthcare in UNICEF-supported facilities	2,045,688	107,080	5%
Nutrition			
# of children 6-59 months with severe wasting admitted for treatment	67,440	4,803	7%
# of primary caregivers of children 0-23 months receiving infant and young child feeding counselling	1,104,787	107,919	10%
Child protection, GBViE and PSEA			
# of children, adolescents and caregivers accessing community-based mental health and psychosocial support	89,156	13,738	15%
# of women, girls and boys accessing gender-based violence risk mitigation, prevention and/or response interventions.	218,216	4,509	2%
# of people with safe and accessible channels to report sexual exploitation and abuse by personnel who provide assistance to affected populations	205,644	1,637	1%
# of unaccompanied and separated children provided with alternative care and/or reunified	3,785	102	3%
Water, sanitation, and hygiene			
# of people accessing a sufficient quantity and quality of water for drinking and domestic needs	166,000	20,500	12%
# of people accessing appropriate sanitation services	58,300	0	0%
# of people reached with critical WASH supplies	1,494,900	125,000	8%
Education			
# of children accessing formal or non-formal education, including early learning	197,644	10,960	6%
Social protection			
# of households reached with UNICEF-funded humanitarian cash transfers	10,000	0	0%
Risk communication and social mobilization/ Community Engagement			
# of people reached through messaging on prevention and access to services	9,677,046	749,248	8%
# of people who participate in engagement actions	1,935,409	264,864	14%
# of people sharing their concerns and asking questions through established feedback mechanisms	3,870,819	29,719	1%