Country programme document
Uganda

Summary

The country programme document (CPD) for Uganda is presented to the Executive Board for discussion and approval at the present session, on a no-objection basis. The CPD includes a proposed aggregate indicative budget of $96,727,000 from regular resources, subject to the availability of funds, and $193,810,000 in other resources, subject to the availability of specific-purpose contributions, for the period 2021 to 2025.

*E/ICEF/2020/17.*
Programme rationale

1. Uganda continues to make steady progress towards the Sustainable Development Goals by ensuring that its girls and boys, including adolescents, have an equitable chance in life, survive and are given the best possible start, learn well in school, live in clean environments and are kept safe from violence and exploitation.

2. With a population of 47.2 million (2020) Uganda has one of the youngest and fastest-growing populations in the world. Fifty-seven per cent of its citizens are under 18 years of age, and the number of children is expected to double by 2040. Rapid population growth, urbanization and the refugee influx continue to put pressures on the country’s social service delivery.

3. Moderate economic growth over the past decade – with growth in gross domestic product averaging about 6 per cent per annum – contributed to a reduction in poverty, from 31.1 per cent in 2005/2006 to 21.4 per cent in 2016/2017. Uganda ranks 162nd of 189 countries on the Human Development Index, and 56 per cent of children suffer from multidimensional poverty. The impact of the coronavirus disease 2019 (COVID-19) pandemic is expected to exacerbate poverty further.

4. Uganda has made considerable progress in improving child survival and development. Between 2011 and 2016, maternal and under-five mortality, respectively, declined from 438 deaths per 100,000 live births to 368 deaths per 100,000 live births, and from 90 deaths per 1,000 live births to 64 deaths per 1,000 live births. Stunting in children under 5 years of age declined from 33 per cent to 29 per cent. AIDS-related deaths among children dropped by 65 per cent, and 155,000 new infections were averted (between 2010 and 2019). Access to safe water increased from 70 per cent to 78 per cent. Improvements in socioeconomic conditions, as well as the availability and utilization of essential health services, contributed to this progress. Also, over the 2011–2016 period, immunization coverage against diphtheria-tetanus-pertussis (DTP3) and measles improved from 68 per cent to 79 per cent, and from 76 per cent to 80 per cent, respectively. The proportion of women attending at least four antenatal-care visits increased from 48 per cent to 60 per cent, and deliveries in health facilities rose from 57 per cent to 73 per cent. These improvements have been particularly pronounced in the Karamoja region, where poverty and deprivation levels are among the highest.

5. Despite these positive trends, neonatal mortality stagnated (at about 27 deaths per 1,000 live births) and is responsible for 42 per cent of all under-five deaths. One third of child deaths are due to malaria, pneumonia and diarrhoea. Despite progress, maternal mortality remains high (368 deaths per 100,000 live births). High rates of adolescent pregnancies and poor quality of care during pregnancy, childbirth and the immediate post-partum period are important contributing factors to high maternal and newborn mortality.

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3 Uganda Demographic and Health Survey (UDHS) 2016.
5 UDHS 2016.
6 Ibid.
7 Ibid.
6. Undernutrition remains an important contributor to poor maternal, newborn and child health. While stunting among children under five years of age declined, nevertheless over 2 million children are stunted. A relatively low prevalence of global acute malnutrition in children under 5 years (4 per cent) masks a high prevalence of severe wasting (1.3 per cent), particularly in the Karamoja and West Nile regions (over 10 per cent). High undernutrition rates among children, teenagers and young pregnant women are due to inadequate diets, the high prevalence of infectious diseases, weaknesses in health-care provision, suboptimal child care and feeding practices, poor personal and environmental hygiene, and food insecurity.

7. The coverage with efficacious maternal antiretroviral therapy (ART) rose from 29 per cent in 2010 to 93 per cent in 2018, leading to a significant drop in the mother-to-child-transmission rate, from 22 per cent in 2010 to 7 per cent in 2018. Challenges remain in ensuring universal early infant diagnosis, retaining HIV-positive children in care and managing tuberculosis/HIV co-infection. Young women are disproportionately infected, bearing HIV infection rates more than double that of their male age-mates, reflecting unequal power dynamics between men and women.

8. Nearly 9 million people in Uganda rely on unsafe water sources, and 15 per cent of improved water sources are non-functional. Progress in expanding access to improved sanitation has been marginal, increasing from 15 per cent to 19 per cent (2000–2016). Inadequate water, sanitation and hygiene (WASH) coverage underpins high rates of diarrhoeal disease, frequent cholera outbreaks, high levels of undernutrition and infectious disease prevalence. Poor WASH facilities and related practices in schools are having a significant negative impact on students’ health and school attendance, particularly for girls. The urban poor have the least and poorest access to safe WASH facilities.

