

Uganda 2005



Consolidated Appeals Process (CAP)



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CHULHO HYUN/UGANDA/2004

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The CAP is much more than an appeal for money. It is an inclusive and coordinated programme cycle of:

- strategic planning leading to a Common Humanitarian Action Plan (CHAP);
- resource mobilisation (leading to a Consolidated Appeal or a Flash Appeal);
- coordinated programme implementation;
- joint monitoring and evaluation;
- revision, if necessary; and
- reporting on results.

The CHAP is a strategic plan for humanitarian response in a given country or region and includes the following elements:

- a common analysis of the context in which humanitarian action takes place;
- an assessment of needs;
- best, worst, and most likely scenarios;
- stakeholder analysis, i.e. who does what and where;
- a clear statement of longer-term objectives and goals;
- prioritised response plans; and
- a framework for monitoring the strategy and revising it if necessary.

The CHAP is the foundation for developing a Consolidated Appeal or, when crises break or natural disasters occur, a Flash Appeal. The CHAP can also serve as a reference for organisations deciding not to appeal for funds through a common framework. Under the leadership of the Humanitarian Coordinator, the CHAP is developed at the field level by the Inter-Agency Standing Committee (IASC) Country Team. This team mirrors the IASC structure at headquarters and includes UN agencies, and standing invitees, i.e. the International Organization for Migration, the Red Cross Movement, and NGOs that belong to ICVA, Interaction, or SCHR. Non-IASC members, such as national NGOs, can be included, and other key stakeholders in humanitarian action, in particular host governments and donors, should be consulted.

The Humanitarian Coordinator is responsible for the annual preparation of the consolidated appeal *document*. The document is launched globally each November to enhance advocacy and resource mobilisation. An update, known as the *Mid-Year Review*, is presented to donors in June of each year.

Donors provide resources to appealing agencies directly in response to project proposals. The **Financial Tracking Service (FTS)**, managed by the United Nations Office for the Coordination of Humanitarian Affairs (OCHA), is a database of donor contributions and can be found on www.reliefweb.int/fts

In sum, the **CAP is about how the aid community collaborates to provide civilians in need the best protection and assistance available, on time.**

ORGANISATIONS PARTICIPATING IN CONSOLIDATED APPEALS DURING 2005:

AAH	CPA-LIRA	HIA	Non-Violence Int'l	TEWPA
ABS	CPAR	Horn Relief	NPA	UNAIDS
ACF/ACH	CPCD	HWA	NRC	UNDP
ACTED	CRC	IFRC	OCHA	UNESCO
ADRA	CREAF	ILO	OCPH	UNFPA
Africare	CRS	IMC	OHCHR	UN-HABITAT
Alisei	DDG	INTERMON	Open Continent	UNHCR
AMREF	DENAL	INTERSOS	Orphan's Aid	UNICEF
ARC	DRC	IOM	OXFAM-GB	UNIFEM
Atlas Logistique	EMSF	IRC	PAPP	UNMAS
AVSI	ERM	IRIN	PIN	UNODC
CAM	FAO	Islamic Relief	PRC	UNRWA
CARE Int'l	Fondn. Suisse Déminage	JVSF	RUFUO	UNSECOORD
CARITAS	GAA	KOC	SBF	VESTA
CEASOP	GPI	LIBA	SCF / SC-UK	VET Aid
CESVI	HA	LSTG	SCU	WACRO
CIRID	HABEN	MAG	SERLO	WANEP/APDH
COLFADHEMA	Handicap Int'l	Mani Tese	SFP	WFP
COMED	HDIG	MAT	Solidarités	WHO
COOPI	HDO	MDA	TASO	WV Int'l
CORDAID	HFe.V	NE	TEARFUND	

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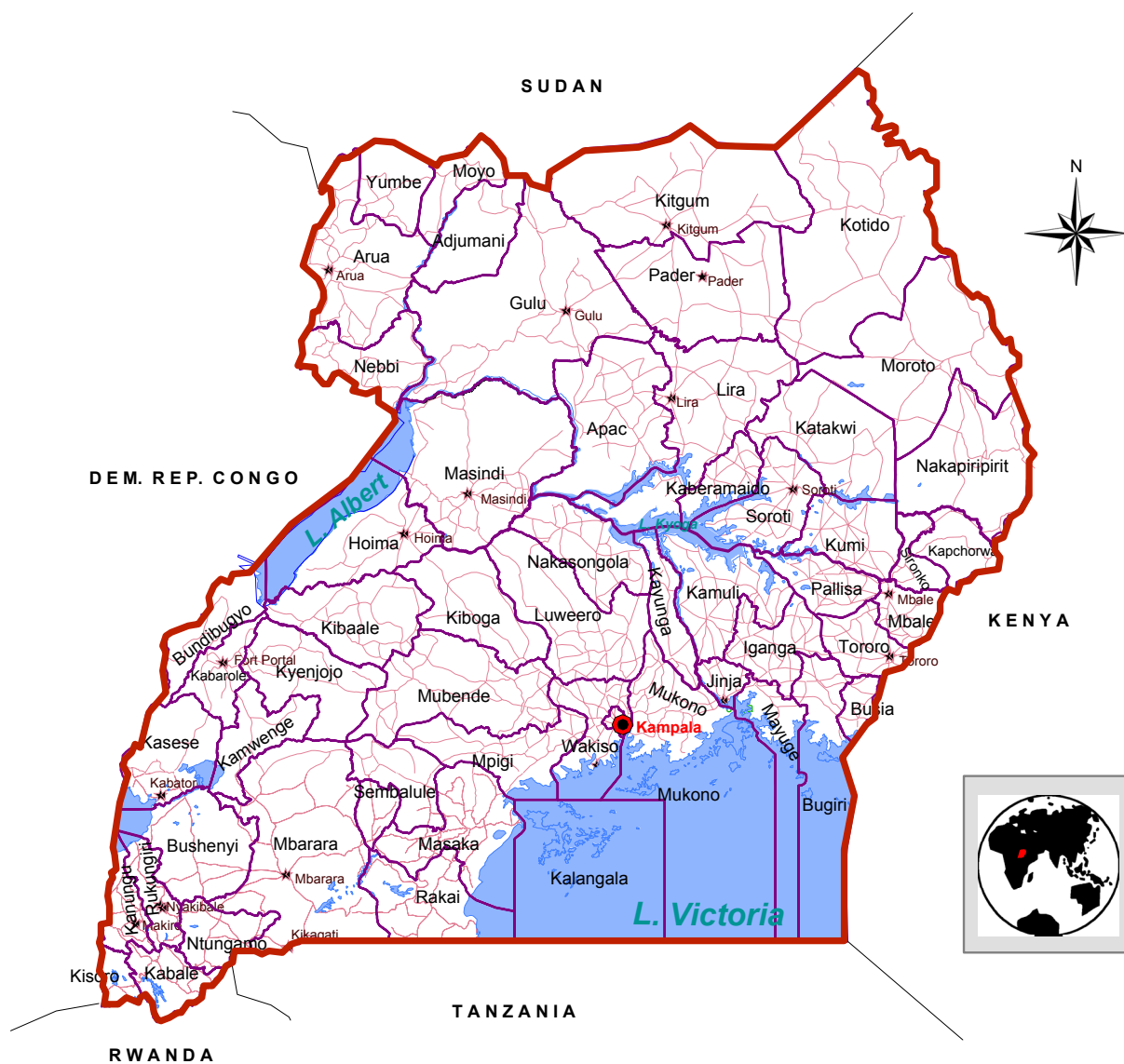
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PROJECT SUMMARY SHEETS ARE IN A SEPARATE VOLUME ENTITLED "PROJECTS"



OCHA - UGANDA

Uganda Map



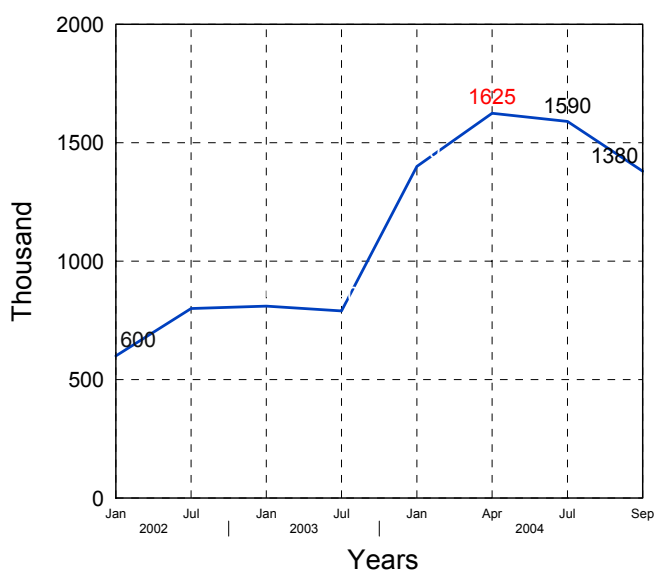
1. EXECUTIVE SUMMARY

The “war of children against children” has continued in northern Uganda and is now in its 18th year. The situation remains characterised by insecurity, large-scale displacement and limited provision of humanitarian assistance. The ongoing crisis is having disastrous effects on the health and social welfare of the people of northern and eastern Uganda. Despite recent improvements in security and increases in humanitarian presence and programmes, the most vulnerable people in northern Uganda still do not receive the minimum level of humanitarian assistance.

The United Nations Children’s Fund (UNICEF) estimates that 3,000 children have been abducted by the Lord Resistance Army (LRA) since October 2003 for use as soldiers, sex slaves and porters, adding to the approximately 18,000 abducted in previous years. The phenomenon of “night commuters,” specific to northern Uganda, has persisted. Although figures vary on a daily basis, as the movements of children and adults to town in the evening and back to their schools/homes in the morning depend on their perception of the district security situation, the number of night commuters reached a high of 52,000 in June 2004, before falling back to 44,000. The weakening of the LRA in southern Sudan and northern Uganda by the Ugandan army, the apparent lack of control by the leader of the LRA over his troops in northern Uganda and the numerous defections of LRA commanders and foot soldiers since April 2004 have brought, especially amongst some of the Acholi traditional and religious leaders and government officials, a ray of hope that the end of this long ordeal is getting closer.

At the end of September 2004, there were 1.4 million internally displaced persons (IDPs) in some 200 camps benefiting from relief food distribution, down from 1.6 million until mid-2004, the highest figure over the past two years. Since April 2004, the improvement in the security situation in the districts of Soroti and Katakwi has been persistent and people in those two districts are now receiving return food packages. Some security improvement in Gulu and Lira districts over July and August is noticeable also, but is not yet sufficient for people to return home or for aid organisations to deliver adequate relief assistance. In general, the IDP camps are largely underserved and the basic needs of some 1.6 million IDPs are still not adequately met. It will be necessary to take every possible action to improve assistance and protection in this ongoing crisis.

Number of IDPs benefiting from relief food in the conflict affected districts



Over the next two months, 100,000 to 150,000 IDPs in camps from Gulu and Pader districts will undergo a verification of registration. This follows the acknowledgement by the Government of Uganda (GoU) at the end of August 2004 that all IDPs have the right to be physically protected by the army and should benefit from humanitarian assistance wherever they are, discarding notions of “recognised” and “non recognised” camps. This acknowledgement was concomitant with the Cabinet passing the National IDP Policy, based on the UN Guiding Principles for IDPs. The implementation of the IDP Policy will be supported by the United Nations system and donors.

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Mindful of the evolution of the situation and aware of the huge unmet needs of the IDP population, the Inter-Agency Standing Committee (IASC) in Uganda identified the following strategic priorities for 2005:

- a) Improve access to IDPs, refugees and other vulnerable groups for delivery of humanitarian assistance;
- b) Improve protection for all vulnerable groups, with emphasis on children and women in accordance with international and national human rights laws and humanitarian principles;
- c) Improve provision and delivery of comprehensive and timely humanitarian assistance to vulnerable populations, respecting their dignity in a sustainable manner;
- d) Improve livelihoods and coping mechanisms for IDPs and refugees to promote self-reliance in the camps/settlements and afterwards.

The Consolidated Appeal (CA) 2005 includes projects from the different parts of the humanitarian community in Uganda. National and international NGOs (INGO) have submitted projects, complementing those submitted by the UN system. The humanitarian community of Uganda thus appeals for a total amount of **US\$ 157,686,167** to address the basic needs of more than 1.6 million IDPs and 218,846 refugees.

UGANDA

Consolidated Appeal for Uganda 2005

Summary of Requirements - By Appealing Organisation
as of 19 October 2004
<http://www.reliefweb.int/fts>

Compiled by OCHA on the basis of information provided by the respective appealing organisation.

Appealing Organisation	Original Requirements
AAH	440,000
ACF	492,647
AMREF	2,357,794
AVSI	2,172,000
CARE INT	1,068,235
CEASOP	496,491
COOPI	1,800,000
CPA-LIRA	109,706
CPAR	75,619
FAO	4,262,750
GAA	543,860
HA	329,000
IMC	1,646,233
IOM	2,476,261
NRC	483,000
OCHA	3,580,154
RUFOU	485,550
SC Uganda	1,819,210
SCU	18,400
TASO	453,937
TEWPA	29,240
UNAIDS/IOM	308,000
UNDP	1,698,389
UNFPA	545,778
UNHCR	13,363,206
UNICEF	27,777,271
UNICEF/OCHA	715,909
UNSECOORD	137,855
WACRO	360,000
WFP	86,065,572
WHO	1,574,100
Grand Total	157,686,167

<p>Consolidated Appeal for Uganda 2005 Summary of Requirements - by Sector as of 19 October 2004 http://www.reliefweb.int/fts</p>

Compiled by OCHA on the basis of information provided by the respective appealing organisation.

Sector Name	Original Requirements
AGRICULTURE	4,958,229
COORDINATION AND SUPPORT SERVICES	5,528,773
ECONOMIC RECOVERY AND INFRASTRUCTURE	1,314,156
EDUCATION	8,666,579
FAMILY SHELTER AND NON-FOOD ITEMS	4,403,409
FOOD	86,065,572
HEALTH	14,295,702
MINE ACTION	1,117,558
MULTI-SECTOR	15,270,706
PROTECTION/HUMAN RIGHTS/RULE OF LAW	6,216,679
SECURITY	137,855
WATER AND SANITATION	9,710,949
Grand Total	157,686,167

2. 2004 IN REVIEW

2.1 CHANGES IN THE HUMANITARIAN SITUATION

More than 1.6 million IDPs live in more than 180 camps and temporary shelters that were set up as long as eight years ago and were never intended for long-term use. Many settlements are developing problems similar to those of small cities, but without the resources needed to address them. All camps are highly congested and over-crowded, and living conditions are squalid. Limited water supply and low sanitation have led to disease outbreaks, contributing to increased morbidity and mortality. Children and women, who comprise 80% of the IDPs, are the most vulnerable groups.

Security: From January to June, there was a serious worsening of the security situation as LRA rebels intensified their attacks on the displaced people in Gulu, Kitgum, Pader and Lira districts. The situation of IDPs further deteriorated, making the conflict in Uganda one of the worst humanitarian crises in the world. Killings and abductions continued unabated on a daily basis. In the first half of the year, only Teso region experienced reduced activity by the LRA, and saw the beginnings of a return home by IDPs.

The most significant and brutal LRA attack occurred on 21 February in Barlonyo, a non-recognised IDP camp in Lira district. According to local authorities, almost 300 people were massacred. The immediate consequence was an increase in ethnic tension and clashes between groups of Langi and Acholi people (the LRA is largely composed of ethnic Acholi). However, calm between the communities was quickly restored. Exasperated by the LRA atrocities and by what was perceived as an insufficient reaction by the government to the emergency situation in the north, the Parliament passed a motion asking that the war-ravaged areas of northern and eastern Uganda be declared disaster areas. This motion was supported by the Donor Group on Northern Uganda, Amnesty and Recovery from Conflict (DG NARC). The Cabinet advised that Parliament had no constitutional authority to declare any part of Uganda a disaster area and that such power only lay with the President, who said there was no justification for the resolution.

In early March, the governments of Uganda and Sudan renewed their bilateral military protocol and signed a three-month extension of their military agreement. Operation Iron Fist II (OIF II) allowed Ugandan troops to pursue the LRA across Sudanese borders. OIF II had two repercussions: the renewed pursuit of the LRA in southern Sudan significantly weakened the rebels as their bases were overrun; and the increasing pressure forced the LRA to cross from Sudan to Uganda, resulting in more attacks on villages and IDP camps as the rebels raided for food and recruits. In April, the LRA entered Adjumani district, and carried out 40 attacks on refugee settlements, leading to the displacement of 25,000 refugees – one-third of the refugee population of the district. A similar number of Ugandans was also displaced, but was accommodated by host communities.

Since July, there has been a marked improvement in the general security situation following high rates of LRA desertions, partly as a result of OIF II, a trend that started in April and included both middle-ranking commanders and soldiers. LRA attacks on camps became less frequent, creating a feeling, especially among government officials, that the LRA had been significantly weakened and that the war was about to end. However, the security in Gulu, Kitgum and Pader districts has not yet improved enough to have a positive impact on the humanitarian situation.

Access by aid organisations to affected populations: The unpredictability of the LRA has created a strong fear amongst the population and aid workers alike that attacks could take place at any time. As such, this has generally limited access to camps. A number of aid agencies reach IDP camps with military escorts from the Uganda People's Defence Force (UPDF); these are considered a deterrent to LRA attacks. However, a number of organisations such as Médecins sans Frontières (MSF), Aktion Afrika Hilfe (AAH), Canadian Physicians for Aid and Relief (CPAR), International Committee of the Red Cross (ICRC) and the Uganda Red Cross (URC) do not use escorts. During 2004, and particularly since July, access has improved in Teso, Lira and Gulu, but has remained relatively unchanged (and thus difficult) in Kitgum and Pader.

Night Commuters: The average daily number of "night commuters" represents an indicative barometer of people's perceptions of their household safety in Gulu, Kitgum and Pader. In June, the number of night commuters peaked at 52,000 in Gulu, Kitgum and Kalongo towns, an increase of 15%

on average compared with the beginning of the year. By the end of August, the numbers in Gulu, Kitgum and Pader had fallen somewhat, to 44,000.

IDP camps: Until August, there was general agreement that two kinds of camps co-existed: camps recognised (or “gazetted”) by the government, which were physically protected in varying degrees by the UPDF and/or militia, and benefiting from the World Food Programme (WFP) food distribution and some humanitarian assistance; and non-recognised camps (“non-gazetted”), which were not permanently physically protected by the UPDF or militia and which did not receive direct food distribution, although some IDPs were registered in nearby camps and were receiving food assistance there. Unrecognised camps, particularly in the Acholi sub-region, were easy targets for the LRA throughout the year. On several occasions when such camps were attacked by the LRA, the army generally explained the casualties by noting that the camps were “unrecognised” and as such were not protected. Conditions in these camps were very poor, as IDPs did not benefit from much humanitarian assistance.

To address this difficult problem, the Humanitarian Coordinator engaged the First Deputy Prime Minister on the issue over the past months, whilst the Gulu Protection Working Group took up the issue with the local government. In a positive step, the First Deputy Prime Minister confirmed to the Humanitarian Coordinator at the end of August and again at the Protection of Civilians workshop on 7 September that the GoU was responsible for the security/physical protection of all its citizens and that assistance should be given to all IDPs, regardless of where they lived, and subsequently discarded the terms “gazetted” and “non-gazetted” camps. As a result, it will be necessary to re-evaluate the number of IDPs. It is possible that there could be more than two million displaced people in northern and eastern Uganda, taking into account all IDPs living in previously unrecognised camps – 17 in Gulu district, with around 80,000 people; 11 in Pader (30 to 40,000 people), five in Lira, 30 in Apac (100,000 people, mainly living with host communities), plus unknown numbers of displaced people in Masindi.

Resettlement and re-integration of ‘returnees’ (former LRA rebels/former abductees): Children and adults, male and female, have been reporting to the UPDF and to reception centres at a high rate for the past three months. The capacity of the children’s centres is adequate, but the capacity for adults is insufficient. There are concerns within the aid community that returning former LRA soldiers, after going through the reception centres and receiving amnesty, could be integrated in a separate battalion without having the choice not to do so, without adequate screening, and without a transparent civilian oversight mechanism. Others could be resettled with their families in a former government agricultural research station close to Gulu, instead of being reintegrated into their original communities.

Sexual gender-based violence (SGBV) and exploitation of displaced girls and women have been reported to aid workers across the conflict-affected areas, including in IDP camps, the night commuters’ sites, public places, etc. There are few established child (and women’s) protection agencies or networks, and victims find it difficult confidentially to report for medical treatment or counselling.

Human Immuno-Deficiency Virus / Acquired Immuno-Deficiency Syndrome (HIV/AIDS): The prolonged displacement and poverty, coupled with the weakening cultural traditions and values, have worsened the problem of HIV/AIDS. Official figures are still lacking from the conflict-affected districts, but Lacor Hospital AIDS Control Programme (ACP) surveillance figures indicate that prevalence rates amongst mothers attending the ante-natal clinic range between 10 and 12%,¹ which is nearly twice the national rate of 6.2%².

International Criminal Court: A team from the International Criminal Court (ICC) arrived in Uganda in August to prepare for the investigation of crimes committed in the conflict between government troops and the LRA. This followed a government request at the end of 2003 to the ICC to investigate the crimes committed by the LRA rebels. However, local and international human rights groups and religious national groups urged the ICC to investigate crimes by all sides in the conflict, including those committed by the Ugandan army. The government has pledged support for the ICC and promised to prosecute officials implicated in crimes. Nonetheless, religious leaders and civil society groups are worried about the timing of the ICC investigation: they are concerned that it could disrupt the amnesty

¹ HIV Seroprevalence in Northern Uganda: The Complex Relationship between AIDS and Conflict, by Dr. Filippo Ciantia.

² The State of Uganda Population Report 2004, p. 52.

process and discourage the LRA, especially its top commanders, from surrendering for fear of being prosecuted.