9. Improvements in educational outcomes have been challenged by continuing high rates of population growth and the continued low level of investment in education, which declined from 15 per cent to 10 per cent of the total budget between 2012 and 2020. While there have been slight increases in early childhood development (ECD) attendance, and primary and secondary enrolment rates, primary retention and achievement rates have plateaued at about 32 to 35 per cent. There is gender parity in primary and secondary education. However, experiences of safety, protection and inclusion are different for boys and girls, so there is a continuous need for gender mainstreaming in the sector. The quality of education is low, with 51 per cent of children in grade 6 meeting required literacy levels and 53 per cent meeting required numeracy levels. Only 9 per cent of children with disabilities are enrolled in primary school and only 6 per cent complete it. Transition to secondary school is limited. Dropout rates escalate for children over 14 years of age due to high levels of violence at school, inadequate sanitary facilities, work pressures, teenage pregnancy and early marriage. Opportunities for adolescents to develop their life and livelihood skills are limited.

10. Recent evidence has revealed the severity and widespread nature of gender-based violence and violence against children. Some 35 per cent of girls and 17 per cent of boys have experienced sexual violence, and 59 per cent of girls and 68 per cent of boys have experienced physical violence during their childhoods. This persists into adulthood, as 56 per cent of ever-married women and 44 per cent of ever-married women have experienced violence.

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10 UDHS 2016.
men have experienced physical, sexual or emotional violence by their spouse or partner.\textsuperscript{13}

11. Sustained efforts to stop child marriage and female genital mutilation have had an effect: in the period 2011–2016, child marriage declined from 48 per cent to 40 per cent and female genital mutilation declined from 1.4 per cent to 0.3 per cent. Despite progress, child marriage and teenage pregnancy remain common: before the age of 18 years, some 40 per cent of women are married and 25 per cent of teenage girls start childbearing.\textsuperscript{14}

12. Birth registration services have expanded, reaching some 32 per cent of newborns in 2016, and nearly 20 per cent of children under 5 years of age possess a birth certificate. Complicated and costly registration and certification, combined with a lack of public awareness of the importance of registration, remains a bottleneck to universal coverage.

13. Uganda continues to confront a range of ever-growing, simultaneously occurring humanitarian crises. It is one of the largest refugee-hosting countries globally, with close to 1.4 million refugees (2020) from the Democratic Republic of the Congo, South Sudan and the Great Lakes Region. Children make up 60 per cent of refugee populations. While Uganda has adopted a progressive and generous refugee policy — considering the needs of both refugees and host communities — the rapid and unpredictable growth in refugee populations has severely strained host communities, service delivery and local governance capacities.

14. The growing frequency and impact of emerging diseases (e.g., Ebola, Marburg and Crimean-Congo Haemorrhagic Fevers), including the unprecedented COVID-19 pandemic, as well as chronic outbreaks of vaccine-preventable diseases (e.g., measles and rubella), cholera and malaria, increasingly challenge Uganda and its under-resourced health care system. The deepening impacts of climate-related events, such as floods and droughts that affect the health, nutrition, education and welfare of children and the resilience of their families, particularly in Karamoja and northern Uganda, are of key concern. Uganda is rated high risk (ranked 15 of 190 countries) for humanitarian crises and disasters that could overwhelm national response capacities.\textsuperscript{15}

15. Child deprivation is rapidly developing an urban face. Urban populations are growing at 5.4 per cent per annum (double that of rural areas). Half of this growth is expected within the Greater Kampala region, where 60 per cent of children live in congested informal settlements with poor housing, unsanitary environmental conditions and very limited access to essential health, education and social-welfare and child-protection services.

16. In Uganda, gender inequities persist where social norms and cultural practices condone child marriage, female genital mutilation, exploitative labour, sexual abuse, a disproportionate burden of HIV infection on girls and the generally low value placed on education for girls. Failure to modify these norms has significant effects. By most socioeconomic measures, girls and women in Uganda are worse off than boys and men in terms of their educational achievement, health risks, employment and wage equality, inheritance rights, standing in customary law, and political participation. Gender inequality remains one of the most significant barriers to reducing poverty and to tapping the potential of the demographic dividend.

\textsuperscript{13} UDHS 2016.
\textsuperscript{14} UDHS 2016.
\textsuperscript{15} Inter-Agency Standing Committee/European Commission, Index for Risk Management, 2018.
17. Across all sectors and programmes, the challenges to progress are broadly similar. Progress has been achieved, but gains are fragile and the pace of improvement is slowing. The increasing demands of a rapidly growing population, the impact of refugee flows, urbanization, disease outbreaks and climate-related events have collectively outpaced the country’s moderate economic growth, stagnant budget allocations, and strained capacities to plan and deliver essential social services.

18. While Uganda boasts relatively strong and child-friendly policies and plans, implementation remains challenging. Social-service infrastructure has not been expanded and staffed in step with population needs, and services are constrained by supply shortages, poor maintenance, low staff motivation (due to low salaries and inadequate incentives) and complex social accountability mechanisms. This is especially true for the social welfare structure, which is severely under-resourced. At the community level, children and families experience knowledge, physical, financial and legal barriers to accessing health, nutrition, education, water, sanitation, social-welfare, child-protection and other services. These barriers are often compounded by cultural influences, gender dynamics and social norms that hinder the full adoption of caring family practices that protect and nurture children from before birth through adolescence.

19. Learning from previous experience was a priority for the development of this country programme. A highly participatory midterm review and independent evaluation of the 2016–2020 country programme were conducted. Their recommendations will help the country programme to make strategic shifts:

(a) A strategic prioritization of the most vulnerable children;
(b) Increased focus on systems-strengthening including supply chain–strengthening across programmes and sectors;
(c) Greater investment in communication for development (C4D) to promote child-supportive practices and social norms;
(d) Stronger multisectoral support for the cross-programme priorities of ECD, adolescent development, gender and integrated humanitarian-development responses;
(e) Increased support to sustainability and public financing issues that have constrained progress for children;
(f) Stronger and more strategic business engagement and greater collaboration with the private sector to accelerate results for children.

Programme priorities and partnerships

20. The overall goal of the country programme is to support national efforts to accelerate the realization of children’s rights and progress towards the achievement of the Sustainable Development Goals for children, in line with the vision of the Agenda 2063 for Africa. In partnership with the Government of Uganda, the programme will be guided by the principles of children’s rights, equity, gender equality and resilience and will support evidence-based, integrative and innovative programming. The vision is for all boys and girls in Uganda, especially the most vulnerable and disadvantaged, to realize their rights and have equal opportunity to survive and thrive.

21. This country programme has been designed in partnership with the Government of Uganda, is aligned with the National Development Plan for 2020–2025 and supports the operationalization of the National Sustainable Development Goals Roadmap (2018). The programme forms an integral part of the United Nations Sustainable Development Cooperation Framework (UNSDCF) for Uganda, 2021–
2025. The country programme is aligned with the Comprehensive Refugee Response Framework.

22. The overarching theory of change for the country programme holds that accelerated progress can be achieved for boys and girls in Uganda, especially the most vulnerable and disadvantaged, so that they can realize their rights and have equal opportunity to survive and thrive, only if: (a) an enabling environment is created and sustained that provides leadership, guidance and resources and encourages partnerships for scaled-up action for children; (b) service providers are motivated, equipped and supported to provide quality services, are supported to cooperate with others, are held accountable for their work and are encouraged to innovate in their efforts to reach all children; and (c) children, families and communities are empowered and mobilized with the knowledge, skills and values required to protect and nurture the survival, development and protection of children.

23. In all programme components, UNICEF will systematically adopt a gender-sensitive life-cycle approach with early childhood care and adolescent programming elements integrated within the results of the child survival, basic education and child protection programmes. This is aimed at achieving maximum scale and synergy of high-impact interventions in the first and second decades of children’s lives.

24. The country programme is addressing humanitarian and development needs through systems-strengthening, accountability to affected populations, resilience-building and mainstreaming risk-informed emergency preparedness and response across all programmes, in line with the Core Commitments for Children in Humanitarian Action.

25. The country programme will apply multisectoral change strategies, including:

(a) A social- and behavioural-change communication approach strengthening community mobilization and targeting interrelated causes of harmful beliefs and practices;

(b) Systems-strengthening at the national and decentralized levels to improve service delivery and policy implementation;

(c) Increased investment in adolescents and youth to enhance opportunities and skills for their empowerment, participation and making adolescents fit for work, including through the Generation Unlimited partnership;

(d) Fostering innovations and new technologies at scale through technology for development;

(e) Delivering results at scale by developing and leveraging partnerships and resources, including through strategic engagement with business and the broader private sector.