Peace talks: The recent increase in defections from the LRA ranks is viewed as a sign of the positive impact of the Amnesty Act, which was renewed on 17 August for a further three-month period. President Yoweri Museveni issued several statements reiterating the government's willingness to hold talks with the LRA leadership either directly or through intermediaries, in order to reach a peaceful resolution to the conflict. Several attempts to open direct talks with the LRA were made, but have yet to result in success.

2.2 PROGRESS AND OPERATIONAL CONSTRAINTS FOR 2004

Improved access to IDPs, refugees and other vulnerable groups for delivery of humanitarian assistance: After deteriorating early in 2004, access has improved in the middle of the year in most districts. In Teso sub-region, all agencies have been able to travel without armed escort since April. Access in Lira has also improved. Non-Governmental Organisations (NGO) travel without escorts in the south, and the UN is assessing whether it can adopt the same approach. In the north of Lira, NGOs travel further to the advice of the UPDF, but have never been prevented from travelling. In Gulu, Kitgum, Pader, Lira and Apac districts, UN agencies use armed escorts to access all camps. WFP visits each camp in Gulu district once a month. In Pader and Kitgum, food distributions take place every second month due to bad conditions of the roads and/or difficulties in arranging adequate escorts. NGOs operating in Gulu have been increasingly able to access more and more of the camps (now 25 out of 33 camps) without escort, using military information cross-checked with their own sources. UNICEF will have two armoured vehicles operating in Gulu from October to access the most remote camps. In Kitgum, all NGOs use armed escorts with very irregular access, more often due to the non-availability of escorts than to security difficulties. ICRC is the only organisation in Kitgum that does not use escorts. Although access in Pader remains difficult, there has been an opening of the district. More and more NGOs having been accessing camps with or without escort, whilst until April, only WFP regularly visited the district.

The UN has also attempted to address the question of access directly with the LRA. Despite an exchange of letters from both sides, no progress has yet been achieved.

A recurrent constraint on access has been the UPDF's inability to provide sufficient military escorts, causing agencies to cancel planned humanitarian operations. Aid organisations also have to hire vehicles to transport the escort soldiers and feed the soldiers for the day. In the most isolated and insecure areas, access for the delivery of non-food items (NFI) and basic services is irregular, resulting in dramatic consequences for the IDPs in these sites. In a more positive development, the UPDF has deployed "civil military liaison" officers, known as "IDP monitors", in Gulu, Kitgum, Lira and Pader. This has improved the flow of information and led to a better understanding between the military and the aid community.

Starting in April 2004, the creation of an NGO transport service from the capital to northern Uganda helped open up areas for humanitarian operations like Lira and Kitgum. However, the current lack of funding for that air operator has cut short the possibility of scheduled flights to the north. This hampers aid workers' mobility between the affected districts and the capital. The rehabilitation of the Pader airstrip and the anticipated construction of an airstrip in Patongo should further open up Pader, which was a "forgotten district" until very recently.

Finally, there were no significant constraints to access refugee settlements, except during the LRA attacks in Adjumani. This constraint on access was short-lived as a large deployment of military in the area quickly re-established sufficient security.

Improved protection for all vulnerable groups, with emphasis on children, in accordance with international and national human rights laws and humanitarian principles: Through the leadership of the Humanitarian Coordinator in his discussions with the GoU, awareness of protection issues increased among official and humanitarian duty bearers (government, districts, military, UN agencies, NGOs and donors). In the field, as a result of the deployment of UNICEF child protection officers, the work of OCHA field staff and the active engagement by some INGOs (eg. Norwegian Refugee Council [NRC], Save the Children [SC] and Oxfam), this work has been supported by inter-

agency protection working groups established in Gulu, Kitgum and Lira. In Gulu in particular, there has been some progress towards joint advocacy and response to core issues such as SGBV. UNICEF and SC provided protection training to officers in the 3rd and 4th Divisions. However, there is still progress to be made towards developing a common understanding of protection, a process that has been aided at the national level by a “Protection of Civilians in Armed Conflict” workshop in early September. The finalisation of a matrix for implementation of the recommendations of the workshop is underway and will be taken up in the districts. District level protection working groups require technical support, and common district and national advocacy strategies still require elaboration, both of which will be helped by the planned recruitment of three UNICEF protection officers, to be deployed at the district level, and of an Office for the Coordination of Humanitarian Affairs (OCHA) protection adviser at the national level. UNICEF and OCHA are collaborating to address the inter-agency “protection gap” that existed at the start of 2004, and are supporting the government to assume its protection responsibilities. This requires a careful strategic mix of appropriate advocacy and capacity-building, informed by accurate information on the nature and pattern of protection concerns.

The advocacy developed with the GoU and at field level on the protection of the IDP population also led to the Cabinet’s passing of the IDP policy on 25 August, the recognition by the GoU that all IDPs in all camps should be physically protected and should receive adequate humanitarian assistance, the UPDF reviewing the adequacy of the physical protection of the IDP camps, and an increased involvement of the districts in a better organisation of night commuter shelters. Other factors such as the extension of the amnesty granted to the LRA encouraging rebels to surrender, the return of ICRC to the north, and the significant improvement in the security situation in Teso sub-region since April are also positive elements that will assist in the continued development of the protection of all vulnerable groups.

Improved provision of comprehensive and timely life-saving humanitarian assistance to vulnerable groups: The obvious fact is that camps are still largely underserved. Needs are still overwhelming, particularly in the health, water and sanitation sectors. IDPs in the Acholi sub-region are still dependent on food relief for more than 75% of their needs on average, due to the longstanding displacement and the erosion of their coping mechanisms. An IDP in a camp generally collects less than five litres of water per day, far below the SPHERE (Humanitarian Charter and Minimum Standards in Disaster Response) standard of 15 litres/day in an emergency situation. Thousands of children still gather under makeshift schools in camps and do not get any education in such circumstances. Children continue to suffer from frequent illnesses, despite the Child Days in May in which the District Directorate of Health Services (DDHS), assisted by UNICEF, implemented an immunisation programme for children under five, while providing Vitamin A supplementation to children 6 months to 5 years of age and deworming medicines for children 1 year and above, and the training of close to 2,000 community resource persons (CORPS) to deal with the most common childhood illnesses. The Global Acute Malnutrition (GAM) rate in Kitgum IDP camps ranges from 7.4 to 18.3% of children under five, and in Pader from 4.4 to 12.2%, which is significantly higher than the 10% that signifies a nutrition emergency (SPHERE standards). There has been limited focus on HIV/AIDS programme setting and implementation. Inadequate government capacity (human and financial) to respond to the emergency continues to be a major limiting factor.

Visits by senior UN officials and international donors to the affected districts have acted as eye-opener at the national and international levels. The increased presence of UN and NGO international and national staff in the affected areas enabled sharing more accurate updates and monitoring the situation through inter-agency assessments, particularly after crises such as rebel attacks and camp fires, resulting in the immediate provision of assistance to the victims. However, there is still not enough assistance reaching camps.

The UN system has consistently advocated for the GoU to agree to allow for more flexibility on conditional grants to be disbursed by the districts following the IDPs’ emergency needs. The Ministry of Health (MoH) and the Ministry of Water now use this approach in the conflict-affected districts. Recent support to the District Disaster Management Committees (DDMC) in Gulu, Lira, Soroti, Kitgum, Pader and Apac helped focus their attention and work towards addressing the plight of IDPs in camps.

2.3 FINANCIAL OVERVIEW

The 2003 CAP totalled US\$ 148.1 million, of which US\$ 123.6 million were received, representing 83.4% of the total. The 2004 CAP totalled US\$ 142.8 million, of which USD\$ 104 million were received as of 19 October 2004 (72.8%). For further details on CAP contributions, please see Annexes I and II.

2.4 LESSONS LEARNED

In June 2004, at the CAP 2005 workshop with UN agencies, NGOs, government/district officials, civil society organisations, and international organisations, the following key lessons were identified.

- **Involvement of local authorities in the definition of the strategic priorities and in their implementation and monitoring:** The government is the central coordinating body for dealing with humanitarian issues. The participation of government officials from the affected districts at the CAP workshop was important for their input into the Common Humanitarian Action Plan (CHAP) priorities. It is essential to have their participation in the elaboration of the response plans at district level and their support and facilitation for the implementation of humanitarian programmes.
- **Lack of understanding of the CAP:** So far, the Consolidated Appeals Process (CAP) has been seen as a top-bottom process. NGOs, and particularly local NGOs, have a perception that the CAP is a UN process for funding UN agencies; this may explain their limited participation. Donors should use the CAP as a coordination tool and promote more NGO cooperation towards the CAP, as indicated in the Good Humanitarian Donorship Initiative. OCHA will strengthen efforts to disseminate clearer information on the CAP and its benefits, and support a bottom-up approach. The same approach should also target government officials.
- **Government support to District Disaster Management Committees (DDMCs):** DDMCs lack adequate human and financial capacity for disaster management coordination. The aid community needs to advocate for the adoption of the Disaster Management Bill to enable the allocation of a budget for disaster management and preparedness, including support to DDMCs. The UN system should look into the possibility of getting involved in capacity-building programmes.
- **Limited capacity of local NGOs:** The work of local NGOs and their participation in the CAP is limited, yet they are the key links to the affected communities. Strengthening the linkages between local/international NGOs, UN agencies and donors in implementing joint programmes should come out of a stronger partnership between national and international NGOs. One of the results would be the development and submission of joint projects in the CAP.
- **Need to focus on all affected districts:** Through 2004 there has been insufficient focus on some districts, especially Pader, mainly because of inaccessibility due to insecurity. UNICEF, OCHA and WFP are working on establishing offices in Pader and are committed to working in the district. Apac also deserves more attention, as there are an estimated 100,000 displaced persons in host communities or settlements.

3. THE 2005 COMMON HUMANITARIAN ACTION PLAN

3.1 THE CONTEXT AND ITS HUMANITARIAN CONSEQUENCES

3.1.A The Context

Uganda is known for its remarkable economic growth, which has averaged 6.3% per annum over the last four years and benefited all regions outside of the conflict-affected districts.³ In contrast to this economic progress, northern Uganda suffers from what UN Under-Secretary General for Humanitarian Affairs and Emergency Relief Coordinator, Mr. Jan Egeland, described as the “world’s biggest forgotten emergency”, with more than 1.6 million IDPs in eight districts. The conflicts (the LRA rebellion in the north and north-east and cattle rustling in Karamoja) prevent the people of the north from benefiting from the improvements in the macro-economic situation witnessed in the rest of the country. In this regard, President Museveni recently unveiled a 12-point plan for the rehabilitation of the north.

The LRA rebellion has four main characteristics. First, it is a struggle between a rebel group without a clear political agenda and the government. Second, it is a conflict between the predominantly Acholi LRA and the wider Acholi population of the north who largely bear the brunt of the abductions and violence. Third, it continues the north-south divide that has marked Ugandan politics and society since independence. Finally, the conflict has been fuelled by animosity between Uganda and Sudan with accusation of supporting the rebellions on the other’s territory.⁴ Both countries have continuously renewed the agreement originally signed in March 2002 allowing the UPDF to pursue the LRA in southern Sudan. Recent surrenders of rebel commanders and the reduced level of violence in the north may indicate some success of OIF, although the reluctance to surrender by most of the top LRA leadership is a reminder that the war is not over. The on-going investigations by the ICC will not be confined to the role of the belligerents but may also look into the roles of countries what have supported the conflict. In view of its precarious international standing, Sudan might want to further distance itself from the LRA, thus contributing to a reduction in tension between the two countries.



A hut burns after an LRA attack on an IDP camp in Kalabong trading center, Namukora sub-county in Kitgum district, northern Uganda on 3 June 2004.
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The conflict with the LRA often overshadows the situation in the eastern sub-region of Karamoja, which suffers from cattle rustling exacerbated by the proliferation of small arms across the sub-region’s international borders with Sudan and Kenya, as well as from cyclical drought. Life-saving drought relief food assistance for 535,000 people was required from February to June 2003, and is again needed for 125,000 drought-affected pastoralists in late 2004. The level of rainfall in late 2004 will determine whether the Karimojong people face a major drought-induced humanitarian crisis. According to a recent report from the Uganda Ministry of Agriculture and Animal Industry, the March to May 2004 rains were short, inadequate and unevenly distributed in most parts of the country, resulting in reduced harvests. The population in the northern and northeastern parts of the country, including those IDPs who had access to their fields in Kaberamaido, Katakwi, Soroti and Lira districts, are at risk of crop failure due to the poor rains.

In terms of refugee returns, the implementation of the protocols signed between the Sudan People’s Liberation Movement/Army (SPLM/A) and the Government of Sudan will be a determining factor for the voluntary repatriation and reintegration in Sudan of Sudanese refugees. However, the United

³ Common Country Assessment of Uganda 2004, p. 5.

⁴ International Crisis Group: Northern Uganda: Understanding and Solving the Conflict, 14 April 2004.

Nations High Commissioner for Refugees (UNHCR) will not facilitate any repatriation of Sudanese refugees until the second half of 2005. A tripartite agreement was signed between Uganda, Rwanda and the UNHCR in December 2003 to repatriate Rwandan refugees. So far, 1,200 refugees returned between January and May 2004. UNHCR indicates that 18,000 refugees remain undecided on their return to Rwanda.

Uganda's donor partners have remained engaged with the government on various issues, ranging from the need for a speedy and peaceful resolution to the conflict, the need to allow for flexibility in reallocation of funds according to local priorities in the conflict-affected districts, and more clarity on the political processes leading up to the 2006 elections to allow for a smooth and transparent transition to multi-party democracy.

3.1.B The Humanitarian Consequences

The immediate consequence of the escalation of the LRA activities over the last year has been a drastic rise in the number of IDPs registered for WFP food assistance, from 1.2 million at the time of writing of the 2004 CAP, to more than 1.6 million in July 2004, with a decrease to 1.4 million at the end of September 2004. In the first half of the year, IDPs in search of safety regrouped around UPDF detachments, forming non-recognised camps that received only ad hoc humanitarian assistance (in Gulu district alone there are 17 such camps).

The total number of "night commuters," civilians – mainly children – who, every evening, leave their villages for the relative safety of the towns of Gulu, Kitgum and Kalongo, and return very early in the morning, thus providing a good indicator of how the population perceives its own security, reached an all-time high of 52,000 in June. This figure does not include IDPs who seek safety within their own camps, for example in health centres. The night commuters' flow had decreased to 44,000 in August, an indication of the recent improvement.

The night commuter phenomenon has added to the disruption of the social and family fabric that traditionally provides protection to children and young people. Consequently, the children, and especially the girls, are exposed to various forms of exploitation and abuse, including child labour and SGBV, with the risk of contracting Sexually Transmitted Diseases (STDs), including HIV. Uganda is known for having reversed prevalence rates for HIV/AIDS at antenatal clinic sites from 18% in 1992 to 6.2% in 2004. The situation in northern Uganda is rather worrisome, with prevalence rates among mothers attending ante-natal clinic services at Lacor hospital estimated at approximately 12%.⁵ The long-term displacement of the population is exacerbating poverty and disrupting traditional and cultural practices, thus putting young men and women at greater risk.

Most IDP camps in northern and eastern Uganda are best described as underserved. Camps such as Pabbo, which housed more than 50,000 people, have had many fire incidents during the dry season, destroying thousands of huts. Because of the insecurity due to LRA attacks, basic services are not sufficiently provided in the camps, be it by government or humanitarian agencies. Many professional civil servants have abandoned the communities where they worked because of insecurity. Camps are seeing the collapse of the rule of law and of the police.

Despite a noticeable reduction in LRA activities in northern Uganda over the last two months, access to IDP camps by humanitarian agencies is still limited, making delivery of essential services difficult. In some areas, access to IDP camps is only possible through government-provided armed escorts for the delivery of WFP's life-saving food assistance. Agencies can join WFP food convoys but find it difficult to implement other activities alongside food distributions, which often preoccupy the attention of the beneficiaries. As insecurity along the roads and in camps in conflict-affected districts persists, it is important that the government increases, as necessary, the availability of armed escorts to enable simultaneous delivery of different services to different camps, and that patrols along the roads are providing security for convoys. As it is difficult for the affected populations to access their fields, patrols could accompany people from their camps to their fields, thus reducing their dependency on relief food.

⁵ See note 1.

The expansion of the activities of the LRA in June 2003 prompted the formation of ethnic militias in the Teso, Lango and Acholiland sub-regions to support the UPDF in combating the rebels in their respective sub-regions, and also to provide security to the camps. While these militias, most notably those in Teso, have helped to contain LRA activities in their sub-regions, there are reports that many have been involved in abusing or harassing the same civilians they are supposed to protect. The phenomenon also could lead to the proliferation of small arms in the community, which could endanger community security.

3.2 SCENARIOS

The best-case scenario: OIF II is successful in dislodging and severely disrupting the LRA activities, bringing large improvement in the security. The full implementation of the agreements in southern Sudan pressures the LRA into accepting a ceasefire. Senior LRA commanders surrender with their troops. The IDP Policy sets the framework for the government and the aid community to facilitate a smooth return of IDPs to their areas of origin. Of the population of IDPs, 40% return home during 2005. Peace in Sudan encourages voluntary repatriation and resettlement of IDPs and refugees. Access to the vulnerable population is greatly facilitated and services increase. IDPs access their land and become less dependent on relief food.

The worst-case scenario: Failure of OIF II and of the Sudanese peace process leads to increased insecurity in northern and eastern Uganda, resulting in new displacement and increasing the number of IDPs to 2.5 million, displacement of refugees in West Nile to 94,000, and to displacement in southern Sudan.⁶ Tensions along Uganda's borders with Rwanda and DRC increase and contribute to another refugee influx into Uganda. Humanitarian conditions substantially worsen with the continued inability of the aid community to properly access IDP camps, resulting in potential outbreaks of epidemics. A failure of the first and second harvests in affected areas and serious supply gaps in the WFP pipeline increase malnutrition rates amongst displaced children. Karamoja suffers another major drought, resulting in increased food insecurity.

The most likely scenario: Over the next year, OIF II has positive results. Coordinated LRA activities decline in the northern districts, although insecurity continues due to small roving LRA groups. This keeps the level of displaced people at between 800,000 and 1 million in 2005. Teso sub-region remains quiet, with incursions of Karimojong warriors due to lack of water in their areas. Lango sub-region, despite sporadic attacks of the LRA on the northern border with Pader, follows suit in the later part of 2005, as people wait for stabilisation before returning home. The gradual return and resettlement of IDPs in Teso and Lango sub-region starts. There is some improvement in the physical protection of IDPs in camps, as they are more secure. The number of night commuters decreases to roughly 25,000. Access to camps and agricultural lands is improved and assistance is more regularly supplied. Better access to camps and improved data collection/ dissemination and reporting improve the capacity of the aid community better to address issues such as sexual exploitation and HIV/AIDS. Reconciliation programmes are established. Advocacy efforts from the international aid community bring more international media attention on Uganda and its affected population, as well as on efforts for peacefully ending the conflict. The gradual implementation of the Sudan peace process leads to the voluntary repatriation of some 35,000 refugees from Uganda. The Karamoja region continues to suffer from localised drought, traditional cattle rustling and ambushes, as a result of the nature of the disarmament process and the fragile food security in the area.

3.3 STRATEGIC PRIORITIES FOR HUMANITARIAN RESPONSE

1. Improved access to IDPs, refugees and other vulnerable groups to ensure the delivery of humanitarian assistance

Improved security is required on the roads leading to IDP camps and in protecting the camps. A more detailed security analysis and an enhanced and productive working relationship between the humanitarian agencies and the Ugandan army could lead to more secure roads and camps. The UN will seek an agreement with the LRA to ensure that the work and assets of humanitarian agencies are respected and unhindered.

⁶ Uganda Contingency Plan meeting for the Horn of Africa Region Contingency Plan, Nairobi, 18 – 20 May 2004.

Results

Greater access should significantly improve the delivery of humanitarian assistance, reducing mortality, disease prevalence and malnutrition. Improved access would also enhance the protection and food security of displaced people through greater camp security, better land access and a stronger humanitarian presence.

Indicators

- Reduction in camp population numbers;
- Increased delivery of life-saving assistance to camps, particularly in Kitgum and Pader;
- Reduction in the use of military escorts for agencies, as security improves;
- Households are able to use more land for agricultural production.

2. Improved protection for all vulnerable groups, with emphasis on women and children in accordance with international and human rights laws and humanitarian principles

Internal displacement has doubled since 2003 and Sudanese refugees have been displaced by the LRA's activities. Displaced camps have failed to provide a sanctuary from LRA attacks. The congestion and poverty in the camps has created an environment of increased sexual exploitation and abuse, and of domestic violence.

Humanitarian agencies need to support local camp structures to revive accountable judicial and administrative oversight. More emphasis should be placed on protection coordination, with better monitoring of human rights violations. More attention should be given to conflict resolution, disarmament and the integration of former LRA fighters.

Results

Camps become a safer and secure environment for women and children. The integration of ex-LRA fighters fosters reconciliation and peace.

Indicators

- A reduction in night commuter figures, as families feel more secure in the camps;
- The government's IDP policy is implemented at a district and sub-county level;
- More para-legals are based in the camps to establish effective monitoring mechanisms on abuses and violations;
- Increase in the number of returnees.

3. Improved provision and delivery of comprehensive and timely humanitarian assistance to vulnerable populations, respecting their dignity in a sustainable manner

The quality of services for displaced people in northern Uganda is well below international standards. Poor water and sanitation coverage is endangering the health of the displaced population. The quality of education is severely compromised by congested classrooms and poorly qualified teachers. A greater investment is required in public health, with more concentration on expanding water supply and improving sanitation coverage. More outreach work is required in the camps on HIV management and improved general health services, including reproductive health services. More emphasis should be placed on camp management and design. Increased primary and secondary education provision requires a dual emphasis on infrastructure improvements and teacher training.

Results

Displaced people have a level of services more closely reflecting SPHERE standards.

Indicators

- At least 500,000 displaced have access to 15 litres of clean water a day;
- Increased access to Voluntary Counselling and Testing (VCT) services and HIV education, and more HIV awareness in camps;
- Reduced levels of acute malnutrition and reduction of case mortality rates in Therapeutic Feeding Centres (TFC);
- Increased access to basic health services;
- Increased numbers of learning centres;
- More teachers trained.

4. Improved livelihoods and coping mechanisms of IDPs and refugees through the promotion of self-reliance in the camps

There is a high dependence on food aid in the camps due to insecurity, constrained access to land and minimal economic activity. More investment and creativity is required to increase economic activity and agricultural recovery. As an interim measure, more de-congestion planning is required to create smaller camps in people's home parishes, thus allowing greater access to land.

Results

Households have improved crop yields and increased income. Malnutrition rates decrease. Dependence on relief food gradually decreases. Displaced people and refugees are able to return to their home areas.

Indicators

- Expansion of WFP food for work/assets programmes, including environmental improvement work and rural infrastructure development;
- Reduction in general food aid distributions;
- Expansion of agricultural programmes such as livestock support and seed fairs;
- Closure of camps in Teso as people return to their villages.

3.4 RESPONSE PLANS

3.4.A Agriculture

Situation analysis and priority needs

Conflicts in northern and northeastern Uganda and the recent drought in the country have brought the expected food-insecure caseload to about 2.17 million people.⁷ Well-targeted and appropriate emergency agricultural interventions should be carried out to address the situation.

More than 1.6 million people have been displaced and are prevented from practicing their livelihood, subsistence agriculture. Because of the continuous rebel attacks on camps, many IDPs have limited access to their own land, and this has increased their dependency on food aid. WFP's decision to increase rations from 65% to 75% of the minimum human dietary requirements for Gulu, Kitgum and Pader since May 2004 is indicative of this trend. Lira is in the process of revising the ration upwards from 50%. With this increased ration size, WFP faces a food shortfall of 38,000 MTs from August 2004 to March 2005. Promoting food production and self-reliance of IDPs through appropriate and well-designed emergency agricultural initiatives would complement food aid from WFP and decrease dependency.

Coupled with this situation, the first season rains have been short, inadequate and unevenly distributed in most parts of the country, especially in the Karamoja district, resulting in reduced harvests. Total national production for the first season of 2004 was estimated to have declined by 30%.⁸

HIV/AIDS adds another dimension to the food security situation, as it affects mostly people at their productive age, depleting the human capital required in subsistence agriculture. Women, who are both the main actors in subsistence agricultural activities and the main vulnerable group, should be empowered and given special focus in agricultural initiatives. Environmental degradation in and around the camps has continued due to the intensive utilisation of land by the IDPs, drastically reducing forest cover and affecting soil fertility.

In Acholi, Lango and Teso sub-regions, the major economic activities before the war were agro-pastoral. Conflict and cattle rustling have reduced the livestock population across northern and north-eastern Uganda, with districts sharing borders with Karamoja being the worst affected. The crisis has also reduced the cattle population in Gulu from 135,000 to 3,000 over the last 15 years. With the gradual return of IDPs to Lango, Teso and some parts of Acholi, there is an urgent need to support the

⁷ OCHA Mid Year Review, May 2004, WFP food requirements, page 10.

⁸ Ministry of Agriculture, Animal Industry and Fisheries (MAAIF), 2004.

livestock sector to improve nutrition and provide draft animal power to increase acreage under cultivation and reduce human drudgery. The decongestion of big camps into smaller ones and migration from urban to rural camps may increase IDPs' access to farmland in their home villages/parishes. A large number of IDPs in the Teso sub-region are ready to return to their places of origin and need support for their resettlement. In Acholi region, where access to land varies from one camp to the other, well-targeted agricultural initiatives should be designed and carried out in the first and second seasons of 2005.

A multitude of humanitarian actors are arriving on the scene as emergency situations gain visibility. Many will implement agriculture relief projects. The assistance to such a large vulnerable population will require effective coordination and technical assistance, in addition to food security information and surveillance systems. The capacities of IDPs and residents need to be strengthened so that they are able to support their households in an increasing self-reliant manner.

Strategy to address key problems

The strategies to be employed to ensure the gearing of emergency agricultural initiatives to rehabilitation, as the situation allows, will encompass: increased production and household income; improved household nutrition; promotion of environmental conservation; and strengthened and expanded coordination and food security information systems.

Activities to be undertaken to ensure that the above strategies are achieved include: provision of seeds (including high value crops) to most vulnerable households through seed fairs and vouchers; seed multiplication; intensification of sustainable production through multiple cropping, use of early maturing varieties and soil fertility maintenance; promotion of animal traction to increase acreage under production; promotion of production of dairy animals, birds, and small ruminants; fish farming, apiculture and home gardening as a means of improving nutrition and income; promotion of environmental conservation by replenishing the depleted environmental resources in and around IDPs camps through improved fallow, biomass transfer, boundary tree planting, community forestry and trees dispersed on cropland; strengthening of marketing systems and coordination at national and district levels.

3.4.B Coordination and Support Services

Situation analysis and priority needs

In 2003, coordination of humanitarian activities had clearly been identified as weak. Except for the WFP and OCHA sub-offices in Gulu and the regular visits of UNICEF's Kampala-based district staff, there was hardly any UN presence and a limited NGO presence in the conflict-affected districts. During 2004, the Humanitarian Coordinator, in concert with the United Nations Country Team [UNCT]/IASC Uganda, donor partners, and the Headquarters of UN agencies and INGOs, has raised awareness on the plight of the affected population. The UN system and donors continue to work together to engage the GoU to commit more resources to increase access to camps, enhance the protection of civilians, and work towards a peaceful resolution of the conflict. The DDMCs are still not adequately resourced, but it is hoped that the adoption of the National IDP Policy should provide them with the means to lead the coordination at field level.

During 2004, insecurity persisted in the Acholi and Langi conflict-affected districts but receded in Teso sub-region. Consequently, the humanitarian community needs to continue strengthening and consolidating its coordination and collaborative approach to address the following objectives:

- Effectively deliver humanitarian assistance to the affected populations;
- Effectively coordinate protection activities to improve protection;
- Support the transition from relief to recovery.

Presence in the field is the *sine qua non* condition to properly understand the situation in the districts and work with the humanitarian community, the beneficiaries and district structures. OCHA's Kitgum sub-office opened in December 2003, followed by the strengthening of the Gulu sub-office, the opening of the Soroti sub-office in January 2004 and of the Lira sub-office in March 2004. All offices are fully staffed and operational with an international humanitarian affairs officer and a national officer. These deployments were followed by other UN agencies, such as UNICEF with protection officers in

Gulu, Soroti and Kitgum (with Lira to follow), the Food and Agriculture Organization (FAO) with an emergency office in Gulu, and the World Health Organization (WHO) with an emergency officer for the conflict-affected districts. WFP already had offices in those locations. WFP, UNICEF and OCHA also plan to open offices in Pader in early 2005.

Strategy to address key problems

1. Effectively deliver humanitarian assistance to the affected populations: Humanitarian organisations should be able to reach IDP camps on a daily basis or stay for longer periods in the camps. So far, access to camps is only possible by either being part of a WFP convoy, and thus staying for just four to six hours a day on the ground, or travelling outside of the WFP convoy with or without military escorts. Dealing with health or protection necessitates a longer presence in camps, and in the case of protection this should ideally be done without military escort. During 2004, discussions at central and district levels and enhanced cooperation with the UPDF enabled a better understanding from the UPDF of the humanitarian principles followed by the humanitarian community. This led to confidence building and a more comprehensive flow of security information between both sides, as well as increased the willingness of the UPDF to assist aid actors in accessing camps. The support of the United Nations Security Coordinator's (UNSECOORD) field security coordination officer, his deputy and the WFP field security advisor will be of great importance in continuing the process. In Kampala, the Humanitarian Coordinator will continue advocating with the government for free and unhindered access to affected populations. Access would also be improved if the LRA indicated its willingness to respect the neutrality of humanitarian workers and agencies. Efforts to discuss access with the LRA will continue through the assistance of the humanitarian access advisor and other intermediaries. Donor support is also vital for advocating with the GoU to increase its efforts to support humanitarian convoys and deliveries and to support the aid community with adequate funding for delivery of basic assistance to the camps.

During 2004, OCHA, together with other UN agencies and NGOs, has made extensive efforts to facilitate the DDMCs' active participation in all discussions, joint assessments and missions to camps. Sector Working Groups were created or revived through the DDMC in each affected district. Issues such as protection, education, health/nutrition, HIV/AIDS and night commuters will also be addressed especially through the UNICEF protection officers in Gulu and Kitgum. In addition, it is expected that the collaborative approach can be better understood and implemented through the IASC Uganda group.

Within the OCHA office, an Information Management Unit will be fully functional by November 2004 to collect, analyse and disseminate information to all partners on the humanitarian situation. A major task to be implemented is the global registration, profiling and monitoring of IDPs. This exercise has to be led and guided by the GoU with the assistance of the aid community and coordinated by OCHA. This is particularly urgent in light of the decision to recognise all camps, and in the context of the possible return of IDPs if the situation continues to improve.

2. Effectively coordinate protection activities for improvement of protection: Considering the scale of the population displacement and the reported violations of human rights by the LRA rebels, some elements in the army or the local militia and the Karimojong warriors, protection of affected populations, in particular children and women, has to be better coordinated and advocated. Now that the Cabinet passed the National IDP Policy, one of the best tools for protecting IDPs, the Resident/Humanitarian Coordination System will support the Office of the Prime Minister (OPM) /Disaster Preparedness Department, through technical support including secondment of staff, to implement the policy and find adequate funding for its implementation. Supporting the integration of protection concerns in overall response strategies has to be considered. This can be achieved through the recruitment of a protection adviser within the OCHA office; working in cooperation with the protection network, mainly with UNICEF and partners; recruiting more protection officers; and developing more programmes for the protection of children and women, and of civilians in general. The recommendations of the Protection of Civilians Workshop held in Kampala in September 2004 will form the basis for an action plan guiding the IASC Uganda and the government at central and local levels to address protection issues.

3. Support the transition from relief to recovery in areas no longer affected by the conflict: Taking into account the favourable evolution of the security in Teso districts and the possible improvements in other districts of the north, it is equally important to look at the transition towards recovery. A contingency planning exercise will be undertaken as soon as possible by the UN system and IASC

members to reflect on possible scenarios and preparedness of the GoU and aid community to respond to the evolving situation, particularly in the area of Demobilisation, Disarmament, Rehabilitation, and Reintegration (DDRR) and with emphasis on rehabilitation and reintegration. The aid community needs to advocate for the right of all IDPs to have land for production and for the concept of voluntary return – either to return to their area of origin or to stay where they moved to. Programmes for return and reintegration have to be clearly identified and the process should be led by the GoU. Measures to support community and national reconciliation processes should be elaborated. Agencies such as the United Nations Industrial Development Organization (UNIDO) and the International Labour Organization (ILO) should join the United Nations Development Programme (UNDP) to assess their potential input.

Indicators

Objective 1: Number of visits to camps; joint assessments; information available; services delivered to the population; reduced malnutrition, mortality and morbidity rates; reduced need for military escorts; number of sector working groups in districts; joint contingency plans; regular briefing notes on key humanitarian issues; high demand for information; fully operational new field offices in Pader and Katakwi; increased demand for information products; fully operational Information Management Unit (IMU); agreement on standard data; increased number of products disseminated by OCHA.

Objective 2: Data on affected population by category; number of reports on human rights violations and protection issues reported and addressed; number of sector working groups on human rights and protection created and functional; rule of law implemented; number of local courts revived; adequate security in settlements; night commuter population reduced; number of security incidents and attacks reduced; number of casualties reduced.

Objective 3: Improved livelihoods of affected populations; reduced food aid ration; reduced size of affected populations; number of recovery activities and beneficiaries; improved infrastructure and services in areas of origin; reduced attendance in TFC and SFC programmes.

3.4.C Economic Recovery and Infrastructure

Situation analysis and priority needs

Improving the household income of the people of northern Uganda remains a challenge. Most have no access to productive resources and lack business and entrepreneurial skills. Extension services in the region are poor. High environmental degradation has occurred in IDP camps due to the high concentration of people and the poor farming methods that have been employed on the little land around the camps available for agriculture.

People in the camps are already helping themselves by engaging in a wide range of economic activities where security conditions and market access make this possible. Living conditions and the environment in and around the camps are below acceptable levels. Basic services such as education, health and sanitation urgently need improvement. A start has been made in the process of return from the camps in the Teso region. While agricultural activities in the villages are resuming, people continue to live in the camps, as they still fear that the rebels may return. Some progress has been made through the amnesty and other programmes to secure the disarmament and return of combatants and reporters, but much more needs to be done successfully to reintegrate them into civil life.

The priority needs identified under this sector are:

Livelihood promotion, training and income generation: Greater attention has to be devoted to preparations for the eventual return and resettlement of IDPs. The first steps should be taken in the IDP camps, where training, income generation and livelihood options must be offered to improve the prospects of people returning to their villages or taking up residence elsewhere. Careful planning will be required to ensure that those who go back to their villages can pursue their vocations in relative security and that they have what is needed in terms of building materials, tools, animals, seeds, credit and food stocks, to enable them to rebuild their homes, carry on economic activities and survive until the next harvest, or until the returns on their economic activities begin to flow in.

Capacity building: Capacity within the government system at all levels has to be strengthened if the camp populations and other conflict-affected groups are to be adequately assisted. While information systems need to be strengthened and national policies and programmes delivered more vigorously,

the key constraint to be addressed is the weakness of the Disaster Management Committees at the district and lower levels. These institutions must be made more active and capable of providing early warnings and organising and implementing rapid response at the local level.

Strategy to address key problems

- A “wait and see” policy should not be followed. This would only reinforce a psychology of hopelessness and dependency among the camp population. They urgently need support to help them to help themselves.
- The emergency phase should be viewed as a window of opportunity to prepare for eventual return. New agricultural practices, new economic activities and other development inputs provided in the camp setting can create the basis for their adoption and spread in the rural areas to which the bulk of the camp residents are likely to return.
- A parallel strategy of creating employment and income earning opportunities within and near the camps must be speedily initiated, even while food distribution continues. There should be no delay in undertaking needs assessments and starting development initiatives such as training and livelihood support programmes, which would assist during the emergency, and simultaneously contribute to the success of return, reintegration and recovery activities.
- Non-land-based livelihoods should be promoted, given the problems of ensuring safe access to land in and around the camps. In several camps there is no land available in the vicinity, or where it is available, there are often problems of security or questions about land rights, which curtail access to land. Also, the problem of land degradation due to unsustainable patterns of use must be tackled. It is important that non-land-based livelihoods are promoted alongside agricultural and other land-based activities. This would provide principal means of livelihood to some on their return, and subsidiary income to others.

Objectives

1. Improved household food security and incomes.
2. Enhanced/strengthened entrepreneurial and business skills among IDPs.
3. Improved health status of IDPs.

Key activities

- Provision of agricultural inputs and high-yielding, quick-maturing crop varieties.
- Promotion of extension services.
- Establishment of demonstration plots around camps.
- Training of IDPs, returnees and ex-combatants in income-generation activities and small-scale business management.
- Promote food and non-food items for work.
- Promote informal vocational skills programmes for the youth.
- Strengthen and support women and youth groups.
- Train and promote community participation in health services.

Indicators

Number of IDPs trained in income generation activities, business management and entrepreneurial skills; number of households involved in sustainable agriculture; number of demonstrations established.

Monitoring

Projects under UNDP responsibility will be monitored according to UNDP’s rules and procedures of project management but in close collaboration with the participating agencies. In addition there will be joint field visits by the sector group members.

Implementing partners

The main organisation working in this sector is UNDP, working together with the International Organization for Migration (IOM) and district partners such as the Private Sector Promotion Centres, Enterprise Uganda and NGOs. ILO, FAO and UNIDO should be involved.

3.4.D Education

Situation analysis and priority needs

Provision of education services has continued to be undermined by ongoing conflict in the northern and eastern parts of Uganda, substantially eroding the gains of the Universal Primary Education (UPE) programme. In a comprehensive assessment study on education conducted in conflict-affected areas of northern Uganda in August 2004, it was found that at least 694 of the 1,229 primary schools in the five insurgency-affected districts (Gulu, Kitgum, Pader, Lira and Apac) are still displaced. These have an estimated 290,000 children of school age. In Pader, 90% of the primary schools are displaced into learning centres, which are located in IDPs camps. The displacement of the population and schools has excluded large numbers of children from learning. Of the 620,000 school-age children (aged 6-12), an estimated 143,702 (23%) are not in school. Primary school completion rates in the eight war-affected districts - five in the north and Kaberamaido, Katakwi and Soroti in the east - are as low as 1.3%, as compared to a national average of 22.5%. Girls' education has been greatly affected, mainly due to real and perceived fear of sexual abuse which is compounded by night commuting, girls' hygiene not being addressed at home, lack of sanitary facilities for menstruation, and household poverty which forces parents to marry girls off in exchange for bride wealth, their being taken on as sex slaves by the rebels, and their spending time foraging for food instead of attending school. Their situation renders them vulnerable to continuous abuse, thereby increasing their exposure to HIV and other sexually transmitted infections (STI).

During 2004 UNICEF has supported the establishment of Early Childhood Development (ECD) centres in IDP camps to create a learning environment for young children. These centres are operational only in ten camps at present, and need to be expanded to cover the needs of 1-5 year-old children. In collaboration with WFP it is also planned to provide lunch for children attending the ECD centres. Under the circumstances, children's rights to quality education, curriculum and teachers are not being realised. Specific concerns that have emerged in the conflict-affected areas include:

- the lack of appropriate care and stimulation for young children (0-5 years) and its effect on their learning potential, overall ability to adapt to school life, tendency to drop out and academic achievement;
- looting and displacement of schools and the emergence of learning centres in various IDP camps. Several schools affiliate to nucleus learning centres, creating overcrowded conditions, management problems and pressure on facilities including access to water and sanitation, and sufficient space for play;
- insufficient number of teachers and scholastic materials: teacher-pupil ratios range from 1:150 in Kitgum district to 1:300 in Pader district, as compared to the national standard of 1:50. In Pader and Lira districts, the pupil-textbook ratio is 10:1 and 15:1, respectively. The national ratio is 3:1.

To date, UNICEF has supported the construction of about 200 classrooms in the districts of Pader (80), Apac (56), Lira (28), Soroti (25), and Kitgum (22). Training of 50 trainers and 800 teachers in psychosocial skills has been undertaken in a bid to enhance the integration of children into the school programmes. ECD services benefited about 5,000 children under five.

Strategy to address key problems

- Expand provision of low-cost ECD services for cognitive and psychosocial stimulation of 0-5 year olds in IDP camps.
- Provide catch-up education services for children who have missed out on school to facilitate their reintegration into the regular school system.
- Expand coverage of child-friendly learning spaces to facilitate quality teaching and learning at the learning centres in the IDP camps.
- Support consolidation of educational initiatives including co-curricula activities like games, sports, and drama in a bid to promote children's peaceful co-existence and effective learning.
- Protect and promote the rights of all girls in the



Displaced Pamin-yai P7 school, temporary classroom in Gulu district. © UNICEF May 2004

IDP camps to quality education.

- Promote school health and hygiene through provision of water and sanitation facilities at the learning centres in the IDP camps.

Objectives

- Increase access of age-appropriate and block-based quality ECD facilities for children in Lira and Kitgum districts.
- Facilitate access to quality basic education services for overage children who have missed out schooling in Kitgum.
- Accelerate provision of child-friendly learning spaces for primary school-age children in the IDP camps, including support for recreation activities.
- Support the development of a psychosocial teaching-learning package that promotes children's peaceful co-existence and effective learning.
- Scale-up the Girls' Education Movement (GEM) so as to mobilise and empower young people to support girls' education.

Indicators

- Number of ECD sites; children aged 1-5 accessing ECD services and trained caregivers by district.
- Number of learning spaces; number of teachers trained; and materials provided for overage children.
- Number of child-friendly learning spaces in IDP camps by district.
- Children accessing education by sex and district, schools initiating recreation activities (through clubs) by district.
- Completion of teachers' resource book and training manual on psychosocial education; number of trained trainers on psychosocial education per district, quality of teacher-student relations in the teaching-learning process.
- Number of girls trained in advocacy, leadership and mobilisation skills per district.

Monitoring

In addition to the district authorities, regular monitoring/supervision visits and district and school based records, the objectives will be jointly monitored by all the partners through submission of regular progress and financial reports by the implementing partners to the appealing agencies, site visits by the appealing agencies, monitoring and evaluation exercises, a mid-year review of project proposals by appealing agencies, and review of project proposals by appealing agencies.

Implementing partners

District authorities, relevant departments in the Ministry of Education (MoE), Kyambogo University (KYU), National Curriculum Development Centre (NCDC), Uganda National Examinations Board (UNEB), development partners, NGOs, CBOs, communities and School Management Boards.

3.4.E Family Shelter and Non-Food Items

Situation analysis and priority needs

The conflict in northern Uganda has devastated the livelihoods of the population as the LRA continues to attack civilians, abduct children, loot household belongings, and burn huts. This is further aggravated by the fact that the IDP camps have experienced several serious fires in which thousands of huts have been gutted down in more than half of the total IDPs camps in Gulu for example.⁹ In response to these fires, support in terms of non-food items (NFI) was provided to the affected households.

The complex and unpredictable security situation has forced people to continued encampment with limited access to essential household and shelter items through regular humanitarian assistance. In the affected districts as many as 90% of the population live in IDP camps. In recent months, some camps were established which were not recognised by the authorities and hence had no protection or any basic infrastructure. It is estimated that in Gulu district 85,000 to 100,000 persons live in such camps and do not receive regular humanitarian assistance, including NFIs. This should change with

⁹ At least 3,081 huts from various IDP camps were burned down in March 2004 (NRC April 2004).

the government's decision to recognise all camps. The situation requires effective, strategic and regular support beyond the current emergency interventions. Even if peace were to return, it is expected that the displaced populations' needs for non-food items will be significant and IDPs will remain dependent on humanitarian assistance during the resettlement and recovery phase.