26. The country programme will seek to accelerate change for the most deprived children through a focus-district strategy targeting districts with the highest numbers and rates of child deprivation or with high vulnerability to external shocks, including refugee movements, disease outbreaks and the impacts of climate-related events. UNICEF will support districts in the areas of planning and budgeting, coordination, evidence-generation and cross-sectoral collaboration for adolescents, ECD, gender and social norms to address the multidimensional drivers of deprivation and inequity. UNICEF will use this experience to inform and influence child-focused development planning and action in non-focus districts.
Child survival and development

27. The aim of this programme is that by 2025, newborns, children and adolescent boys and girls, especially the most disadvantaged and those living in humanitarian situations, have access to and the use of quality integrated-health, nutrition and HIV services and benefit from a more nurturing, protective and clean environment. This will be achieved by increasing the capacity of the Government and stakeholders at the national and subnational levels to expand and sustainably provide — while families and communities have an increased capacity to demand in both development and humanitarian settings — the following:

(a) An integrated package of quality services for pregnant and lactating women, including pregnant adolescents, and newborns;

(b) An essential package of quality preventative, promotive and curative services for infants and young children;

(c) A package of quality services for adolescent boys and girls, including programmes aimed at preventing HIV, establishing healthy lifestyle behaviours and diets and reducing harmful exposures and risk-taking;

(d) A package of high-impact nutrition interventions for infants, children, adolescents and women of reproductive age;

(e) Safe water, sanitation and hygiene.

28. The programme seeks to achieve accelerated progress by ensuring that:

(a) families and communities adopt positive care and nurturing practices during pregnancy, childbirth and in early childhood;

(b) women, mothers and newborns receive an essential package of quality reproductive, antenatal, post-natal and newborn health services;

(c) children are immunized and able to access treatment for common childhood diseases, especially malaria, pneumonia and diarrhoea;

(d) caretakers are informed and able to access services and support to prevent nutritional stunting and micronutrient deficiencies and to treat severe acute malnutrition;

(e) adolescent boys and girls receive comprehensive prevention interventions to reduce HIV incidence and early pregnancies and build their resilience to substance abuse and mental health issues and are ensured access to comprehensive HIV treatment and care;

and (f) children and their families and communities have access to safe drinking water and improved sanitation and hygiene practices.

29. UNICEF aims to achieve these results with government partners, including the line ministries, the Office of the Prime Minister and district local governments; bilateral and multilateral partners including United Nations agencies; the private sector; and civil society organizations (CSOs).

Basic education and adolescent development

30. The aim of the programme is that by 2025, girls and boys 3 to 19 years of age achieve age-appropriate learning outcomes, in the following ways:

(a) Boys and girls 3 to 5 years of age, particularly the rural, urban poor and refugees, access quality pre-primary education through formal and non-formal learning centres;

(b) Girls and boys demonstrate increased learning achievement in literacy and numeracy through increased access to inclusive, equitable and relevant quality education;

(c) Adolescent girls and boys are empowered with life skills, active citizenship and/or employability.
31. The programme seeks to achieve accelerated progress by ensuring that: (a) ECD centres and schools are accessible, inclusive, affordable and safe; (b) parents provide early childhood stimulation and support their children’s learning; (c) classrooms are resourced with learning materials and teachers are motivated and supported; (d) out-of-school children and adolescents are provided with relevant, second-chance or alternative learning opportunities, including life skills (in line with the National Sexuality Education Framework\(^\text{16}\)); (e) schools are encouraged to innovate and engage with communities to promote learning attendance and achievement (including strategies and approaches to make schools safe from violence); and (f) district staff develop results-oriented plans to achieve better learning outcomes for children.

32. UNICEF aims to achieve these results with government partners, including DLGs, and with bilateral and multilateral partners including United Nations agencies, the private sector and CSOs.

**Child protection**

33. The aim of the programme is that by 2025, children in Uganda are free from all forms of violence, abuse, neglect and exploitation, including harmful practices, and realize their right to legal identity by:

   (a) Strengthening legislative, policy, budgetary and institutional frameworks that protect children from all forms of violence;

   (b) Capacitating children, families and communities to identify risks and prevent and respond to all forms of violence, abuse, neglect and exploitation of children;

   (c) Ensuring that children and their families are accessing quality multisectoral protection services, including birth registration.