A Rapid Needs Assessment in Gulu in recognised and unrecognised camps in the areas of nutrition, health, education, water and sanitation, human rights, night commuters and security indicates that many households lack basic household utensils, exposing them to health risks and hampering their well-being.¹⁰ Plans to decongest some camps may raise needs for livelihood items.¹¹ In education, lack of both teachers' and pupils' material and other NFIs has partly contributed to high drop-out rates. The need for NFIs remains equally evident in reception centres, in TFC and in night commuter centres. Water and sanitation, electricity and shelter are in short supplies in the centres. In Kitgum 30% of the night commuters sleep in the open. Facilities housing night commuters find it difficult to sustain costs for utilities such as electricity and water. The distribution of household and shelter items has formed a key part of the response to needs of children going through reception centres for formerly abducted children, in night commuter shelters and in primary schools.



A woman builds a new shelter in Amida camp in Kitgum district, northern Uganda after LRA attacked the camp in February 2004.
© UNOCHA Uganda

Strategy to address key problems

- Systematically target all the vulnerable communities, including those in ungazetted camps, based on rights and common standards rather than in response to an event;
- Apply a rights-based approach as well as gender sensitivity to ensure IDPs are supplied with NFIs based on need;
- Devise flexible, modulated NFI packages using Sphere standards, which meet the specific needs of the different target groups;
- Improve the coordination, standardise the NFI distribution and ensure stocks are maintained for different purposes;
- Sensitise communities on prevention of fire occurrences and set up an emergency preparedness plan on fire prevention and management in IDP camps;
- Assist public facilities housing night commuters to sustain utilities such as electricity and water;
- Expand monitoring and reporting systems to ensure night commuters have access to adequate and quality NFIs for health and safety.

This approach will enable the humanitarian community to allocate resources according to the priority needs of the most vulnerable in emergency, protection and recovery/development programmes. It will also encourage and support initiatives by other partners, enhance holistic planning and minimise duplication of service delivery.

Objectives

- To contribute to improved quality of life and protection of vulnerable IDPs, especially women and children, through increased access to essential NFIs for children in primary schools and TFCs, formerly abducted children, night commuters and households in camps;
- To ensure that the survival and basic development needs of the most vulnerable are met in the area of essential household and shelter items.

¹⁰ NRC-UNICEF assessment in gazetted /ungazetted camps in Gulu District 2004 (NRC reports March-July 2004).

¹¹ Decongestion plan of Pabbo IDP camp to two new sites: Jengari and Otang.

Indicators

- Number of different target beneficiaries receiving relevant and quality NFIs;
- Number of well managed and well coordinated distributions of NFIs;
- Reduced loss and waste of NFIs;
- Reduced number of fires in IDP camps;
- Increased number of pupils (especially girls) in schools;
- Reduced numbers of night commuters sleeping in the open.

Monitoring

The implementing partners, in joint collaboration with the DDMC in the respective districts, will undertake the monitoring. Monitoring tools will include submission of regular progress and financial reports by the implementing partners to the appealing agencies, site visits by the appealing agencies, monitoring and evaluation exercises, and a mid-year review of project proposals by appealing agencies.

Implementing partners

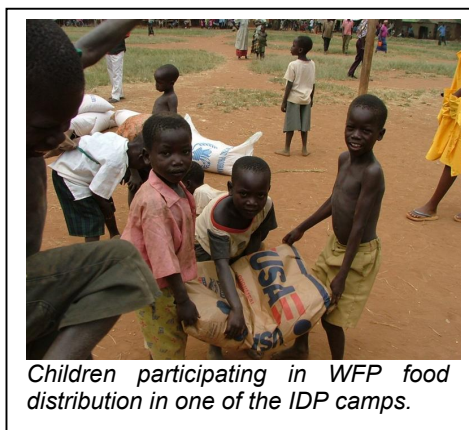
District authorities, DDMCs, NGOs, CBOs, churches/missions and communities.

3.4.F Food

Situation analysis and priority needs

The humanitarian situation in northern Uganda is currently characterised by a lull in insecurity, with isolated cases of LRA atrocities. With improvements in the security situation in Teso sub-region, more than 300,000 IDPs are currently returning to their homes and are being assisted with a three-month resettlement food ration and basic agricultural tools and seeds. In Acholi sub-region, more than 90% of the population is still displaced into cramped IDP camps with mud-walled, grass-thatched huts with limited access to food, adequate shelter or social services.

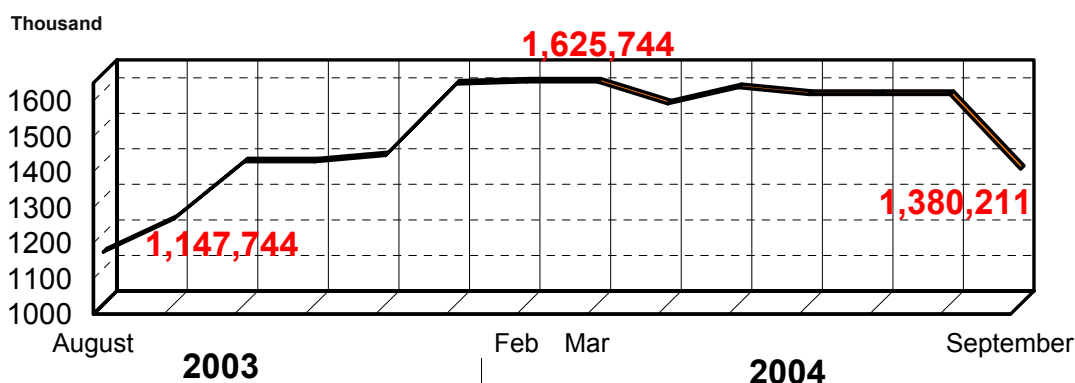
IDPs in northern Uganda are still experiencing limited food and income acquisition opportunities. Access to land is limited to a 2 km radius around the camps and tall growing cereals like sorghum, millet and maize are prohibited, as they are considered security risks. As the displaced people experience a curtailed access to their gardens, another planting season is being affected. Crops are sown in September for harvest in January. The next planting season will be in March 2005 for harvest in August/September 2005.



Children participating in WFP food distribution in one of the IDP camps.

Over 1.4 million IDPs still depend on WFP relief food to meet their net food gaps, which amount to 25-50% in Lira and 74% in Gulu, Kitgum and Pader (Acholi sub-region). According to a recent nutrition survey conducted by WFP and the Ministry of Health (MoH) in Kitgum and Pader districts in June/July 2004, the average global acute malnutrition (GAM) rates among children under five is 12.2% and 7.6% respectively, with over half of the IDP camps experiencing high malnutrition rates above 10%.

Number of IDPs benefiting from relief food during the past 12 months



In addition to the IDP caseload, 148,249 refugees are currently on food rations. Of these, 22,300 are displaced within the West Nile region as a result of the LRA attacks on the refugees in March 2004. The GoU/UNHCR Self-Reliance Strategy adopted in 1998 enhances the food acquisition strategies of refugees. Refugees are provided land for cultivation and contribute to their household food security. WFP currently provides food assistance to meet the net food gap for the refugees (between 25% for the old caseload and 100% for the new arrivals). Nutrition surveys conducted in the months of May/June 2004 established that GAM has been kept at acceptable levels (i.e., at less than 10%), except for the newly established settlement in Ikape.

Objectives

The objectives of food assistance are:

- To save lives in crisis situations through the maintenance of minimum nutritional and dietary standards of IDPs and refugees, with special attention to women, malnourished children and extremely vulnerable individuals;
- To improve the nutrition and health status of children, mothers and other vulnerable groups through assistance to households infected and affected by HIV/AIDS, so as to meet their minimum nutritional and dietary standards;
- To protect livelihoods in crisis situations and enhance resilience to shocks through support to asset-creation, to facilitate resettlement and recovery of livelihoods among IDPs and refugees upon their return homes;
- To support access to education and reduce gender disparity through reduction in short-term hunger, leading to improved school attendance and reduced school drop-outs, especially among girls.

Strategy to address key problems

Relief assistance for IDPs, refugees and other vulnerable groups will include general food distribution, supplementary and therapeutic feeding programmes, nutritional support to people infected and affected by HIV/AIDS and short-term relief assistance to drought victims.

The findings of the Emergency Food Security Assessments will be overlaid with nutrition survey results to determine food rations and basket composition for general food distribution.

Relief assistance will be linked with recovery activities to provide alternative livelihoods and create assets required for resettlement of IDPs and refugees. Successful humanitarian action to assist IDPs requires sustained advocacy for increased access, protection of civilians and a peaceful resolution of the conflict.

Recovery assistance will include three-month resettlement rations for IDPs, school feeding for displaced children, children of refugees, host communities and children resettling after conflict, Mother Child Health (MCH) programmes to provide a social safety net and Food-for-Asset (FFA) projects to strengthen short-term household food security and medium and long-term food and income acquisition.

Indicators

- Reduced and/or stabilised prevalence of acute malnutrition and crude mortality among IDPs and refugees (GAM lower than 10% and Body Mass Index [BMI] at 18.5);
- Reduced impact of food insecurity among households infected and affected by HIV/AIDS;
- Increased ability of food-insecure household to manage shocks and meet necessary food needs;
- Increased attendance and retention rate of boys and girls in WFP-assisted schools (ratio of boys and girls enrolled in WFP-assisted schools).

Monitoring

WFP staff, partners and beneficiaries will be responsible for monitoring programme activities. Monitoring will be conducted at five levels of the project cycle including bi-annual food security and nutrition assessments, commodity movement, food distribution, use of food and impact on beneficiaries, and beneficiary participation in food management.

Results-Based Management (RBM) at the WFP Country Office will strengthen monitoring and evaluation. A logical framework is prepared containing indicators relating to each objective and

programme component. Baseline surveys, evaluations and case studies will be pursued to enhance accountability of programme results.

Implementing partners

General food distribution to IDPs and refugees will be provided by WFP in collaboration with district authorities, UN agencies, NRC, Lutheran World Federation (LWF), International Rescue Committee (IRC), Samaritan's Purse, Christian Children's Fund (CCF), AAH, German Development Services and Uganda Red Cross Society (URCS).

Therapeutic and supplementary feeding assistance will be provided by WFP in partnership with MoH, UNICEF, UNHCR, International Medical Corps (IMC), GOAL Uganda, Action Contre la Faim-United States of America (ACF-USA), Save the Children (SC) in Uganda, MSF-Holland, St. Joseph's Hospital, Dr. Ambrosoli Memorial Hospital and Uganda Red Cross (URC).

Nutrition support to people infected and affected by HIV/AIDS will be provided by WFP in partnership with World Vision (WV) Uganda, MSF-France, the AIDS Support Organisation (TASO), Mulago hospital, Associazione Volontari per il Servizio Internazionale (AVSI) and community-based AIDS support groups. In partnership with the government, WHO and UNICEF, health units and institutions providing ARTs to HIV food-insecure individuals will receive food to complement the 3x5 initiative. Food support is envisaged for one year until household food security improves.

FFA will be implemented in collaboration with district authorities, NGOs and CBOs. School feeding will be implemented through the Ministry of Education (MoE) and Sports and District Departments of Education in partnership with NGOs. At the school level, school-feeding committees will be established for day-to-day management of programme implementation. WFP and UNICEF will collaborate in the establishment of early childhood development centres in IDP camps.

Risk Analysis

Implications of not implementing the response plan will be hunger, malnutrition among children, increased mortality, especially for infants, and increased vulnerability of people living with HIV/AIDS, school children and other food-insecure persons.

3.4.G Health

Situation analysis and priority needs

Uganda's infant and under-five mortality rates are estimated at 88 and 152 per 1,000 live births, respectively.¹² Malnutrition is an underlying factor in more than half of all under-five deaths annually. Morbidity and mortality rates from other common childhood illnesses are equally high, malaria, diarrhoea, measles and pneumonia being among the top of the list. The IDP population has more than tripled to 1.6 million. Malnutrition rates and morbidity/mortality from common childhood illnesses are reportedly higher in the affected districts than elsewhere in Uganda. In Kitgum GAM rates range between 7.4 and 18.3% of children under five, significantly higher than the 10% that signifies a nutrition emergency (Sphere standards), with severe malnutrition rates between 5% and 10%. Assessments done in these districts presume high morbidity from common illnesses during the preceding two weeks (69% of children under five in Pader and 46% in Kitgum had malaria, 59% in Pader and 31% in Kitgum had diarrhoea, while 58% in Pader and 40% in Kitgum suffered pneumonia). There has been a breakdown of traditional, cultural and support structures and systems as a result of the displacement of populations into camps and exposure to various degrees of psychosocial trauma. The number of child- and women- heads of households has most certainly increased. Lack of parental guidance, limited access to information and services has made children and young people increasingly vulnerable to HIV transmission, threatening to erode the progress made in HIV/AIDS control and prevention in Uganda. HIV prevalence is higher in northern Uganda than in the other parts of the country, with up to 11.9%¹³ of pregnant women in Lacor hospital affected, as compared to a national average of 6.2%¹⁴.

¹² UDHS 2001.

¹³ See (1).

¹⁴ The State of Uganda Population Report 2004.

Less than half of the population in Gulu, Kitgum and Pader has access to basic health services within five kilometres walking distance. With the escalating conflict, more health units have closed down or are only partly functional. In Kitgum, the doctor/population ratio is 1:33,000 (at the national level it is 1:18,600) while the nurse/population ratio is 1:6,800 and the midwife/population ratio is 1:7,443. Nearly a million IDPs are estimated to have little or no access to basic health services. Pregnant women in particular do not have adequate access to basic maternal health services including ante-natal and emergency obstetric care services. Insecurity hampers access to referral facilities including TFCs, which are usually located in the trading centres and towns. Furthermore, the length of stay in these referral centres makes it difficult if not impossible for caregivers to accept to accompany referred children to these centres, leaving the rest of the family members unattended. Subsequently, TFC coverage is low (less than 10%) and attrition rates are high. Children are often brought in at a very late stage, contributing to the high mortality rates that have been recorded in the TFCs (10% on average).

The priority needs of the health sector are providing basic preventive services including HIV initiatives to the population, especially women and children, living in the IDP camps; improving access to prompt and appropriate treatment including referral services; improving disease surveillance at community level; and ensuring adequate supplies and commodities. To effectively fulfil these needs, the human resource gaps at district and community levels should be addressed. Non-implementation of suggested initiatives will result in increased suffering and death of the disadvantaged populations living in the IDP camps.

With the huge health gaps in the IDP camps, the approach to solve health problems has to be an integrated one because of the lack of human resources to undertake the needed initiatives. Therefore, provision should be made for a minimum package of initiatives, which will take into account the human resource gaps at the various levels of the health system. The package should include: child health, reproductive health, preventive measures including immunisation and surveillance, as well as basic medical supplies and sanitation schemes. During 2004, UNICEF took the initiative to prepare a comprehensive response plan looking at overall needs (excluding food) for the 1.6 million IDPs. The plan looked at requirements to meet primary education, early childhood development, health and nutrition, HIV/AIDS prevention and mitigation, water and environmental sanitation (WES) and NFI requirements. The total requirements for health and nutrition were estimated at US\$ 242 million.

Strategy to address key problems

- Implementation of child health initiatives in IDP camps (including immunisation, home-based care of malaria, diarrhoea and pneumonia, Child Days twice a year for Vitamin A and deworming, malaria prevention and control, nutrition services including support to feeding centres, piloting community therapeutic care).
- Reproductive Health (RH) services (ante-natal care package in both static units and outreaches within the camps, information on and supplies for hygiene and menstruation management, information on domestic and community GBV and protection, information and supplies for post-exposure prophylaxis).
- HIV/ AIDS prevention and control: health education, VCT, prevention of mother to child transmission (PMTCT).
- Disease surveillance, support supervision.
- Improving referral linkages and capacity building for service delivery in districts and communities.

Objectives

- To immunise at least 90% of all children under one and at least 90% of pregnant women against measles, polio and tetanus, respectively.
- To provide timely and appropriate treatment against fever, diarrhoea and pneumonia to at least 80% of the children under five living in IDP camps.
- To increase to at least 80% the proportion of pregnant women in IDP camps who get at least 3 ante-natal visits and clean delivery kits at service delivery points, including outreaches.
- To ensure that at least 50% of lower level health centres (HC IIIs) in conflict-affected districts provide basic Emergency Obstetric Care (EmOC) services and have improved referral and communication by end 2006.

- To increase to at least 80% the proportion of pregnant women and young people living in the IDP camps, including night commuters, accessing HIV/AIDS control and prevention services.

Indicators

The following key indicators will be used to show whether the required standards have been attained:

- Proportion of children under five treated within 24 hours of onset of fever, diarrhoea and pneumonia;
- Immunisation coverage – Oral Polio Vaccine (OPV), Diphtheria, Pertussis, Tetanus (DPT), measles;
- Proportion of voluntary counselling and prevention of mother to child transmission;
- Proportion of ante-natal care attendance (at least three times);
- Proportion of delivery in health facilities by trained health workers;
- STD and HIV services available;
- Number of moderately and severely malnourished children identified and treated in IDP camps;
- Number of successful discharges and reduced mortality reported by TFCs;
- Proportion of severely malnourished children receiving therapeutic care.

Monitoring

These objectives will be jointly monitored by all the partners through submission of regular progress and financial reports by the implementing partners to the appealing agencies, site visits by the appealing agencies, monitoring and evaluation exercises, mid-year review of project proposals by appealing agencies, and review of project proposals by appealing agencies.

Implementing partners

Relevant departments in the central MoH, development partners, DDHS in affected districts, District Health Management Teams (DHMT), NGOs and community-based organisations (CBOs).

HIV/AIDS

Uganda is committed to the United Nations General Assembly Special Session (UNGASS) declaration on AIDS, which acknowledges the need to implement national strategies that incorporate AIDS concerns in emergency settings and to mainstream AIDS into international assistance programmes for these areas.¹⁵ The Revised National Strategic Framework of HIV and AIDS activities in Uganda for 2003/4-2005/6 considers IDPs and refugees to be at a higher risk for HIV infection and AIDS due to the social, economic and psychological breakdown of traditional family structures and support systems. This is supported by data from Lacor hospital in Gulu district, which puts prevalence at 11.9% in 2002, compared to the national average of approximately 6%. For women aged 30-34 the prevalence rate is even 21.1%.¹⁶ Prevalence among Ugandan soldiers is estimated to be around 20%. In conflict-affected areas, this rate is expected to be higher.¹⁷

The proportion of the population in IDP camps who contract STI is high (17%). Early initiation, a high level of sexual activity and the prevailing pattern of sexual interaction (survival sex) contribute to the transmission of HIV in IDP camps. Although the IDPs show a high level knowledge of the transmission of HIV through unprotected sex, there are many misconceptions about other ways of transmission of the virus.¹⁸

The conflict in eight districts in northern and eastern Uganda has been identified as the single most important factor increasing the contextual and behavioural risk of exposing children and youth to HIV and AIDS. In particular, children who are abducted by the rebels have an increased risk of HIV.¹⁹ Many children who escape the LRA rebels return with STIs.²⁰ Each night thousands of children pour into Gulu, Kitgum and Pader towns from surrounding areas to avoid abduction by the LRA. These so-called night commuters are vulnerable to sexual assault and other abuses.²¹

¹⁵ UNAIDS Fact Sheet No. 2: HIV/AIDS and conflict.

¹⁶ MoH 2003, Surveillance report.

¹⁷ HIV/AIDS as a security issue in Africa: Lessons from Uganda, ICG Issues Report No.3, 16 April 2004.

¹⁸ Baseline assessment of HIV/AIDS awareness and service provision in IDP camps in Northern Uganda, forthcoming, IOM, UNFPA and UNAIDS.

¹⁹ Save the children Denmark, 'HIV/AIDS and the Rights of children in a conflict situation', November 2002.

²⁰ And banana trees provided the shade; The story of AIDS in Uganda, 2003, UAC; World Vision.

²¹ Human Rights Watch, July 2003, Vol 15, No. 12.

Poverty coupled with increased presence of the UPDF military has also increased survival sex, as girls and young women find no alternative but to exchange sex for food or money. Rape, sexual abuse and exploitation all contribute to the transmission of HIV.²²

The 2001/2002 DDHS revealed that demographic and health indicators in the northern region are the worst in the country.²³ In Gulu and Kitgum districts only 50% of health centres are functioning and 40% of their health workers have fled because of insecurity. Many of the organisations providing relief assistance in the north focus on the immediate effects of the conflict – providing medical help and food.²⁴ As a result, HIV prevention services, such as condom provision, sensitisation and education about risk, PMTCT and VCT, are inadequate. Furthermore, they are organised irregularly and at inappropriate times, as they are provided by people outside of the camps whose access is limited. This also applies to care and support services for those infected and affected by the virus.²⁵

A number of stakeholders, governments, NGOs and donors have continued to support the conflict-affected districts in responding to HIV and AIDS. However, local stakeholders are of the view that not enough is being done to prevent the spread of HIV in the IDP communities, since the main causes of the problem are not being addressed and services are not easily accessible.²⁶ This calls for the urgent mainstreaming AIDS initiatives throughout the activities of the UN in emergency settings.

The Inter-Agency Steering Committee (IASC) Task Force on AIDS Guidelines identified 10 sectors in emergency response.²⁷ The table below summarises the sectors and the required minimum comprehensive response applicable to the stabilised phase of the emergency in the areas of conflict in Uganda. Activities will be developed in the key sectors, specifically as these relate to prevention/protection, treatment and care, including nutritional support to food-insecure households.

²² Ibid.

²³ IMC, 2004.

²⁴ Avert, HIV/AIDS in Uganda; The International development magazine; HIV/AIDS war zone.

²⁵ Ibid.

²⁶ Ibid.

²⁷ Guidelines for HIV/AIDS interventions in emergency settings, IASC, 2004.

UGANDA

Sector	Minimum Comprehensive Response
Coordination	Establish coordination mechanism Strengthen networks Continue fundraising Build human capacity; Link emergency to HIV development action; Work with authorities; Assist government and non-state entities to promote and protect human rights
Assessment and Monitoring	Set up and manage a shared database; Monitor and evaluate all programmes Assess data on KAB and impact
Protection	Involve authorities to reduce HIV-related discrimination Prevent and respond to sexual violence and exploitation Protect orphans, separated children and young people Ensure access to condoms for armed forces Institutionalise training for armed forces on HIV/AIDS, sexual violence and exploitation and non-discrimination Put in place HIV-related services for demobilised personnel Strengthen IDP/refugee response
Water and Sanitation	Include HIV/AIDS considerations in water/sanitation planning Organise awareness campaigns on hygiene and sanitation, targeting people affected by HIV
Food Security and Nutrition	Target food aid to affected and at-risk households and communities Plan nutrition and food needs for populations with high HIV prevalence Develop strategies and target vulnerable groups for agricultural extension programmes Promote appropriate care and feeding practices for PHAs Support and protect the food security of households and communities affected by and at risk of HIV/AIDS Distribute food aid to affected households and communities
Shelter and Site Planning	Establish safely designed sites Plan the orderly movement of the displaced
Health	Ensure access to basic health care for the most vulnerable Ensure a safe blood supply Provide a regular supply of condoms Manage sexually transmitted infections Ensure appropriate care of intravenous drug use Manage the consequences of sexual violence RH services for young people VCT Ensure safe deliveries Universal precautions
Education	Ensure children's access to education (boys and girls) Provide life skills-based HIV/AIDS education Monitor and respond to sexual violence and exploitation in educational settings
Behaviour Change, Communication and Information, Education	Provide information on HIV/AIDS prevention and care
HIV/AIDS in the Workplace	Prevent discrimination by HIV status in staff management (work place policy) Build capacity of supporting groups for PHAs and their families Provide post-exposure prophylaxis (PEP) for humanitarian staff

3.4.H Mine Action and Small Arms

Mine Action

The type of mine/UXO contamination in the different regions of Uganda varies significantly. The extent of the mine problem that exists primarily in the north is unclear due to the sporadic nature of mine usage by the LRA and the overall security environment. An estimated 80% of the population in the northern districts are confined to camps, which further limits the knowledge and exposure of local inhabitants. Available statistics in the north show that 385 people suffered amputations as a result of mine or UXO accidents between 1999 and 2003; this is the largest single recorded cause of disability in the region. While some emergency medical and physical rehabilitation assistance exists, coverage is limited and little follow-on vocational or psycho-social care is available.

Strategy to address key problems

- Coordinate mine action in accordance with international standards.
- Establish a data collection system accounting for socio-economic factors for decision-making and prioritisation, including accurate maps indicating contamination and cleared areas.
- Develop a national policy and plan of action on landmines and UXOs in Uganda.
- Prioritise humanitarian demining to increase access to land and facilitate the return of IDPs.
- Provide assistance to survivors of landmines and UXO.
- Increase awareness through Mine Risk Education programmes.

Risk Analysis

Based on statistics collected by AVSI, mine accidents are the most frequent cause of disability in Northern Uganda (over 800). These numbers must be seen in the context of 80% of the population confined to IDP camps with limited access to surrounding areas due to insecurity. It is expected that when the population is able to return to their homes and villages, there will be a steep increase in accidents if no action is taken. In addition, safe access to land, roads, and water points will be critical for the reintegration of IDPs.

Objectives

The immediate objectives of the sector are to improve conditions conducive to the return of IDPs, to provide assistance to land mine survivors, and to increase public awareness, particularly amongst the IDP camp populations, through MRE campaigns.

Key activities

Key activities include strengthening government institutions to improve coordination, establishing a data-collection system to quantify the landmine problem and identify priority areas for humanitarian demining, provide assistance to survivors of landmines and UXO, and increasing awareness through MRE programmes.

Indicators

- Mine Action Centre established;
- Mine Action database established;
- Number of landmines removed and safely destroyed;
- Number of landmine survivors assisted.

Monitoring

Progress will be monitored through reports from the Mine Action Coordination Working Group.

Implementing partners

Mine Action falls under the jurisdiction of the MoH in view of the focus on victim assistance and Mine Risk Education (MRE). Coordination of Mine Action activities, such as data collection, prioritisation, surveying, quality assurance and certification proved to be difficult due to the absence of a mine action centre and the lack of capacity of the MoH. UNDP provides support to the MoH to fulfill its coordination role whereas NGOs help the MoH in providing assistance the mine survivors and conduct MRE.

Small Arms and Light Weapons (SALW)

In Uganda, the conflict in the north as well as previous rebellions have resulted in thousands of weapons being in the hands of individuals, rebels, militia forces and tribal groups. The presence of

these weapons has exacerbated the problem of insecurity in communities, disrupted development initiatives, increased the number of displaced and increased government defence expenditure. At present, LRA reporters are disarmed by the UPDF upon arrival in the barracks. After an initial screening, the reporters are referred to a reception centre, following which they go through the amnesty process. There is no clear policy or capacity within the UPDF with regard to handling weapons recovered from the LRA, including potential destruction methods. The Amnesty Commission does not have the capacity to implement or oversee the disarmament component and needs urgent capacity-building support.

The situation in the north-eastern pastoralist regions of Uganda, especially among the Karamojong, presents a different kind of a problem relating to illicit SALW. The environmental challenge, mostly due to alternate wet and dry seasons, has resulted in conflicts among pastoralists for access to and control of the limited natural resources, especially water and pasture for the animals. The subsequent armed violence (cattle rustling and raids) has increased poverty conditions, increased demand for weapons, enhanced insecurity and dislocated communities to the extent that the possession of weapons becomes the main means for security and survival.

Priority needs and response strategy

The priority needs are disarmament and arms collection, stockpile destruction and public awareness raising.

Risk Analysis

Lack of action in this sector will further reduce human security. In particular, it will have a great impact on the return of IDPs if prevailing security conditions do not permit a return to normalcy.

Objectives

The objectives of this sector are to disarm LRA reporters, local militias, and other paramilitary forces, finalise national policy and update legislation on SALW, improve stockpile management, stocktaking, record keeping, support collection and destruction of SALW, raise awareness on the impact of SALW proliferation, and improve international and regional cooperation and information exchange.

Key activities

Key activities include providing capacity-building support to Amnesty Commissions; adopting legislation on SALW (Firearms bill); establishing a Central Firearms Register and starting data collection; developing weapons collection programmes; developing a public education and awareness campaign; supporting international and regional cooperation and information exchange.

Indicators

- Number of SALW collected;
- Surplus stock destroyed;
- National database established;
- Public destruction event held.

Monitoring

A Working Group on SALW will be established with a mandate of monitoring progress in the implementation of the National Plan of Action.

Implementing partners

UNDP works closely with the National Focal Point for SALW and district authorities within the framework of the National Action Plan for Small Arms.

3.4.I Multi-sector

Situation analysis and priority needs

Although the security situation in general has been calm in most of the refugee settlements in the country, it continues to be a source of concern in and around refugee settlements in the North/North West, particularly the Adjumani district. Since February 2004, increased LRA activity with more than forty LRA raids in national and refugee settlements have caused constant harassment and displacement of about 25,000 refugees and some 20,000 nationals who fled the vulnerable Southern

settlements of Adjumani district to safer refugee settlements and areas north of Adjumani town. In addition to disrupting the normal operations on the ground, such raids by the LRA have also impacted on the living conditions of the refugees and nationals in the relatively safer areas. The security constraint has led to additional costs for the operators in the affected areas. An emergency situation has been distinctly visible in Adjumani district after the displacement of refugees from their settlements. The displaced refugees had to be provided with emergency assistance in the areas where they moved. Considering the security events that took place last year and continued in 2004, it is clear that the situation continues to be very unpredictable. In view of the problematic security situation in the north, local authorities have bolstered the UPDF efforts against the LRA by organising voluntary militia, which are armed and trained by the UPDF.

West Nile Region (Moyo, Adjumani and Arua)

Out of the total refugee population of 218,846 (as of July 2003), 159,012 refugees (72.6%) live in the northwest in the districts of Adjumani (62,219), Moyo (32,515), Arua (55,528) and Yumbe (8,750). These districts are among the least developed. The refugees share infrastructures and other services with the host communities. The presence of the large number of refugees in the region has constrained the districts, especially Adjumani, which has the largest refugee population. In view of this situation and the fact that immediate repatriation was not foreseen, the GoU and UNHCR have jointly developed and adopted the SRS for the northwest in 1999. The SRS took off the ground with a major breakthrough since the beginning of 2002. Its objectives are to improve the access of land to refugees to achieve self-sufficiency in food production; reduce dependency on WFP food rations; integrate the refugee services into the government systems of service delivery in the areas of health, education, community services, environment, water and sanitation. A National Task Force chaired by OPM has been in place with the participation of UNHCR and WFP. In February/March, an independent Mid-Term Evaluation of SRS had been carried out. Based upon the findings and recommendations made by the Mid-Term Evaluation, the government has adopted a policy for pursuing a transition from SRS to Development Assistance to Refugees (DAR) through mainstreaming the refugee assistance programme into the government development planning structure both at local and national levels. The government established a National Secretariat at OPM.

South Western Region

The refugee-hosting districts in this region include Masindi, Hoima, Kyenjojo and Mbarara. The Kiryandongo settlement in Masindi district accommodated 14,903 Sudanese refugees. Other refugees are settled in a settlement in Hoima, in two settlements in Mbarara and in one settlement in the Kenjojo district. The refugee population in these settlements consists of mainly Congolese (12,007), Rwandese (19,170), Sudanese (11,250) and small number of other nationals including Somalis, Kenyans, Ethiopians, and Burundians (1,491). There are around 5,000 urban refugees. Among the urban refugees, some 267 receive material assistance from UNHCR. In the southwest, an SRS has not been officially launched but the process of possible implementation of an SRS-DAR programme of activities is being explored. Workshops with the participation of relevant district officials (both government civil servants and political heads), implementing and operational partners active in the districts, and refugee leaders have been organised to pave the way.

Joint Re-Registration Exercise

The planned joint re-registration exercise by the GoU in conjunction with UNHCR and WFP was unfortunately not feasible for unforeseen reasons. Instead, the exercise will be carried out in the settlements of Mbarara and Kenjojo districts, at least, during the fourth quarter of 2004. The registration of refugees in the rest of the settlements in other districts will be done in 2005.

Voluntary Repatriation

By the end of July 2004, a total of 184,731 Sudanese refugees were registered in Uganda's settlements and camps. It is expected that a small group of refugees originating from neighbouring areas will opt for voluntary repatriation provided the peace agreement between the Government of Sudan and the Sudan People's Liberation Army (SPLA) is concluded and an environment conducive to the return of refugees to their places of origin is created. However, most Sudanese refugees are sceptical and they might choose to wait and see until the situation is clearer. Therefore, an estimated planning figure of 35,000 refugees has been considered for voluntary repatriation in 2005.

By the end of July 2004 the number of Rwandan refugees in Uganda stood at 19,170. Subsequent to signing of a Tripartite Agreement by the Governments of Uganda, Rwanda and UNHCR, an

information campaign and the voluntary repatriation of Rwandans refugees started in 2004. Although a rather small number of Rwandan refugees had repatriated by the time of preparation of this document, necessary action will be taken for the promotion of voluntary repatriation during 2005.

Until the situation in the eastern part of the Democratic Republic of Congo (DRC) is secure, Uganda will continue to host Congolese refugees. UNHCR will assist them pursuant to the forthcoming expanded SRS-DAR programme of activities.

Refugee Bill

The Refugee Bill adopted by the Cabinet has been tabled in the Parliament in February 2004 for consideration and approval. The Bill in its present form is considered liberal, progressive and forward looking and seeks to reform the management of the refugee sector through integration of refugee matters in local and national development plans. The Bill emphasises access of refugees to social services, legal services, appeal, work, free movement and the like. UNHCR will continue to assist the government in promoting the Refugee Bill.

General Awareness

The emphasis placed by UN agencies on identifying and highlighting the needs of especially vulnerable groups will be continued. UNHCR and its partners will actively endeavour and encourage promotion of gender awareness and participation by women in refugee committees and their involvement in decision-making. Activities like educating the refugees, local authorities, and implementing partners on the seriousness of SGBV and child sexual abuses will continue.

Objectives

- To provide international protection and assistance to the refugees in Uganda and pursue durable solutions for them in terms of voluntary repatriation, local integration and resettlement;
- To continue to promote a strategy of self-reliance for Sudanese, Congolese and Rwandan refugees, and continue working towards the integration of refugee services into the national service structure in collaboration with the Ugandan Government, UNHCR implementing partners, relevant UN sister agencies, and development organisations;
- To play a catalytic role in encouraging development agencies, operational partners and NGOs to incorporate the SRS into their programme of activities to benefit both Ugandan nationals and refugees.

Indicators

Number of refugees receiving food assistance; number of refugee families registered for repatriation and helped to return home; number of community self-sustaining structures established in refugee-impacted districts; extent to which the self-reliance strategy is incorporated in district development plans; number of school enrolment of refugee children; ratio of teachers to refugee children; nutritional status; number of litres of safe water per refugees per day.

Implementing partners

In addition to participating in the UNDMT and in the Contingency Planning Forum coordinated by OCHA, UNHCR will continue to cooperate with WFP, UNDP, WHO, United Nations Population Fund (UNFPA), UNICEF, the World Bank (WB), and the International Organization for Migration (IOM). It will also play a catalyst role in assisting the government with respect to the recently adopted policy on the transformation from SRS to DAR.

3.4.J Protection/Human Rights/Rule of Law

Priority needs

The displacement of 1.6 million people, the vast majority in congested camps with limited access to land, few opportunities to generate income, collapsed services and no civilian policing, has created a largely dependent population seriously at risk of human rights abuse. The government's policy of encamping the rural population, the LRA's violent assaults on civilians and abduction of children, and the strategies that local people use to search for safety, employment and income combine to create a complex web of vulnerability. All the social problems that exist in other parts of Uganda afflict the war-affected population, intensified by conflict, displacement and camp life. Children and women, who

comprise 80% of the population in IDP camps, are particularly vulnerable to violence, exploitation, abuse and neglect.

Problems of access caused by insecurity have meant that quality information about protection in most IDP camps is limited. The systematic collection and timely verification of information is an essential step towards strengthened advocacy for protection measures by local and national duty bearers.

UNICEF estimates that since October 2003 approximately 3,000 children have been abducted by the LRA for use as soldiers, sex slaves and porters, adding to the approximately 18,000 abducted in previous years. An unknown number have been killed but over 15,000 have escaped or been captured by the UPDF since the war began. Formerly abducted children are reunited with their families and communities but some, particularly child mothers, face stigma and discrimination. Over the past eight years the authorities and child protection agencies have evolved a practical system for working with formerly abducted children. NGO-run reception centres provide psychosocial support to children, family tracing and reunification.



A child in Gulu district, formerly abducted by the LRA, was brought back home. © UNICEF-Uganda 17 May 2004

Mechanisms to support the community reintegration of adult returnees, more of whom left the LRA in the latter part 2004 than in previous years, are less developed. Although the Amnesty Commission has the power to grant amnesty from prosecution, there is no civilian oversight of the process of removal from fighting forces to ensure that adult returnees are able to exercise choice about their future and are not subject to ill treatment or manipulation.

Each night tens of thousands of children and smaller numbers of adults search for safety by “commuting” to the middle of camps and into urban centres to churches, hospitals and shop verandas. The number of night commuters, which varies according to perceptions of security, did not drop below 44,000 in 2004. Most children commute without the protection of adult family members. Specially established centres accommodate approximately 50% of commuters in urban areas but links with the community, leadership, capacity, conditions and protection need strengthening, especially in Kitgum. No support or protection has yet been provided for the many night commuters in the camps.

In addition to the sexual abuse of girls inherent in abduction by the LRA, social and physical conditions in camps expose women and girls to serious risk of SGBV. The search for fuel and wild foods forces women and girls to visit isolated areas. No camps have been planned with the particular security needs of women and girls in mind. Women are heavily under-represented in camp management. Perpetrators of SGBV include civilian men, soldiers, local defence units and militia. Women also report high levels of domestic violence in camps, often exacerbated by alcohol abuse. Confidential adolescent-friendly remedial social or medical support is not available. Camp leaders and district officials are largely unaware of technical measures that could contribute to prevention and protection.

Lack of civilian police or courts in camps means that opportunity for legal redress is limited. The army and militia have assumed a policing role in camps by default but are not institutionally equipped to carry this out effectively. There are reports of illegal detention and physical ill treatment of civilians, especially persons found out at night in and around camps or found cultivating too far from camps or patrolled roads.

Physical and economic insecurity means that women and girls are also vulnerable to sexual exploitation in return for favours, food, security or money. Forty-one percent of night commuting children in Gulu report that they know someone who has been offered money for sex. Soldiers and local defence units (LDU) take “temporary wives” and girlfriends when stationed near IDP camps.

These women are often abandoned when soldiers are re-assigned. Unmarried mothers face social stigma and exclusion and are at risk of falling into a downward spiral of further sexual exploitation.

HIV/AIDS rates in war-affected areas are higher than the national rate. For example, 11.9% of pregnant women in one sentinel site in Gulu District are HIV-positive, compared to 6.2% nationally. Children with HIV-positive parents become increasingly vulnerable as their parents' health fails. Although the number of children orphaned by HIV/AIDS is not known, the high HIV/AIDS rates mean that there are many orphans and other vulnerable children.²⁸ Anecdotal evidence suggests the numbers of children orphaned by HIV/AIDS is far higher than the numbers of children orphaned directly by violence. Social values mean that few orphans are unaccompanied, however many face discrimination and stigma. This places them at serious risk of exploitation, neglect and exclusion, particularly in a context where families are economically hard-pressed. HIV/AIDS awareness in the camps may be fairly high but the availability of services is very limited. Adolescent and young people do not have access to adolescent-friendly RH services and are especially vulnerable to HIV transmission.²⁹

All of these problems are compounded by the general lack of opportunities for young people, particularly adolescents. The quality of primary education is poor and there is only limited access to secondary schools.³⁰ There are few opportunities for skills training, and none in camps. The general absence of productive alternatives makes joining the armed forces or militia an attractive option for youth under 18. Many local councils (LC) working with the UPDF and militia to mobilise new recruits remain unaware of the illegality of under-age recruitment. Systematic oversight by the military to prevent illegal recruitment remains lacking.

Strategy to address key problems

- Information and advocacy: strengthening the collection of information and monitoring of protection issues to support advocacy by district protection working groups, the IASC, the UNCT and the Humanitarian Coordinator;
- Coordination and collaboration: multi-sectoral and multi-agency response to SGBV, sexual exploitation and HIV/AIDS involving preventive as well as remedial action; stronger collaboration between organisations working with formerly abducted children;
- Community-oriented support for reintegration of the most vulnerable (e.g. OVCs, formerly abducted children and child mothers) and reduction of vulnerability of adolescents: strengthening community structures and creating options through income generation, livelihoods, skills training and appropriate service delivery;³¹
- Participation: support CBOs and NGOs to involve children and women in identifying and implementing solutions, and strengthening involvement of women in camp management;
- Capacity building and training: training the UPDF on protection; training camp leaders, local officials and humanitarian agency personnel on protection integrated into relief, SGBV and sexual exploitation; sensitisation of LCs on recruitment of under-18s;
- Service provision: shelters for night commuters, reception centres for formerly abducted children.

Objectives

- To establish protection monitoring mechanisms generating information, advocacy and response recommendations;
- To strengthen official and community mechanisms for the protection of the most vulnerable;
- To build community, NGO and official capacity to prevent and respond to HIV/AIDS, SGBV and sexual exploitation;
- To expand economic and skills training opportunities for adolescents and women in camps.³²

²⁸ An orphan in Uganda is a child that has lost one or both parents.

²⁹ This response plan addresses orphans and vulnerable children only – refer to Section 3.4. G for the overall HIV/AIDS response.

³⁰ Education is an important contribution to the protection of children – refer to Section 3.4.D.

³¹ Also refer to Section 3.4.D.

³² For accelerated learning for adolescents, please refer to the Education Response Plan, Section 3.4.D.

Indicators

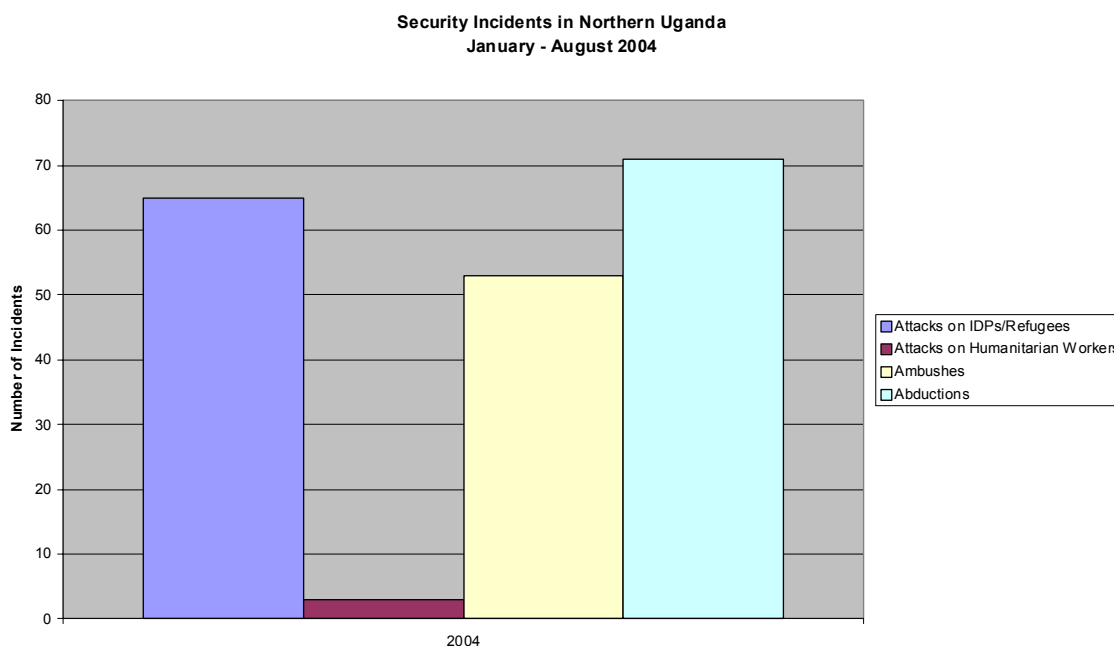
- Official protection oversight mechanisms functioning in district authorities and UPDF;
- Existence of knowledge-based, multi-sectoral prevention and response mechanisms involving community participation in IDP camps;
- 20,000 adolescents and women participating in skills training, livelihood support and income generating schemes;
- Deployment of additional protection staff and existence of active inter-agency protection working groups at district and national levels;
- Community-based protection mechanisms receiving support in 25 camps.