34. The programme seeks to achieve accelerated progress by ensuring that: (a) children, their parents, duty-bearers and peers are more aware of their rights and obligations, are able to report violations and are knowledgeable about how to access child-protection services; (b) parents practise positive parenting and are responsive to child-protection threats; (c) communities are intolerant of violence, abuse, neglect and exploitation and build a strong social movement against it; and (d) key child-protection services (health, education, justice, police, social welfare) are made more child-friendly, capable, accessible and linked. If these conditions can be met at scale, then systems, capabilities and commitments will have been set in place to reduce the prevalence and impact of violence and harmful practices on children.

35. UNICEF aims to achieve these results with government partners, including district local governments and with bilateral and multilateral partners including United Nations agencies, the private sector and CSOs.

**Social policy**

36. The aim of this programme is that by 2025, child-sensitive evidence and analysis inform more effective and efficient planning, budgeting and implementation of programmes for reducing child deprivation, inequities and gender inequalities, especially for the most vulnerable and marginalized children and adolescents, by:

   (a) Strengthened national capacity to generate and utilize robust evidence on child poverty and vulnerabilities, and public finance to reduce socioeconomic disparities and improve access to basic services, while promoting social inclusion;

(b) Strengthened national capacity to support the implementation of the National Social Protection Policy framework through contextualized interventions in urban areas and along the humanitarian-development continuum;

(c) An enabling environment for child-rights governance that includes strengthening the capacity of national institutions, civil society and other key stakeholders to advocate for children, while advancing child rights and participation.

37. The programme seeks to achieve accelerated progress by ensuring that: (a) policy and programmatic decisions and actions are informed by evidence that investing in children helps to achieve the demographic dividend necessary for achieving the Vision 2040 national development agenda; (b) national statistical and research capacities are strengthened to monitor and report the situation of children, and conduct policy research and advocacy on priority children’s issues; (c) social protection systems are expanded and target the most vulnerable and deprived children; (d) child-rights advocacy, reporting and governance systems are strengthened, including the role of Parliament, the Human Rights Commission and the Ombudsperson.

38. UNICEF aims to achieve these results in partnership with government partners, including the Office of the Prime Minister, Parliament, Economic Policy Research Centre, Kampala Capital City Authority and Uganda Human Rights Commission, bilateral and multilateral partners including United Nations agencies, the private sector and CSOs.

**Programme effectiveness**

39. Underpinning all, this component will ensure that the Uganda country programme is efficiently designed, coordinated, managed and supported to meet quality programming standards in achieving results for children. In addition to strengthening results-based planning, monitoring, evaluation and reporting, attention will be devoted to facilitating cross-programme coordination in the programme priority areas of gender, ECD, adolescents, C4D and the integration of disaster risk reduction as well as humanitarian-development assistance across programmes. Public communications, advocacy and private-sector engagement will be undertaken to mobilize leadership and communities for the children’s rights agenda. UNICEF field offices aim to provide technical and management support to counterparts, particularly in the areas of district system-strengthening, and to respond to humanitarian crises.

**Summary budget table**

<table>
<thead>
<tr>
<th>Programme component</th>
<th>Regular resources</th>
<th>Other resources</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Child survival and development</td>
<td>34 053</td>
<td>149 247</td>
<td>183 300</td>
</tr>
<tr>
<td>Basic education and adolescent development</td>
<td>16 543</td>
<td>19 460</td>
<td>36 003</td>
</tr>
<tr>
<td>Child protection</td>
<td>12 869</td>
<td>11 395</td>
<td>24 264</td>
</tr>
<tr>
<td>Social policy</td>
<td>6 265</td>
<td>325</td>
<td>6 590</td>
</tr>
<tr>
<td>Programme effectiveness</td>
<td>26 997</td>
<td>13 383</td>
<td>40 380</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>96 727</strong></td>
<td><strong>193 810</strong></td>
<td><strong>290 537</strong></td>
</tr>
</tbody>
</table>
Programme and risk management

40. This country programme document outlines UNICEF contributions to national results and serves as the primary unit of accountability to the Executive Board for results alignment and resources assigned to the programme at the country level. Accountabilities of managers at the country, regional and headquarters levels with respect to country programmes are prescribed in the organization’s programme and operations policies and procedures.

41. The country programme is an integral part of the UNSDCF for Uganda, 2021–2025. The United Nations working together provides a platform for the identification of joint programming opportunities, common partner engagement and the coordination of common approaches to operations, communication and emergency response. UNICEF is an active member of the Development Partners Group, which provides opportunities for the harmonization of initiatives, advocacy and resource mobilization for children.

42. The country programme’s six most significant risks are: endemic and pandemic disease outbreaks; an escalation of humanitarian challenges overwhelming current government capacities; inadequate public financing to support the scale-up of essential social services; weak partner implementation capacities, particularly in poorer and more isolated districts with high rates of child deprivation; challenges to aligning development partners and harmonizing support behind a government-led systems-strengthening approach; and risks around the use of funds by implementing partners.

43. Internal management mechanisms, including the country management team, programme management team, partnership review committee and the research and evaluation committee, strengthen risk management and will enhance the quality, efficiency and effectiveness of the programme. Measures to monitor and mitigate risks will be detailed within annual plans and programme reviews. Management of the harmonized approach to cash transfers will be strengthened to mitigate and respond to risks in programme implementation. UNICEF will strengthen internal and partner risk management related to the prevention of sexual exploitation and abuse. In line with the Government’s decentralization approach, UNICEF zonal offices will engage with government and non-governmental organizations to share timely information on risks and opportunities. UNICEF will continue to invest in surveillance and management information systems designed to identify changes in the situation of children and report progress in the implementation of agreed strategies and workplans.

44. Uganda remains a complex operating context. While there is encouraging donor response to the refugee situation and the COVID-19 and Ebola outbreaks, external variables may influence the availability of financial resources to Uganda, severely impacting programme delivery. To mitigate this, UNICEF will anchor country programme investments in equity and systems-strengthening. The continued diversification of the current partnerships, emphasizing cost efficiency and measurable results, is the best safeguard against decreasing resources.

Monitoring and evaluation

45. In cooperation with line Ministries, other United Nations agencies and civil society, UNICEF will monitor progress made towards the realization of child rights and strengthen existing national and subnational evidence. UNICEF will continue to support the Uganda Bureau of Statistics as well as line ministries for routine administrative data systems.
46. UNICEF programme monitoring will consist of programmatic visits, the high-frequency monitoring of key indicators, partner reporting, as well as third-party monitoring (in alignment with initiatives from other development partners). The outcomes of the country programme are monitored through regular surveys and evaluations. Direct feedback from affected populations is captured through regular focus group discussions and mainstreaming of accountability to affected populations throughout the programme.

47. Midyear and annual reviews with partners will be used to assess progress to inform strategic programme decisions. The Integrated Monitoring and Evaluation Plan, complemented by a costed evaluation plan, will articulate all priority monitoring, research and evaluation activities. Four key evaluations in the period 2021–2025 will focus on health systems-strengthening, WASH, school as an integrated platform for service delivery and child-protection systems-strengthening.
Annex

Results and resources framework

Uganda – UNICEF country programme of cooperation, 2021–2025

**Convention on the Rights of the Child:** All articles

**National priorities:** National Development Plan III

**United Nations Sustainable Development Cooperation Framework outcomes involving UNICEF:**

Outcome 1. By 2025, Uganda has inclusive and accountable governance systems and people are empowered, engaged and enjoy human rights, peace, justice and security

Outcome 2.1. By 2025, people, especially the marginalized and vulnerable, benefit from increased productivity, decent employment and equal rights to resources

Outcome 2.2. By 2025, Uganda’s natural resources and environment are sustainably managed and protected, and people, especially the vulnerable and marginalized, have the capacity to mitigate and adapt to climate change and disaster risks

Outcome 3.1. By 2025, people, especially the vulnerable and marginalized, have equitable access to and utilization of quality basic social and protection services

Outcome 3.2. By 2025, gender equality and human rights of people in Uganda are promoted, protected and fulfilled in a culturally responsive environment