Participating organisations

UNICEF, OCHA, UNDP/United Nations Volunteers (UNV), Uganda Human Rights Commission (UHRC), NRC, SC Uganda, IRC, AVSI, CCF, Gulu Support the Children Organisation (GUSCO), World Vision International (WVI), Kitgum Concerned Women's Association (KICWA), Action Against Child Abuse and Neglect (AACAN), Transcultural Psychosocial Organisation (TPO), OXFAM, Human Rights Forum (HURIFO), Legal Aid Project (LAP), Rachele Centre, Catholic Relief Services (CRS), Cooperation for Assistance and Relief Everywhere (CARE), IOM, International Conference of Catholic Churches (CARITAS).

3.4.K Safety and Security of Staff and Operations

Since the mid-term review there have been further positive developments to the nature of the conflict. At the very end of April 2004 some middle-ranking LRA commanders began to defect with their fighters. Still, attacks, ambushes and abductions are continuing and persons continue to be brutally murdered.



The chart is a clear indication that the violence continues but it is not exhaustive in its conclusions. There are unreported offences and the collection of information is not standardised. These are visual aids, which record security incidents but do not quantify the number of persons killed or abducted, nor does it reflect the intensity of the incidents. Sources include UN agencies, NGOs, GoU, UPDF and Uganda Police Force.

New UN agency offices have been established in Gulu, Kitgum, Lira and Soroti; however minimum operating security standards (MOSS) have not yet been fully reached. Funding for a Deputy Field Security Coordination Officer for northern Uganda has been obtained and deployment will be made shortly. The Officer will be responsible for advising on where the humanitarian community can work without escorts.

The objective of the sector is to progressively seek greater humanitarian access to locations that may now be assessed as safe without the use of armed escorts. It is expected that humanitarian agencies will have access to eight camps in Gulu district in the near future without any escort. The challenge of greater freedom of movement brings with it new security demands and implications, which in turn requires funding.

3.4.L Water and Sanitation

Situation analysis and priority needs

The IDPs live in camps and temporary shelters that were set up at the onset of displacement and were never intended for long-term use. Many settlements are starting to exhibit problems similar to those of small cities but without the resources needed to deal with them. All the camps are highly congested. In these camps over-crowding, squalid living conditions, limited water supply and low sanitation has led to disease outbreaks, contributing to increased morbidity and mortality. Children and women, who comprise 80 percent of the IDPs, are the most vulnerable group.



IDPs in Kitgum district, queuing for water at a borehole, February 2004. © UNOCHA Uganda.

Pupils spend eight hours a day, eight months a year in makeshift schools where there is little access to safe water, appallingly poor sanitation facilities and a generally very unhygienic environment. Water, sanitation and hygiene-related diseases like diarrhoea and dysentery are now endemic in the affected zones.

According to agency reports, safe water supplies for around half of the IDPs in the northern districts are critical, being below five litres/person/day (this excludes those receiving town water supplies).³³ The situation and shortfalls are worst where camp populations exceed 10,000 persons, as the huge water requirements easily outstrip the potential production from the limited number of point sources available. Only in the longer established smaller camps, which host around a quarter of the IDP populations of Gulu and Kitgum districts, are moderate supplies available (10-14.9 litres/person/day). The majority of people have to use unsafe sources. The situation of sanitary facilities is no better. Against the Sphere standards of 1 latrine stance for 20 persons and the Ugandan school standard of 1 for 40 pupils, coverage ranges from 14.9% in Kitgum, 18.9% in the night commuter centres in Gulu, to 43.4% in the registered camps in Gulu district (and 64% in schools there).

In the eastern districts information on water supplies is not readily available, as the situation is more recent than the north. Indications are that, except for those receiving town water supplies, 40% of IDP water supplies are critical, which is of particular concern in Katakwi. Sanitary coverage is of the order of 30%.

The sanitary service coverage in both the north and the east has slightly improved since late last year (by approximately 25%), as a number of agencies, including UNICEF, have been engaged in latrine construction programmes and related activities, particularly targeting schools and health centres. Nonetheless, huge gaps remain.

With respect to water supply, many agencies have continued to develop point sources. Although these have made an important contribution in desperate situations, the contribution they are able to make towards huge water supply shortfalls is limited. Some modest response has been registered but the gap between available resources and needs remains great.

The technology used — usually drilling of boreholes and installing hand pumps — has not been able to meet the huge demands for water supply. Since June 2003 the Directorate of Water Development, some NGOs and UNICEF have advocated the use of motorised reticulated systems as the technology

³³Estimates from a UNICEF consultancy report.

of choice for large camps like for example Pabbo (hosting 68,000 persons) and Atyak (47,000). The first four of these systems are nearing completion.

Sanitation response has mainly been in the form of latrine construction for households and schools. Because latrines have been rapidly filling, new innovations such as the use of prefabricated and reusable superstructures are being implemented.

Strategy to address key problems

- Given the high population densities, the high potential for contamination, cost effectiveness, and difficulties in re-using capital investment at the end of the conflict, the strategy for water supply is to either drill or modify existing high yield boreholes. These are then powered, pumped to storage reservoirs and thereafter reticulated through distribution mains and tap stands. The borehole must be protected from potential faecal contamination.
- While government operation and maintenance policy for rural water supply is for beneficiaries to meet this cost, it is not expected that IDPs have income to pay for O&M. UNICEF has already successfully negotiated for this cost to be met by the government through the district water and sanitation grants. The supply of fuel, lubricants and other consumables should be built around the food distribution system. All maintenance crews shall be trained to operate the water supply systems, should be residents of the camps (preferably trained pump mechanics), and should be paid.
- Sanitation and hygiene promotion will be based on the concept of weekly camp sanitation days. A day in the week will be set aside for all able-bodied IDPs to engage in the general cleaning of the camp including households, schools, health units and the general camp environment. This will be steered by the leadership of the camp administration structures. A sanitation kit comprising of tools and implements like spades, hoes, pickaxes, wheel-burrows etc will be provided to support the weekly sanitation campaigns.
- Direct delivery of WES services to primary schools through supplies or construction.
- Should the situation improve, a WES resettlement package in the form of service provision in villages where the displaced originally came from shall be provided to add value to the return of IDPs to their homes.
- Provision of technical support to ensure quality assurance especially for the water supply systems that are relatively new in rural Uganda, and demand-driven promotion of camp sanitation and hygiene. This will require two full-time specialists, as normal service delivery mechanisms through local government are greatly impaired by the conflict.

Objectives

- 500,000 IDPs have access to 15 litres of safe water per person per day;
- A clean and safe environment created in at least 120 IDP camps through support to the construction of sanitation facilities and promotion of good hygienic practices;
- Institutional capacity is built to ensure that WES facilities are adequately operated and maintained and hygienic practices are sustained and replicated.

Indicators

- Access to at least 15 litres per capita per day;
- One water point per 250 persons;
- Maximum distance from any shelter to nearest water point is 500 meters;
- Maximum of 50 people per one stance latrine;
- 90% correct operation and utilisation of sanitation and water facilities.

Monitoring

The WES sector sub-group under the DDMC will be charged with overall monitoring of progress towards achieving the objectives of this sector.

Implementing partners

Partners will include district governments and all NGOs and international agencies working in the conflict districts (Cooperazione Internazionale, Italy [COOPI]), Oxfam, IRC, African Medical and Research Foundation [AMREF], GOAL, CONCERN, ACF etc.)

4. STRATEGIC MONITORING PLAN

The UNCT and the Uganda-based IASC will use the matrix below as a guideline for monitoring progress towards the strategic priorities identified in the CHAP.

Strategic priority	Coordination	UNCT/IASC involvement
Improved access	UN Humanitarian Access Adviser under the leadership of the UN HC, in cooperation with the UN FSCO, will continue to attempt to establish contact with the LRA and strengthen contact with the UPDF on humanitarian access.	UNSECOORD, UNCT & NGOs to work with the UPDF at national/district level on improving road and camp access Donors to support the action of the IASC with the GoU, advocating for road repairs and for a dialogue with the LRA leading to the peaceful resolution of the conflict.
Improved protection	OCHA/UNICEF will establish a strong protection coordination partnership.	UN agencies including UNHCR, the Office of the High Commissioner for Human Rights (OHCHR) and human rights NGOs provide better documentation on violations of human rights.
Improved delivery of humanitarian services	OCHA provides more information on humanitarian gaps; increased facilitation/coordination at district level with local government; OCHA to lobby for more funds and NGO expansion.	Expansion by UNICEF/WHO/UNFPA and NGOs in technical support to districts and increased service provision in health, water and education.
Improved livelihoods and self-reliance.	Increased involvement by UNDP in northern Uganda on recovery planning.	WFP/FAO/UNDP and NGOs plan for expansion of agricultural investment, livestock initiatives, food for work/assets.

In addition to this framework, a number of other vehicles will be used to evaluate developments in Uganda and their impacts on the population and on humanitarian programmes. Evaluations of developments in the region and their impact on populations and humanitarian activities are undertaken through regular coordination meetings in Kampala and in the field, IASC meetings at the Kampala level, sectoral meetings, ad hoc information exchange, and information dissemination. It is hoped that the expansion of OCHA's information management unit will provide a further node for information standardisation and exchange. Inter-agency preparedness and response planning is facilitated through the CAP, coordinated by OCHA, and through other workshops such as the Protection of Civilians workshop held in Kampala in September 2004.

5. CRITERIA FOR PRIORITISATION OF PROJECTS

Participants to the CAP 2005 workshop held in Gulu from 21–22 June 2004 agreed that an inter-agency working group or sectoral working groups would screen and review projects for inclusion in the CAP document to ensure that projects are in accordance with the agreed prioritised strategies. It was agreed that inclusion of projects in the CAP should be based on the following criteria:

- The appealing agency has the technical expertise, capacity, and mandate to implement the project that does not duplicate other humanitarian or recovery initiatives already planned or underway in the same region or area; the project will have a measurable impact on the humanitarian situation in one year time and help build the capacity of local counterparts;
- The local operating conditions are favourable enough for the agency to conduct proper assessment, planning, implementation and monitoring; beneficiaries/communities will be involved in the needs assessment;
- The project addresses the specific priority needs of vulnerable groups targeted in this appeal and helps achieve at least one response plan objective;
- The project does not contradict the agreed humanitarian principles, advocates for protection and advancement of human rights, takes into account, where relevant, the differential needs of men, women, boys and girls;
- The project addresses recovery initiatives in areas where there is relative stability; it supports demobilisation and peace-building initiatives;
- Its budget is consistent with historical funding patterns or is based on donor commitments.

6. SUMMARY: STRATEGIC FRAMEWORK FOR HUMANITARIAN RESPONSE

Strategic Priority	Corresponding Response Plan Objectives		Associated Projects
	Coordination and support services	Effective delivery of humanitarian assistance to affected populations	
1. Improved access to IDPs, refugees and other vulnerable groups for delivery of humanitarian assistance.	Safety & security of staff & operations	Seek greater humanitarian access to IDP camps in locations that may now be assessed as safe without the use of armed escorts.	UNSECOORD support to Field Security Coordination Structure, northern Uganda.
		Effective, proactive and coordinated protection of affected populations.	OCHA coordination project.
	Coordination and support services	Contribute to the establishment of effective information monitoring, updating, collection and dissemination systems with regard to the IDPs.	IOM IDP profiling project.
		Increased access to and protection of vulnerable people	UNICEF project on coordination of programme activities in Pader.
	Education	Guarantee and improve education in displacement as a protection means for children living in congested camps.	AVSI education project.
		Increase access to education in rural camps through the construction of new learning centres and rehabilitation of existing schools in war-affected sub-counties in Lira district.	SCIU education project.
	Agriculture	Promote food security, general stability in the region and local capacities through emergency supply of agricultural inputs to households affected by drought and disarmament in Karamoja region.	FAO project on essential agricultural inputs to the disarmed and drought-affected households in Kotido, Moroto and Nakapiripit districts of Karamoja region.
		80% of young people, girls and boys, will receive counselling on HIV/AIDS, GBV.	UNICEF project on rights of IDPs to sexual and RH.
	Health	Empower women on lobbying and advocacy as agents of change who can spearhead conflict resolution, protect and promote observation of fundamental human rights.	Teso Women Peace Activists (TEWPA) peace building project.
		Advocacy for protection, voluntary return and humane resettlement of IDPs in their locations of origin or preference.	IOM relief and return planning for resettlement assistance to IDPs in northern and eastern Uganda.
2. Improved protection for all vulnerable groups, with emphasis on children and women in accordance with international and national human rights law and humanitarian principles.	Protection/ Human Rights/Rule of Law	Contribute to continued efforts of the GoU and the international community to consolidate peace and stability in Uganda through the return and reintegration of reporters and children into normal civilian life in Uganda.	IOM demobilisation, repatriation, rehabilitation and reintegration project.
		Improve protection of IDP rights in the camps in northern Uganda.	NRC IDP protection training.
		Enhance childcare and protection to night commuting children within municipality and IDP camps.	Rural Focus Uganda (RUFU) child protection and IDPs project.

UGANDA

Strategic Priority	Corresponding Response	Plan Objectives	Associated Projects
<p>...continued</p> <p>2. Improved protection for all vulnerable groups, with emphasis on children and women in accordance with international and national human rights law and humanitarian principles.</p>	Protection/ Human Rights/Rule of Law	Provide a multi-sectoral and interagency response to sexual violence and exploitation; prevent survivors from further suffering; promote physical and psychological recovery; and increase the protective environment for over 60,000 children commuting at night in urban and camp settings.	UNICEF SGBV and exploitation project.
		Strengthen the reception and demobilisation of children returning from abduction to protect the rights of separated children (and children at risk of separation) to appropriate care, tracing and family reunification.	UNICEF demobilisation and reintegration of separated children project.
		Strengthen the UNCT and IASC capacity to hold duty bearers accountable for the protection of civilians.	UNICEF/OCHA project on monitoring and advocacy.
		Reduce the negative consequence of night commuting for 60,000 children in camps and urban areas.	UNICEF night commuters project.
		Secure the right of at risk adolescent girls and boys to improved protection through livelihood and training opportunities.	UNICEF project on reduction of adolescent vulnerability.
		Promote practical conformity to international law and good practice for the protection of children and women by UPDF soldiers.	UNICEF project on child protection and the UPDF.
		Disarm LRA reporters, local militias, and other paramilitary forces.	UNDP small arms and light weapons project.
		Reduce stigma surrounding SGBV in the refugee and host communities.	IMC SGBV project.
	Mine Action	Strengthen the capacity of the district to coordinate, monitor, and supervise mine risk education, advocacy efforts, and victim assistance in the district.	UNDP capacity building – mine action centre.
	Multi-Sector	Provide international protection and assistance to the refugees in Uganda and pursue durable solutions for them in terms of voluntary repatriation, local integration and resettlement.	UNHCR multi-sectoral assistance to refugees.
3. Improved provision and delivery of comprehensive and timely humanitarian assistance to vulnerable populations, respecting their dignity in a sustainable manner.	Agriculture	IDPs apply improved agricultural methods to realise sustainable food sufficiency.	German Agro-Action (GAA) food security project.
	Food	Maintain minimum nutritional and dietary standards of IDPs and refugees with special attention to women, malnourished children and extremely vulnerable individuals.	WFP PRRO 10121
	Health	Support provision of reproductive health services and prevention and control of HIV/AIDS; reduce excess mortality and morbidity due to communicable diseases caused by displacement.	WHO project on response to the health crisis affecting IDPs in northern Uganda.
		80% of pregnant women in IDPs camps have at least three ante-natal visits at health facilities and outreaches.	UNICEF project on rights of IDPs to sexual and RH.
		90% of the CORPs have adequate skills for referral of malnourished children to TFCs or SFCs.	UNICEF project on nutrition response to emergency.
		Immunise at least 90% of all children under-one and at least 90% of pregnant women against measles, polio and tetanus.	UNICEF project on rights of children in IDP camps to health.
		Prevent and respond to SGBV.	UNFPA SGBV project.

UGANDA

Strategic Priority	Corresponding Response	Plan Objectives	Associated Projects
<p>... continued</p> <p>3. Improved provision and delivery of comprehensive and timely humanitarian assistance to vulnerable populations, respecting their dignity in a sustainable manner.</p>	Health	Improve the access of young people to key information and services on STIs/HIV/AIDS.	UNFPA HIV/AIDS awareness project.
		Increase access to HIV/AIDS related services for women, children and youth in the IDP camps.	UNICEF project on HIV/AIDS.
		Improve the psychosocial functioning of formally abducted children and adult.	SCIU project on psychosocial support.
		Improve the living conditions of families affected by HIV infection and disease in Gulu district.	TASO project on mitigation of socio-economic effects of HIV/AIDS on the families of people affected by HIV/AIDS in Gulu district.
		Strengthen tuberculosis control activities in eight districts.	IMC project on TB control project.
		Strengthen the capacity of communities and district authorities to prevent and respond appropriately to SGBV.	IMC project on SGBV prevention and response among refugee population.
		Reduce the impact of the current crisis on the health of IDPs and the host population in Kitgum and Pader.	IMC project on emergency health and nutrition programme.
	Water and Sanitation	Improve the health status of the target population.	AVSI health project.
		Provision of 15 litres of safe water per capita per day, excreta disposal facilities, and interventions that will lead to a clean and healthy IDP camp and school environment.	UNICEF water supply project.
		Increase access by IDPs to safe water from the current average of 6 litres per person per day to at least 11 litres per person per day within the coming year; latrine coverage in institutions (displaced primary schools and health centres); promotion of good hygiene practices in accordance with the Sphere standards.	Inter-agency (District Water Officer [DWO], CARE, ACF-US, AMREF, World Vision water and good hygiene practice project.
		Improve the livelihood of the IDPs through provision of safe water; improve household and personal hygiene in the community and institutions.	Action Contre la Faim (ACF) US water supply project
		Promote and fulfill the rights to education and psychosocial recovery of children in situations of armed conflict.	UNICEF education project.
		Train teachers in psychosocial support skills to enable them to handle properly war affected children.	Sponsoring Children Uganda (SCU) education project in Lira.
		Equip 500 teachers with child friendly classroom management skills.	Concerned Parents Association (CPA) education project in Lira.
	Education	Equip school drop-outs with skills for self-reliance.	Collaborative Efforts to Alleviate Social Problems (CEASOP) education project in Lira.
		Ensure that the survival and basic development needs of the vulnerable are met in the area of essential household and shelter items.	UNICEF project on provision of NFIs.

UGANDA

Strategic Priority	Corresponding Response Plan Objectives		Associated Projects
...continued	Coordination and support services	Promote coordination and collaboration among local stakeholders in order to contribute to the reduction of STI/HIV/AIDS transmission in northern Uganda.	IOM project on support to HIV/AIDS activities in northern Uganda.
		Enable and support a concerted and coordinated response to HIV/AIDS in line with national goals and guidelines.	UNAIDS HIV/AIDS coordination project.
	Mine Action	Improve conditions conducive to the return of IDPs, provide assistance to land mine survivors, and increase public awareness, particularly amongst the IDP camp populations, through MRE campaigns.	UNDP project on capacity building for mine action in Uganda.
		Provide support for healthcare and reintegration of landmine and UXO survivors.	UNDP project on survivor support.
4. Improved livelihoods and coping mechanisms of IDPs and refugees to promote self-reliance in the camps/ settlements and afterwards.	Agriculture	Improve food security and self-reliance of IDP populations and coordination of agricultural emergency operations.	FAO emergency distribution of agricultural inputs project.
		Improve food security of former UNRF II rebels in Arua, Yumbe, Moyo and Nebbi districts.	FAO project on provision of agricultural inputs to former rebels of UNRF II in Arua, Yumbe, Moyo and Nebbi districts of West Nile Region.
		Support peace by encouraging IDPs to re-settle and engage in agricultural production.	HUNGER ALERT project on Agriculture for Peace and Resettlement.
		Restock 3,500 IDP households with livestock and fish farming for better nutrition intake and improved household income.	GAA livestock keeping project.
		Support the planning of sustainable natural resources use in the return/resettlement context.	FAO geographic information system (GIS) project.
		Replenish the depleted wood resources in and around IDPs camp and reduce the risk of abduction of women.	FAO environmental conservation project.
	Economic Recovery and Infrastructure	Improve the livelihood of IDPs in Moroto county, Lira district through agricultural and environmental protection initiatives.	CPAR livelihood support project.
		Reduce vulnerability through increased household incomes by enhancing extension services, promoting modern technologies, developing productive and business skills and conserving the environment in Northern Uganda.	UNDP project on improving household incomes of IDPs in northern Uganda.
		Promote Income Generation Activities in IDP camps.	UNDP project on Livelihoods improvement of IDPs in camps.
		Sensitise on environmental sustainability in IDP camps.	UNDP environmental sustainability project.
		Strengthen the regulatory process on environmental conservation, use and management.	UNDP environmental conservation project.

UGANDA

Strategic Priority	Corresponding Response	Plan Objectives	Associated Projects
<p>... continued</p> <p>4. Improved livelihoods and coping mechanisms of IDPs and refugees to promote self-reliance in the camps/ settlements and after wards.</p>	Economic Recovery and Infrastructure	Improve the livelihoods and coping mechanisms of IDPs in order to promote self-reliance.	Water Affected Children's Rehabilitation Organisation (WACRO) project on support for income generating activities and capacity building efforts of the IDPs (SUFIGA).
	Food	Support the creation of assets to facilitate resettlement and recovery of livelihoods among IDPs and refugees upon return to their homes.	WFP PRRO 10121
	Coordination and support services	Effective links between relief and recovery activities.	OCHA coordination project.
	Mine Action	Support income-generating activities for landmine survivors so that they become economically independent.	UNDP capacity building project on victim assistance for economic reintegration of landmine survivors.
	Multi-Sector	Continue to promote a strategy of self-reliance for Sudanese, Congolese and Rwandan refugees, and continue working towards the integration of refugee services into the national service structure.	UNHCR multi-sectoral assistance to refugees.
		Increase self-reliance of residents of the Kyaka 2 settlement.	IMC project on provision of services and management of Kyaka 2 refugee settlement.