**Related UNICEF Strategic Plan, 2018–2021 Goal Areas:** 1–5

<table>
<thead>
<tr>
<th>UNICEF outcomes</th>
<th>Key progress indicators, baselines (B) and targets (T)</th>
<th>Means of verification</th>
<th>Indicative country programme outputs</th>
<th>Major partners, partnership frameworks</th>
<th>Indicative resources by country programme outcome: regular resources (RR), other resources (OR) (In thousands of United States dollars)</th>
</tr>
</thead>
</table>
| 1. By 2025, newborns, children and adolescent boys and girls, especially the most disadvantaged and those living in development and humanitarian situations as well as | 1 (a) Births delivered in a health facility  
B: 60% (2018)  
T: 75% | Health Management Information System (HMIS) /District Health Information Software 2 (DHIS2) | 1.1. By 2025, the Government and stakeholders at the national and subnational levels will have increased capacity to expand and sustainably provide, while families and communities will have an increased capacity to demand, an integrated package of quality services for pregnant | Government, United Nations, development partners, private sector, district local governments (DLGs), civil society organizations (CSOs) | 34 053 149 247 183 300 |
<p>| | 1 (b) Percentage of districts or equivalent | HMIS/DHIS2 | | | |</p>
<table>
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</tr>
</thead>
</table>
| urban settings, have increased access to and use of quality integrated health, nutrition, HIV and early stimulation services and benefit from a more nurturing, protective and clean environment. | administrative unit with at least 80% coverage of diphtheria/tetanus/pertussis-containing vaccine for children under 1 year  
B: 89.8% (2019)  
T: 95%  
1 (c) Percentage of children aged 0 to 14 years and adolescent girls and boys aged 10 to 19 years living with HIV who are receiving antiretroviral therapy  
B: 0–9 years 61% (2020)  
0–14 years 67% (2020)  
10–19 years 66% (2020)  
T: 0–9 years 90%  
0–14 years 90%  
10–19 years 90%  
1 (d) Proportion of children 6 to 23 months receiving a minimum number of food groups  
B: 30.3% (2019)  
T: 85%  
1 (e) Percentage of population accessing basic drinking water  
B:  
Rural 69% (2019)  
Urban 79% (2019)  
T:  
Rural 85%  
Urban 100% | HMIS/DHIS2  
Uganda National Panel Survey  
Ministry of Water and Environment Sector Performance Report | women, including pregnant adolescents, and newborns.  
1.2. By 2025, the Government and stakeholders at the national and subnational levels will have an increased capacity to expand and sustainably provide, while families and communities will have an increased capacity to demand, an essential package of quality preventative, promotive and curative services for infants and young children.  
1.3. By 2025, the Government and stakeholders at the national and subnational levels will have increased capacity to expand and sustainably provide, while families and communities will have an increased capacity to demand, a package of quality services for adolescent boys and girls, including programmes aimed at preventing HIV, establishing healthy lifestyle behaviours and diets and reducing harmful exposures and risk-taking.  
1.4. By 2025, the Government and stakeholders at the national and subnational levels will have increased capacity to expand and sustainably provide, while families and communities will have an increased capacity to demand, a package of high-impact nutrition interventions for | | |
### UNICEF outcomes

#### Key progress indicators, baselines (B) and targets (T)

1. **By 2025, the Government and stakeholders at the national and subnational levels will have increased capacity to sustainably increase access to and the use of quality/safe drinking water, improved sanitation and positive hygiene practices in rural and poor urban households and communities as well as institutions.**

2. **By 2025, girls and boys aged 3 to 19 progressively achieve age-appropriate learning outcomes.**

   2.1 By 2025, boys and girls aged 3 to 5 years, particularly the rural, urban poor and refugees, access and demand quality pre-primary education through formal and non-formal learning centres.

   2.2 By 2025, girls and boys demonstrate increased learning achievement in literacy and numeracy through increased access to and demand for inclusive, equitable and relevant quality education.

   2.3 By 2025, adolescent girls and boys are empowered with life skills, active citizenship and/or employability.

#### Means of verification

- **Indicative country programme outputs**
- **Major partners, partnership frameworks**

#### Indicative resources by country programme outcome: regular resources (RR), other resources (OR) (In thousands of United States dollars)

<table>
<thead>
<tr>
<th>Outcome</th>
<th>B:</th>
<th>T:</th>
<th>RR</th>
<th>OR</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>2 (a) Gross enrolment rate for pre-primary education</td>
<td></td>
<td></td>
<td>16 543</td>
<td>19 460</td>
<td>36 003</td>
</tr>
<tr>
<td>B: 15.8% (boys 15.1%; girls 16.8%) (2016) T: 24% (boys 24%; girls 24%)</td>
<td></td>
<td></td>
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<td></td>
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<td>2 (b) Average learning outcome results in core subjects</td>
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<td>B: P3 Literacy: 49.9% (boys 47.4%; girls 52.1%) (2018)</td>
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<td>P3 Numeracy: 55.2% (boys 54.3%; girls 56.1%) (2018)</td>
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<tr>
<td>P6 Literacy: 53.1% (boys 52.7%; girls 53.5%) (2018)</td>
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<td>National Assessment of Progress in Education</td>
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#### Government, United Nations, development partners, private sector, DLGs, CSOs
<table>
<thead>
<tr>
<th>UNICEF outcomes</th>
<th>Key progress indicators, baselines (B) and targets (T)</th>
<th>Means of verification</th>
<th>Indicative country programme outputs</th>
<th>Major partners, partnership frameworks</th>
<th>Indicative resources by country programme outcome: regular resources (RR), other resources (OR) (In thousands of United States dollars)</th>
</tr>
</thead>
<tbody>
<tr>
<td>P6 Numeracy: 50.9% (boys 56.2%; girls 45.9%) (2018)</td>
<td>Ministry of Education and Sports Annual Performance Report</td>
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<td>T: P3 Literacy: 65% P3 Numeracy: 70% P6 Literacy: 70% P6 Numeracy: 70%</td>
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<td>2 (c) Out-of-school rate for girls and boys of primary and lower-secondary school age</td>
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<td>T: Primary: 3% Lower-secondary: 70%</td>
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<td>P3 Literacy: 65%</td>
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<tr>
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<td>3. By 2025, children in Uganda, especially the most vulnerable and those affected by humanitarian situations, are protected from all forms of violence, abuse, neglect and exploitation, including harmful practices, and realize their right to legal identity.</td>
<td>3 (a) Proportion of districts with a comprehensive child-protection system, including coordination mechanisms, volunteer structures, capacity of service providers and referral across sectors</td>
<td>District Results Monitoring Tool</td>
<td>3.1. Strengthened legislative, policy, budgetary and institutional frameworks that protect children from all forms of violence in Uganda by 2025 3.2. Children, families and communities have the capacity to identify risks and prevent and respond to all forms of violence, abuse, neglect and exploitation of children by 2025. 3.3. Children and their families are accessing quality multisectoral protection services including birth registration by 2025.</td>
<td>Government, United Nations, development partners, private sector, DLGs, CSOs</td>
<td>12 869 11 395 24 264</td>
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<td>B: 0% (2019) T: 18%</td>
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<td>3 (b) Number of girls and boys who have experienced violence reached by health, social work or justice/law enforcement services</td>
<td>Child Helpline database</td>
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<td>through UNICEF-supported programmes</td>
<td>B: 0 (2019) T: 17,220</td>
<td>Mobile Vital Records System</td>
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<td>RR</td>
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<td>3 (c) Percentage of children under 1 year whose births are registered</td>
<td>B: 6% (2018) T: 40%</td>
<td>Mobile Vital Records System</td>
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<td>4. By 2025, child-sensitive evidence and analysis inform more effective and efficient planning, budgeting and implementation of programmes for reducing child deprivation, inequities and gender inequalities, especially for the most vulnerable and marginalized children and adolescents.</td>
<td>4 (a) Number of children living in monetary or multidimensional poverty (MD-P)</td>
<td>Uganda National Household Survey</td>
<td>4.1 Strengthened national capacity to generate and utilize robust evidence on child poverty and vulnerabilities, and public finance to reduce socioeconomic disparities and improve access to basic services, while promoting social inclusion</td>
<td>Government, United Nations, development partners, private sector, DLGs, CSOs</td>
<td>6 265</td>
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<td>B: 56% (MD-P) (2016/17) T: 45%</td>
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<td>4 (b) Share of public spending on health, education and/or social protection</td>
<td>Annual Budget and Financial Performance Report</td>
<td>4.2 Strengthened national capacity to support the implementation of the National Social Protection Policy framework through contextualized interventions in urban areas and along the humanitarian-development continuum</td>
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<td>B: Health Sector: 4.7% of spending (fiscal year (FY) 2017/2018) Education Sector: 10.5% of spending (FY 2017/2018) T: Health Sector: 5.5% of spending (FY 2024/2025) Education Sector: 12% of spending (FY 2024/2025)</td>
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<td>4.3 Enabling environment for child rights governance that includes strengthening the capacity of national institutions, civil society and other key stakeholders to advocate for children, while</td>
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<td>UNICEF outcomes</td>
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<td>4 (c) National human rights institutions supported by UNICEF performing quality monitoring on child rights</td>
<td>Programme visits</td>
<td>advancing child rights and participation</td>
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<td>B: Score 1</td>
<td>T: Score 2</td>
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<tr>
<td>5. By 2025, the UNICEF Uganda country programme is efficiently designed, coordinated, managed and supported to meet quality programming standards in achieving results for children.</td>
<td>Standard key performance indicators</td>
<td>InSight</td>
<td>5.1. Programme coordination</td>
<td>Ministry of Finance, Planning and Economic Development, Ministry of Local Government, Office of the Prime Minister, National Planning Authority, United Nations, development partners, private sector, CSOs, media, National Committees for UNICEF</td>
<td>26 997</td>
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<td>26 997</td>
<td>13 383</td>
<td>40 380</td>
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<td>Total resources</td>
<td>96 727</td>
<td>193 810</td>
<td>290 537</td>
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