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AAH			
UGA-05/WS03	WATER AND SANITATION	Safe water and sanitation to IDPs	440,000
Sub total for AAH			440,000
ACF			
UGA-05/WS02B	WATER AND SANITATION	Provision of safe water and good hygiene practice to IDPs	492,647
Sub total for ACF			492,647
AMREF			
UGA-05/WS02C	WATER AND SANITATION	Provision of safe water and good hygiene practice to IDPs	1,878,382
UGA-05/WS02D	WATER AND SANITATION	Provision of safe water and good hygiene practice to IDPs	479,412
Sub total for AMREF			2,357,794
AVSI			
UGA-05/H11	HEALTH	Emergency medical response in war-affected Northern Uganda	1,672,000
UGA-05/P/HR/RL09	PROTECTION/HUMAN RIGHTS/RULE OF LAW	Restoring dignity through education in displacement	500,000
Sub total for AVSI			2,172,000
CARE INT			
UGA-05/WS02A	WATER AND SANITATION	Provision of safe water and good hygiene practice to IDPs	1,068,235
Sub total for CARE INT			1,068,235
CEASOP			
UGA-05/E04	EDUCATION	Empowering school dropouts with vocational skills for self-reliance	496,491
Sub total for CEASOP			496,491

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Project Code	Sector Name	Sector/Activity	Original Requirements
COOPI			
UGA-05/MS03	MULTI-SECTOR	Multi-sector support to Northern Uganda population affected by the LRA conflict	1,800,000
Sub total for COOPI			1,800,000
CPA-LIRA			
UGA-05/E03	EDUCATION	Skills training of teachers in LIRA District on child friendly approaches	109,706
Sub total for CPA-LIRA			109,706
CPAR			
UGA-05/A06	AGRICULTURE	Livelihood support project	75,619
Sub total for CPAR			75,619
FAO			
UGA-05/A02	AGRICULTURE	Emergency distribution of agricultural inputs to conflict affected IDPs and coordination of emergency agriculture initiatives	2,966,892
UGA-05/A01	AGRICULTURE	Environmental conservation in current IDPs camps	498,200
UGA-05/A04	AGRICULTURE	Provision of agricultural inputs to former rebels of UNRF II in Arua, Yumbe, Moyo and Nebbi districts of West Nile Region	105,052
UGA-05/A03	AGRICULTURE	Provision of essential agricultural inputs to the disarmed and drought-affected households in Kotido, Moroto and Nakapiripirit districts of Karamoja region.	439,606
UGA-05/A05	PROTECTION/HUMAN RIGHTS/RULE OF LAW	Support to the planning of sustainable natural resources use in return/resettlement context	253,000
Sub total for FAO			4,262,750

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GAA			
UGA-05/A09	AGRICULTURE	Improved livelihood of IDPs in Lira District through livestock keeping	304,094
UGA-05/A08	AGRICULTURE	Revamping food security potential of the IDPS in Lira.	239,766
Sub total for GAA			543,860
HA			
UGA-05/A07	AGRICULTURE	Agriculture for peace and resettlement of IDPs in Gulu District	329,000
Sub total for HA			329,000
IMC			
UGA-05/H14	HEALTH	Expansion of community based DOTS in Uganda	224,156
UGA-05/H12	HEALTH	North Uganda emergency health and nutrition programme	994,597
UGA-05/H13	HEALTH	SGBV prevention and response among refugee populations	50,000
UGA-05/MS02	MULTI-SECTOR	Provision of services and management of Kyaka 2 refugee settlement	107,500
UGA-05/P/HR/RL10	PROTECTION/HUMAN RIGHTS/RULE OF LAW	Integrated response to sexual exploitation and gender based violence in refugee populations present in Uganda	269,980
Sub total for IMC			1,646,233

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Project Code	Sector Name	Sector/Activity	Original Requirements
IOM			
UGA-05/CSS01	COORDINATION AND SUPPORT SERVICES	Registration and monitoring of IDP population figures in northern and eastern Uganda	965,619
UGA-05/ER/I05	ECONOMIC RECOVERY AND INFRASTRUCTURE	Demobilisation, repatriation, rehabilitation and reintegration of reporters and children under the Amnesty Act 2000	373,325
UGA-05/H05	HEALTH	Support to HIV/AIDS activities in Northern Uganda	657,317
UGA-05/P/HR/RL04	PROTECTION/HUMAN RIGHTS/RULE OF LAW	Relief and return planning for resettlement assistance to IDPs in Northern and Eastern Uganda	480,000
Sub total for IOM			2,476,261
NRC			
UGA-05/P/HR/RL08	PROTECTION/HUMAN RIGHTS/RULE OF LAW	IDP protection training	483,000
Sub total for NRC			483,000
OCHA			
UGA-05/CSS02	COORDINATION AND SUPPORT SERVICES	Continue facilitation of coordination of humanitarian assistance to population affected by disasters and emergencies, advocacy for protection of affected populations and information management	3,580,154
Sub total for OCHA			3,580,154
RUFOU			
UGA-05/P/HR/RL07	PROTECTION/HUMAN RIGHTS/RULE OF LAW	Child protection and IDPs	485,550
Sub total for RUFOU			485,550

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SC Uganda			
UGA-05/E05	EDUCATION	Construction and rehabilitation of learning centre and Ssupply of furniture	1,564,710
UGA-05/H09	HEALTH	Psycho-social Support	254,500
Sub total for SC Uganda			1,819,210
SCU			
UGA-05/E02	EDUCATION	Skills development for teachers to handle war affected children	18,400
Sub total for SCU			18,400
TASO			
UGA-05/H10	HEALTH	Mitigation of socio-economic effects of HIV/AIDS on the families of people Affected by HIV/AIDS in Gulu district.	453,937
Sub total for TASO			453,937
TEWPA			
UGA-05/P/HR/RL11	PROTECTION/HUMAN RIGHTS/RULE OF LAW	Peace building, conflict resolution and reconciliation	29,240
Sub total for TEWPA			29,240
UNAIDS/IOM			
UGA-05/CSS03	COORDINATION AND SUPPORT SERVICES	Strengthening coordination of AIDS activities at district level and implementation of the IASC "Guidelines for HIV and AIDS Initiatives in Emergency Settings"	308,000
Sub total for UNAIDS/IOM			308,000

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UNDP			
UGA-05/ER/I02	ECONOMIC RECOVERY AND INFRASTRUCTURE	Capacity building for improvement of livelihoods in IDP camps	316,000
UGA-05/ER/I03	ECONOMIC RECOVERY AND INFRASTRUCTURE	Environmental sustainability in IDP camps	25,000
UGA-05/ER/I04	ECONOMIC RECOVERY AND INFRASTRUCTURE	Environmental sustainability in IDP camps	25,831
UGA-05/ER/I01	ECONOMIC RECOVERY AND INFRASTRUCTURE	Improving Household Incomes of IDPs in Northern Uganda	214,000
UGA-05/MA03	MINE ACTION	Capacity building – mine action centre	120,000
UGA-05/MA02	MINE ACTION	Capacity building - victim assistance for economic reintegration of landmine survivors	50,000
UGA-05/MA01	MINE ACTION	Capacity building for mine action in Uganda	268,558
UGA-05/MA05	MINE ACTION	Disarmament and proliferation of illicit small arms and light weapons (SALW)	519,000
UGA-05/MA04	MINE ACTION	Survivor support	160,000
Sub total for UNDP			1,698,389
UNFPA			
UGA-05/H06	HEALTH	Increasing young people's to HIV/AIDS information and services in the conflict districts of northern Uganda.	442,050
UGA-05/H07	HEALTH	Preventing and responding to SGBV in IDP camps in Gulu and Lira districts	103,728
Sub total for UNFPA			545,778
UNHCR			
UGA-05/MS01	MULTI-SECTOR	Multi-sectoral assistance to refugees	13,363,206
Sub total for UNHCR			13,363,206

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Project Code	Sector Name	Sector/Activity	Original Requirements
UNICEF			
UGA-05/CSS04	COORDINATION AND SUPPORT SERVICES	Coordination of programme activities in the emergency district of Pader. Strengthening of delivery and evaluation of humanitarian assistance at district level. Capacity building of district officials and beneficiaries.	675,000
UGA-05/E01	EDUCATION	Restoring primary education in IDP camps	6,477,272
UGA-05/S/NF01	FAMILY SHELTER AND NON-FOOD ITEMS	Provision of shelter and household items	4,403,409
UGA-05/H02	HEALTH	Nutrition response to emergency	1,857,954
UGA-05/H01	HEALTH	Rights of children in IDPs camps to health	2,511,363
UGA-05/H03	HEALTH	Rights of IDPs to sexual and reproductive health	2,255,682
UGA-05/H04	HEALTH	Rights to HIV/AIDS control and prevention	1,244,318
UGA-05/P/HR/RL06	PROTECTION/HUMAN RIGHTS/RULE OF LAW	Protection: child protection and the UPDF	238,636
UGA-05/P/HR/RL02	PROTECTION/HUMAN RIGHTS/RULE OF LAW	Protection: night commuters	500,000
UGA-05/P/HR/RL05	PROTECTION/HUMAN RIGHTS/RULE OF LAW	Protection: reduction of adolescent vulnerability	625,000
UGA-05/P/HR/RL01	PROTECTION/HUMAN RIGHTS/RULE OF LAW	Protection: sexual and gender-based violence - prevention and response	670,455
UGA-05/P/HR/RL03	PROTECTION/HUMAN RIGHTS/RULE OF LAW	Protection: the care and protection of separated children and OVCs	965,909
UGA-05/WS01	WATER AND SANITATION	Rights of IDPs to safe water and a clean and healthy environment	5,352,273
Sub total for UNICEF			27,777,271
UNICEF/OCHA			
UGA-05/P/HR/RL12	PROTECTION/HUMAN RIGHTS/RULE OF LAW	Protection: monitoring and advocacy	715,909
Sub total for UNICEF/OCHA			715,909

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UNSECOORD			
UGA-05/S01	SECURITY	Support to field security coordination structure, northern Uganda	137,855
Sub total for UNSECOORD			137,855
WACRO			
UGA-05/ER/I06	ECONOMIC RECOVERY AND INFRASTRUCTURE	Support for income generating activities and capacity building efforts of the IDPs (SUFIGA)	360,000
Sub total for WACRO			360,000
WFP			
UGA-05/F01	FOOD	Targeted food assistance for relief and recovery of refugees, displaced persons and vulnerable groups in Uganda	86,065,572
Sub total for WFP			86,065,572
WHO			
UGA-05/H08	HEALTH	Improving Health Care Delivery for IDPS in Northern Uganda	1,574,100
Sub total for WHO			1,574,100
Grand Total:			157,686,167

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AGRICULTURE			
UGA-05/A07	HA	Agriculture for peace and resettlement of IDPs in Gulu District	329,000
UGA-05/A02	FAO	Emergency distribution of agricultural inputs to conflict affected IDPs and coordination of emergency agriculture initiatives	2,966,892
UGA-05/A01	FAO	Environmental conservation in current IDPs camps	498,200
UGA-05/A09	GAA	Improved livelihood of IDPs in Lira District through livestock keeping	304,094
UGA-05/A06	CPAR	Livelihood support project	75,619
UGA-05/A04	FAO	Provision of agricultural inputs to former rebels of UNRF II in Arua, Yumbe, Moyo and Nebbi districts of West Nile Region	105,052
UGA-05/A03	FAO	Provision of essential agricultural inputs to the disarmed and drought-affected households in Kotido, Moroto and Nakapiripirit districts of Karamoja region.	439,606
UGA-05/A08	GAA	Revamping food security potential of the IDPS in Lira.	239,766
Sub total for AGRICULTURE			4,958,229
COORDINATION AND SUPPORT SERVICES			
UGA-05/CSS02	OCHA	Continue facilitation of coordination of humanitarian assistance to population affected by disasters and emergencies, advocacy for protection of affected populations and information management	3,580,154
UGA-05/CSS04	UNICEF	Coordination of programme activities in the emergency district of Pader. Strengthening of delivery and evaluation of humanitarian assistance at district level. Capacity building of district officials and beneficiaries.	675,000
UGA-05/CSS01	IOM	Registration and monitoring of IDP population figures in northern and eastern Uganda	965,619
UGA-05/CSS03	UNAIDS/IOM	Strengthening coordination of AIDS activities at district level and implementation of the IASC "Guidelines for HIV and AIDS Initiatives in Emergency Settings"	308,000
Sub total for COORDINATION AND SUPPORT SERVICES			5,528,773

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ECONOMIC RECOVERY AND INFRASTRUCTURE			
UGA-05/ER/I02	UNDP	Capacity building for improvement of livelihoods in IDP camps	316,000
UGA-05/ER/I05	IOM	Demobilisation, repatriation, rehabilitation and reintegration of reporters and children under the Amnesty Act 2000	373,325
UGA-05/ER/I03	UNDP	Environmental sustainability in IDP camps	25,000
UGA-05/ER/I04	UNDP	Environmental sustainability in IDP camps	25,831
UGA-05/ER/I01	UNDP	Improving Household Incomes of IDPs in Northern Uganda	214,000
UGA-05/ER/I06	WACRO	Support for income generating activities and capacity building efforts of the IDPs (SUFIGA)	360,000
Sub total for ECONOMIC RECOVERY AND INFRASTRUCTURE			1,314,156
EDUCATION			
UGA-05/E05	SC Uganda	Construction and rehabilitation of learning centre and Supply of furniture	1,564,710
UGA-05/E04	CEASOP	Empowering school dropouts with vocational skills for self-reliance	496,491
UGA-05/E01	UNICEF	Restoring primary education in IDP camps	6,477,272
UGA-05/E02	SCU	Skills development for teachers to handle war affected children	18,400
UGA-05/E03	CPA-LIRA	Skills training of teachers in LIRA District on child friendly approaches	109,706
Sub total for EDUCATION			8,666,579
FAMILY SHELTER AND NON-FOOD ITEMS			
UGA-05/S/NF01	UNICEF	Provision of shelter and household items	4,403,409
Sub total for FAMILY SHELTER AND NON-FOOD ITEMS			4,403,409
FOOD			
UGA-05/F01	WFP	Targeted food assistance for relief and recovery of refugees, displaced persons and vulnerable groups in Uganda	86,065,572
Sub total for FOOD			86,065,572

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HEALTH			
UGA-05/H11	AVSI	Emergency medical response in war-affected Northern Uganda	1,672,000
UGA-05/H14	IMC	Expansion of community based DOTS in Uganda	224,156
UGA-05/H08	WHO	Improving Health Care Delivery for IDPS in Northern Uganda	1,574,100
UGA-05/H06	UNFPA	Increasing young people's to HIV/AIDS information and services in the conflict districts of northern Uganda.	442,050
UGA-05/H10	TASO	Mitigation of socio-economic effects of HIV/AIDS on the families of people Affected by HIV/AIDS in Gulu district.	453,937
UGA-05/H12	IMC	North Uganda emergency health and nutrition programme	994,597
UGA-05/H02	UNICEF	Nutrition response to emergency	1,857,954
UGA-05/H07	UNFPA	Preventing and responding to SGBV in IDP camps in Gulu and Lira districts	103,728
UGA-05/H09	SC Uganda	Psycho-social Support	254,500
UGA-05/H01	UNICEF	Rights of children in IDPs camps to health	2,511,363
UGA-05/H03	UNICEF	Rights of IDPs to sexual and reproductive health	2,255,682
UGA-05/H04	UNICEF	Rights to HIV/AIDS control and prevention	1,244,318
UGA-05/H13	IMC	SGBV prevention and response among refugee populations	50,000
UGA-05/H05	IOM	Support to HIV/AIDS activities in Northern Uganda	657,317
Sub total for HEALTH			14,295,702
MINE ACTION			
UGA-05/MA03	UNDP	Capacity building – mine action centre	120,000
UGA-05/MA02	UNDP	Capacity building - victim assistance for economic reintegration of landmine survivors	50,000
UGA-05/MA01	UNDP	Capacity building for mine action in Uganda	268,558
UGA-05/MA05	UNDP	Disarmament and proliferation of illicit small arms and light weapons (SALW)	519,000
UGA-05/MA04	UNDP	Survivor support	160,000
Sub total for MINE ACTION			1,117,558

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MULTI-SECTOR			
UGA-05/MS03	COOPI	Multi-sector support to Northern Uganda population affected by the LRA conflict	1,800,000
UGA-05/MS01	UNHCR	Multi-sectoral assistance to refugees	13,363,206
UGA-05/MS02	IMC	Provision of services and management of Kyaka 2 refugee settlement	107,500
Sub total for MULTI-SECTOR			15,270,706
PROTECTION/HUMAN RIGHTS/RULE OF LAW			
UGA-05/P/HR/RL07	RUFUO	Child protection and IDPs	485,550
UGA-05/P/HR/RL08	NRC	IDP protection training	483,000
UGA-05/P/HR/RL10	IMC	Integrated response to sexual exploitation and gender based violence in refugee populations present in Uganda	269,980
UGA-05/P/HR/RL11	TEWPA	Peace building, conflict resolution and reconciliation	29,240
UGA-05/P/HR/RL06	UNICEF	Protection: child protection and the UPDF	238,636
UGA-05/P/HR/RL12	UNICEF/OCHA	Protection: monitoring and advocacy	715,909
UGA-05/P/HR/RL02	UNICEF	Protection: night commuters	500,000
UGA-05/P/HR/RL05	UNICEF	Protection: reduction of adolescent vulnerability	625,000
UGA-05/P/HR/RL01	UNICEF	Protection: sexual and gender-based violence - prevention and response	670,455
UGA-05/P/HR/RL03	UNICEF	Protection: the care and protection of separated children and OVCs	965,909
UGA-05/P/HR/RL04	IOM	Relief and return planning for resettlement assistance to IDPs in Northern and Eastern Uganda	480,000
UGA-05/P/HR/RL09	AVSI	Restoring dignity through education in displacement	500,000
UGA-05/A05	FAO	Support to the planning of sustainable natural resources use in return/resettlement context	253,000
Sub total for PROTECTION/HUMAN RIGHTS/RULE OF LAW			6,216,679
SECURITY			
UGA-05/S01	UNSECOORD	Support to field security coordination structure, northern Uganda	137,855
Sub total for SECURITY			137,855

**Table III : Consolidated Appeal for
Uganda 2005**

List of Projects - By Sector
as of 19 October 2004
<http://www.reliefweb.int/fts>

Compiled by OCHA on the basis of information provided by the respective appealing organisation.

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Project Code	Appealing Agency	Sector/Activity	Original Requirements
WATER AND SANITATION			
UGA-05/WS02A	CARE INT	Provision of safe water and good hygiene practice to IDPs	1,068,235
UGA-05/WS02B	ACF	Provision of safe water and good hygiene practice to IDPs	492,647
UGA-05/WS02C	AMREF	Provision of safe water and good hygiene practice to IDPs	1,878,382
UGA-05/WS02D	AMREF	Provision of safe water and good hygiene practice to IDPs	479,412
UGA-05/WS01	UNICEF	Rights of IDPs to safe water and a clean and healthy environment	5,352,273
UGA-05/WS03	AAH	Safe water and sanitation to IDPs	440,000
Sub total for WATER AND SANITATION			9,710,949
Grand Total			157,686,167

ANNEX I

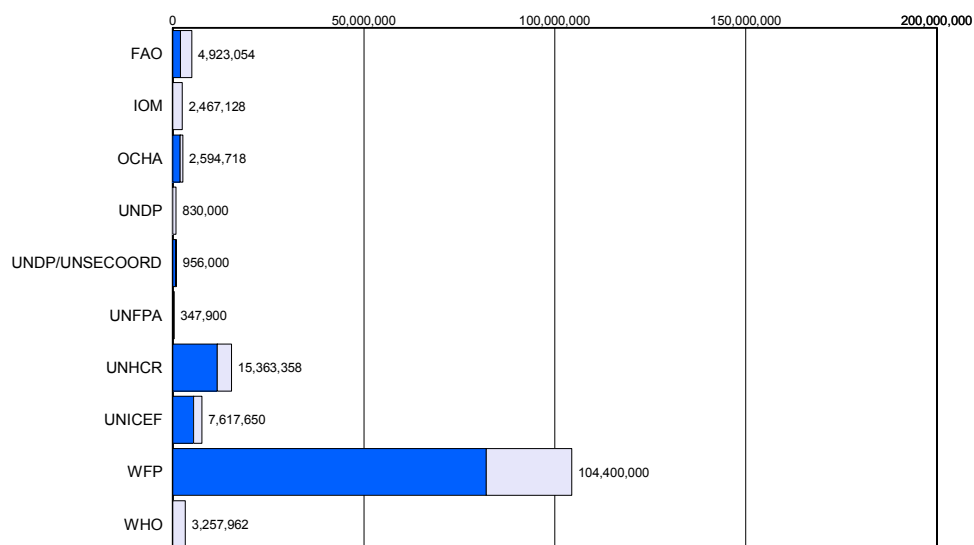
DONOR REPONSE TO THE 2004 APPEAL

**Table I : Consolidated Appeal for
Uganda 2004**

Requirements and Contributions per Appealing Organisation
as of 19 October 2004
<http://www.reliefweb.int/fts>

Compiled by OCHA on the basis of information provided by donors and the respective appealing organisation

Appealing Organisation	Original Requirements	Revised Requirements	Contributions	Pledges	Carryover	Total Resources Available	Unmet Requirements	% Covered
FAO	4,923,054	4,923,054	2,015,608	-	-	2,015,608	2,907,446	40.9%
IOM	1,885,000	2,467,128	-	-	-	-	2,467,128	0.0%
OCHA	2,058,380	2,594,718	1,906,565	-	-	1,906,565	688,153	73.5%
UNDP	400,000	830,000	-	-	-	-	830,000	0.0%
UNDP/ UNSECOORD	646,000	956,000	792,700	-	-	792,700	163,300	82.9%
UNFPA	476,000	347,900	90,000	-	-	90,000	257,900	25.9%
UNHCR	15,053,601	15,485,601	11,654,410	-	122,243	11,776,653	3,708,948	76.0%
UNICEF	7,650,000	7,617,650	4,502,864	909,000	-	5,411,864	2,205,786	71.0%
WFP	92,465,862	104,400,000	82,041,171	-	-	82,041,171	22,358,829	78.6%
WHO	2,343,158	3,257,962	-	-	-	-	3,257,962	0.0%
GRAND TOTAL	127,901,055	142,880,013	103,003,318	909,000	122,243	104,034,561	38,845,452	72.8%



**Table II : Consolidated Appeal for
Uganda 2004**
List of Contributions
as of 19 October 2004
<http://www.reliefweb.int/fts>

Compiled by OCHA on the basis of information provided by donors and the respective appealing organisation

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Part A - Non food

Donor	Channel	Project Code	Sector/activity	Amount US\$
Allocations of unearmarked funds by UN agencies	UNHCR	UGA-04/MS02	Multisectoral assistance to refugees	5,293,292
Carry Over	UNHCR	UGA-04/MS02	Multi-sectoral assistance to refugees	122,243
Australia	UNICEF	UGA-04/UNICEF	Awaiting field office allocation	427,214
Belgium	UNHCR	UGA-04/MS02	International protection and humanitarian assistance for Sudanese refugees in Uganda	601,685
Canada	OCHA	UGA-04/CSS01	Coordination of humanitarian assistance	150,207
Denmark	UNHCR	UGA-04/MS02	Multisectoral assistance to refugees	56,634
European Commission	OCHA	UGA-04/CSS01	Facilitation of coordination of humanitarian assistance within the aid community. Strengthening of coordination of humanitarian assistance at district level. HIC: Strengthen information management (80% has been received - US\$ 364,929)	456,161
Germany	UNHCR	UGA-04/MS02	Multi-sectoral assistance and protection	304,507
Italy	UNHCR	UGA-04/MS02	Multi-sectoral assistance to refugees	490,196
Italy	UNICEF	UGA-04/P/HR/RL02	Child protection	624,220
Japan	UNHCR	UGA-04/MS02	Multi-sectoral assistance to refugees	1,500,000
Netherlands	FAO	UGA-04/A01	Emergency distribution of input to conflict affected IDPs and coordination of emergency agriculture interventions	480,000
Netherlands	OCHA	UGA-04/CSS01	Facilitation of coordination of humanitarian assistance within the aid community. Strengthening of coordination of humanitarian assistance at district level. HIC: Strengthen information management	333,000
Netherlands	UNICEF	UGA-04/P/HR/RL02	Child protection	500,000
Private	UNFPA	UGA-04/H05	Provision of HIV/AIDS prevention services in the IDP camps	90,000
Private	UNHCR	UGA-04/MS02	Multi-sectoral assistance to refugees	11,769
South Africa	UNICEF	UGA-04/P/HR/RL02	Child protection	7,599
Spain	UNHCR	UGA-04/MS02	Multisectoral assistance to refugees	101,790
Sweden	FAO	UGA-04/A01	Emergency distribution of input to conflict affected IDPs and coordination of emergency agriculture interventions	649,305

UGANDA

**Table II : Consolidated Appeal for
Uganda 2004**

List of Contributions

as of 19 October 2004
<http://www.reliefweb.int/fts>

Compiled by OCHA on the basis of information provided by donors and the respective appealing organisation

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Sweden	OCHA	UGA-04/CSS01	Facilitation of coordination of humanitarian assistance within the aid community. Strengthening of coordination of humanitarian assistance at district level. HIC: Strengthen information management	267,222
Sweden	UNICEF	UGA-04/E01	Education	120,710
Sweden	UNICEF	UGA-04/H02	Health and nutrition	160,948
Sweden	UNICEF	UGA-04/P/HR/RL02	Child protection	555,082
Sweden	UNICEF	UGA-04/WS01	Water and sanitation	241,421
Switzerland	FAO	UGA-04/A01	Emergency distribution of input to conflict affected IDPs and coordination of emergency agriculture interventions	236,303
Switzerland	OCHA	UGA-04/CSS01	To strengthen the structure of the Ugandan DDMC and for any emergency measures linked to its role and responsibilities in the domain of humanitarian coordination in northern Uganda	199,975
United Kingdom	UNHCR	UGA-04/MS02	Multisectoral assistance to refugees	41,661
United Kingdom	UNICEF	UGA-04/P/HR/RL02	Child protection	1,865,670
United States	FAO	UGA-04/A01	Emergency distribution of input to conflict affected IDPs and coordination of emergency agriculture interventions	250,000
United States	FAO	UGA-04/A01	Emergency distribution of input to conflict affected IDPs and coordination of emergency agriculture interventions	400,000
United States	OCHA	UGA-04/CSS01	Facilitation of coordination of humanitarian assistance within the aid community. Strengthening of coordination of humanitarian assistance at district level. HIC: Strengthen information management	500,000
United States	UNDP/UNSE UGA-04/S01 COORD		Field security support (Funds administered by UNDP)	500,000
United States	UNDP/UNSE UGA-04/S01 COORD		Field security support (Funds administered by UNDP)	292,700
United States	UNHCR	UGA-04/MS02	Multi-sectoral assistance to refugees	3,252,876
United States	UNICEF	UGA-04/H02	Health coordination	250,000
United States	UNICEF	UGA-04/WS01	School and community sanitation, hygiene and water for IDP camps in northern and eastern Uganda	659,000
Total non food				21,993,390

UGANDA

**Table II : Consolidated Appeal for
Uganda 2004**
List of Contributions
as of 19 October 2004
<http://www.reliefweb.int/fts>

Compiled by OCHA on the basis of information provided by donors and the respective appealing organisation

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Part B - Food aid

Donor	Food type	Food (MTs)	Amount US\$
Austria		TBI	475,031
Belgium		TBI	609,014
Belgium		TBI	1,500,000
Canada		to be provided	5,313,000
Canada	Beans	961	735,294
Canada	Various	831	902,256
Denmark		TBI	92,354
Denmark	Peas	969	658,979
European Commission	Maize	16130	7,308,161
Finland	Maize	833	373,135
Finland	Maize	275	107,514
Germany	Cereals	2846	1,219,512
Ireland		TBI	601,685
Japan		TBI	1,818,181
Japan	Maize	77	33,369
Japan	Rice	1602	917,431
Japan	Various	500	300,000
Netherlands		TBI	1,470,444
Netherlands		TBI	2,220,000
Netherlands	Maize	2380	1,000,000
Netherlands	Various	3722	1,573,375
Sweden		TBI	879,092
Sweden		TBI	3,916,449
Sweden	Maize	2359	940,629
Switzerland	Cereals	961	390,625
United Kingdom		to be provided	9,174,312
United Kingdom	Maize	4303	1,865,671
United States		TBI	4,407,931

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Table II : Consolidated Appeal for Uganda 2004

List of Contributions

as of 19 October 2004
<http://www.reliefweb.int/fts>

Compiled by OCHA on the basis of information provided by donors and the respective appealing organisation

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United States		TBI	6,674,743
United States	Maize	3529	1,500,000
United States	Sorghum	13800	4,931,544
United States	Various	17010	8,866,040
United States	Various	11310	6,545,540
United States	Various	3640	2,719,860
Total food aid			82,041,171
Grand total			104,034,561

UGANDA

**Table III : Consolidated Appeal for
Uganda 2004**

List of Projects (grouped by sector), with funding status of each
as of 19 October 2004
<http://www.reliefweb.int/fts>

Compiled by OCHA on the basis of information provided by donors and the respective appealing organisation

Page 1 of 2

Project Code	Sector/Activity	Appealing Organisation	Original Requirements	Revised Requirements	Contributions/ Pledges/ Carryover	Unmet Requirements
AGRICULTURE						
UGA-04/A01	Emergency distribution of input to conflict affected IDPs and coordination of emergency agriculture interventions	FAO	2,903,000	2,903,000	2,015,608	887,392
UGA-04/A02	Provision of essential agricultural inputs to the disarmed and drought affected households in Kotido, Moroto and Nakapiripirit of Karamoja region	FAO	427,500	427,500	-	427,500
UGA-04/A03	Emergency provision of agricultural inputs and training to conflict affected households in the Rwenzori region of Uganda	FAO	467,250	467,250	-	467,250
UGA-04/A04	Provision of essential agricultural inputs to former rebels of UNFR II and households affected by HIV/AIDS in Arua, Yumbe, Moyo and Nebbi districts of West Nile Region	FAO	253,500	253,500	-	253,500
UGA-04/A05	Multiplication and distribution of high yielding and CMD tolerant cassava cuttings in Rwenzori region	FAO	871,804	871,804	-	871,804
Sub total for AGRICULTURE			4,923,054	4,923,054	2,015,608	2,907,446
COORDINATION AND SUPPORT SERVICES						
UGA-04/CSS01	Facilitation of coordination of humanitarian assistance within the aid community. Strengthening of coordination of humanitarian assistance at district level. HIC: Strengthen information management	OCHA	2,058,380	2,594,718	1,906,565	688,153
UGA-04/CSS02	Institutional capacity building and training for disaster management and preparedness	IOM	525,000	525,000	-	525,000
UGA-04/CSS03	Registration and monitoring with topical information provision of IDPs population	IOM	-	582,128	-	582,128
Sub total for COORDINATION AND SUPPORT SERVICES			2,583,380	3,701,846	1,906,565	1,795,281
ECONOMIC RECOVERY AND INFRASTRUCTURE						
UGA-04/ER/I01	Capacity enhancement for self-reliance in conflict/post-conflict areas in Uganda	UNDP	400,000	830,000	-	830,000
Sub total for ECONOMIC RECOVERY AND INFRASTRUCTURE			400,000	830,000	-	830,000
EDUCATION						
UGA-04/E01	Education	UNICEF	1,500,000	1,500,000	120,710	1,379,290
Sub total for EDUCATION			1,500,000	1,500,000	120,710	1,379,290
FOOD						
UGA-04/F01	Targeted food assistance for relief and recovery of refugees, displaced persons and vulnerable groups in Uganda (PRRO 10121.0) [REVISED ACCORDING TO MOST RECENT NEEDS ASSESSMENT]	WFP	92,465,862	104,400,000	82,041,171	22,358,829
Sub total for FOOD			92,465,862	104,400,000	82,041,171	22,358,829
HEALTH						
UGA-04/H01	Control and prevention of common disease especially epidemic potential diseases	WHO	2,343,158	2,343,158	-	2,343,158
UGA-04/H02	Health and nutrition	UNICEF	2,646,000	1,670,000	410,948	1,259,052
UGA-04/H03	Adolescent's rights to self-protection	UNICEF	600,000	1,093,650	-	1,093,650
UGA-04/H04	Reproductive health project for internally displaced persons in Acholi sub-region	UNFPA	111,000	111,000	-	111,000
UGA-04/H05	Provision of HIV/AIDS prevention services in the IDP camps	UNFPA	365,000	236,900	90,000	146,900

UGANDA

**Table III : Consolidated Appeal for
Uganda 2004**

List of Projects (grouped by sector), with funding status of each
as of 19 October 2004
<http://www.reliefweb.int/fts>

Compiled by OCHA on the basis of information provided by donors and the respective appealing organisation

Page 2 of 2

Project Code	Sector/Activity	Appealing Organisation	Original Requirements	Revised Requirements	Contributions/ Pledges/ Carryover	Unmet Requirements
UGA-04/H06	Response to the Health Crisis Affecting IDPs in Northern Uganda	WHO	-	914,804	-	914,804
Sub total for HEALTH			6,065,158	6,369,512	500,948	5,868,564
MULTI-SECTOR						
UGA-04/MS01	Demobilisation, repatriation, rehabilitation and reintegration of reporters and children under the Amnesty Act 2000	IOM	745,000	745,000	-	745,000
UGA-04/MS02	Multi-sectoral assistance to refugees	UNHCR	15,053,601	15,485,601	11,776,653	3,708,948
Sub total for MULTI-SECTOR			15,798,601	16,230,601	11,776,653	4,453,948
PROTECTION/HUMAN RIGHTS/RULE OF LAW						
UGA-04/P/HR/RL01	Relief and return planning for resettlement assistance to IDPs in northern Uganda	IOM	615,000	615,000	-	615,000
UGA-04/P/HR/RL02	Rights of children in armed conflict	UNICEF	1,344,000	1,344,000	3,552,571	(2,208,571)
Sub total for PROTECTION/HUMAN RIGHTS/RULE OF LAW			1,959,000	1,959,000	3,552,571	(1,593,571)
SECTOR NOT YET SPECIFIED						
UGA-04/UNICEF	Awaiting confirmation	UNICEF	-	-	427,214	(427,214)
Sub total for SECTOR NOT YET SPECIFIED			-	-	427,214	(427,214)
SECURITY						
UGA-04/S01	Field security support	UNDP/UNSECO ORD	646,000	646,000	792,700	(146,700)
UGA-04/S02	Recruit a Deputy Field Security Coordination Officer (DFSCO)	UNDP/UNSECO ORD	-	310,000	-	310,000
Sub total for SECURITY			646,000	956,000	792,700	163,300
WATER AND SANITATION						
UGA-04/WS01	School and community sanitation, hygiene & water for IDP camps in northern and eastern Uganda	UNICEF	1,560,000	2,010,000	900,421	1,109,579
Sub total for WATER AND SANITATION			1,560,000	2,010,000	900,421	1,109,579
Grand Total			127,901,055	142,880,013	104,034,561	38,845,452

UGANDA

Table IV : Consolidated Appeal for Uganda 2004

List of Contributions (grouped by sector)
as of 19 October 2004
<http://www.reliefweb.int/fts>

Compiled by OCHA on the basis of information provided by donors and the respective appealing Agency.

Page 1 of 3

Donor	Channel	Project code	Amount US\$
AGRICULTURE			
Netherlands	FAO	UGA-04/A01	480,000
Sweden	FAO	UGA-04/A01	649,305
Switzerland	FAO	UGA-04/A01	236,303
United States	FAO	UGA-04/A01	250,000
United States	FAO	UGA-04/A01	400,000
Subtotal for AGRICULTURE			2,015,608
COORDINATION AND SUPPORT SERVICES			
Canada	OCHA	UGA-04/CSS01	150,207
European Commission	OCHA	UGA-04/CSS01	456,161
Netherlands	OCHA	UGA-04/CSS01	333,000
Sweden	OCHA	UGA-04/CSS01	267,222
Switzerland	OCHA	UGA-04/CSS01	199,975
United States	OCHA	UGA-04/CSS01	500,000
Subtotal for COORDINATION AND SUPPORT SERVICES			1,906,565
EDUCATION			
Sweden	UNICEF	UGA-04/E01	120,710
Subtotal for EDUCATION			120,710
FOOD			
Austria	WFP	UGA-04/F01	475,031
Belgium	WFP	UGA-04/F01	609,014
Belgium	WFP	UGA-04/F01	1,500,000
Canada	WFP	UGA-04/F01	735,294
Canada	WFP	UGA-04/F01	5,313,000
Canada	WFP	UGA-04/F01	902,256
Denmark	WFP	UGA-04/F01	658,979
Denmark	WFP	UGA-04/F01	92,354
European Commission	WFP	UGA-04/F01	7,308,161
Finland	WFP	UGA-04/F01	107,514
Finland	WFP	UGA-04/F01	373,135
Germany	WFP	UGA-04/F01	1,219,512
Ireland	WFP	UGA-04/F01	601,685
Japan	WFP	UGA-04/F01	917,431
Japan	WFP	UGA-04/F01	1,818,181
Japan	WFP	UGA-04/F01	300,000
Japan	WFP	UGA-04/F01	33,369
Netherlands	WFP	UGA-04/F01	1,470,444
Netherlands	WFP	UGA-04/F01	2,220,000
Netherlands	WFP	UGA-04/F01	1,573,375

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Table IV : Consolidated Appeal for Uganda 2004

List of Contributions (grouped by sector)
as of 19 October 2004
<http://www.reliefweb.int/fts>

Compiled by OCHA on the basis of information provided by donors and the respective appealing Agency.

Page 2 of 3

Donor	Channel	Project code	Amount US\$
Netherlands	WFP	UGA-04/F01	1,000,000
Sweden	WFP	UGA-04/F01	879,092
Sweden	WFP	UGA-04/F01	3,916,449
Sweden	WFP	UGA-04/F01	940,629
Switzerland	WFP	UGA-04/F01	390,625
United Kingdom	WFP	UGA-04/F01	9,174,312
United Kingdom	WFP	UGA-04/F01	1,865,671
United States	WFP	UGA-04/F01	6,545,540
United States	WFP	UGA-04/F01	4,407,931
United States	WFP	UGA-04/F01	6,674,743
United States	WFP	UGA-04/F01	2,719,860
United States	WFP	UGA-04/F01	4,931,544
United States	WFP	UGA-04/F01	8,866,040
United States	WFP	UGA-04/F01	1,500,000
Subtotal for FOOD			82,041,171
HEALTH			
Private	UNFPA	UGA-04/H05	90,000
Sweden	UNICEF	UGA-04/H02	160,948
United States	UNICEF	UGA-04/H02	250,000
Subtotal for HEALTH			500,948
MULTI-SECTOR			
Allocations of unearmarked funds by UN agencies	UNHCR	UGA-04/MS02	5,293,292
Allocations of unearmarked funds by UN agencies	UNHCR	UGA-04/MS02	122,243
Belgium	UNHCR	UGA-04/MS02	601,685
Denmark	UNHCR	UGA-04/MS02	56,634
Germany	UNHCR	UGA-04/MS02	304,507
Italy	UNHCR	UGA-04/MS02	490,196
Japan	UNHCR	UGA-04/MS02	1,500,000
Private	UNHCR	UGA-04/MS02	11,769
Spain	UNHCR	UGA-04/MS02	101,790
United Kingdom	UNHCR	UGA-04/MS02	41,661
United States	UNHCR	UGA-04/MS02	3,252,876
Subtotal for MULTI-SECTOR			11,776,653
PROTECTION/HUMAN RIGHTS/RULE OF LAW			
Italy	UNICEF	UGA-04/P/HR/RL02	624,220
Netherlands	UNICEF	UGA-04/P/HR/RL02	500,000
South Africa	UNICEF	UGA-04/P/HR/RL02	7,599
Sweden	UNICEF	UGA-04/P/HR/RL02	555,082

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Table IV : Consolidated Appeal for Uganda 2004

List of Contributions (grouped by sector)
as of 19 October 2004
<http://www.reliefweb.int/fts>

Compiled by OCHA on the basis of information provided by donors and the respective appealing Agency.

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Donor	Channel	Project code	Amount US\$
United Kingdom	UNICEF	UGA-04/P/HR/RL02	1,865,670
Subtotal for PROTECTION/HUMAN RIGHTS/RULE OF LAW			3,552,571
SECTOR NOT YET SPECIFIED			
Australia	UNICEF	UGA-04/UNICEF	427,214
Subtotal for SECTOR NOT YET SPECIFIED			427,214
SECURITY			
United States	UNDP/UNSECOORD	UGA-04/S01	500,000
United States	UNDP/UNSECOORD	UGA-04/S01	292,700
Subtotal for SECURITY			792,700
WATER AND SANITATION			
Sweden	UNICEF	UGA-04/WS01	241,421
United States	UNICEF	UGA-04/WS01	659,000
Subtotal for WATER AND SANITATION			900,421
Grand Total:			104,034,561

UGANDA

**Table V & VI : Total Contributions per Donor: Consolidated Appeal and Total Humanitarian Assistance
Uganda 2004**
19 October 2004

Table V: Consolidated Appeal

Total Contributions per Donor (to projects listed in the Consolidated Appeal) [carry over not included]

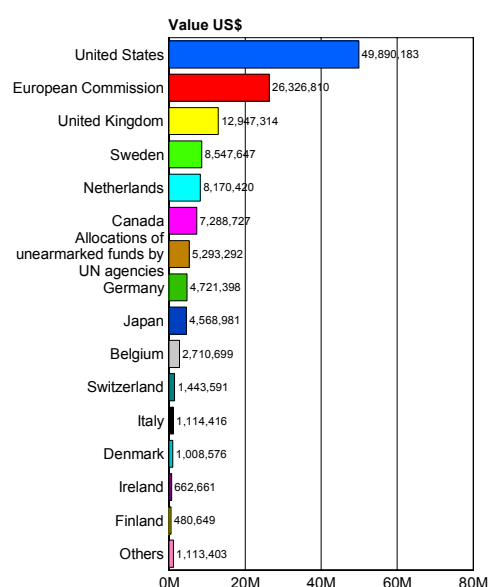
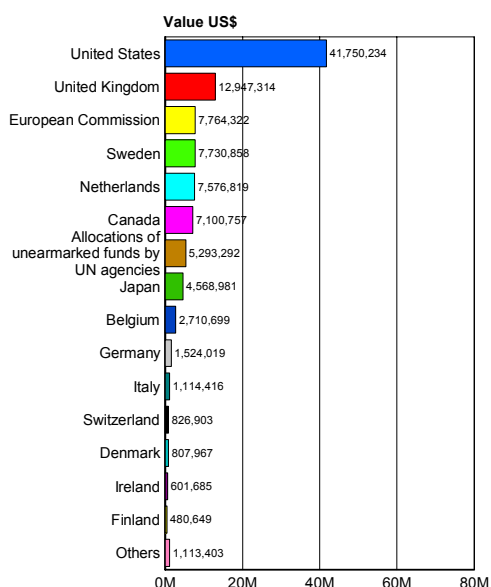
Donor	Value US\$	% of funding
United States	41,750,234	40.2%
United Kingdom	12,947,314	12.5%
European Commission	7,764,322	7.5%
Sweden	7,730,858	7.4%
Netherlands	7,576,819	7.3%
Canada	7,100,757	6.8%
Allocations of unearmarked funds by UN agencies	5,293,292	5.1%
Japan	4,568,981	4.4%
Belgium	2,710,699	2.6%
Germany	1,524,019	1.5%
Italy	1,114,416	1.1%
Switzerland	826,903	0.8%
Denmark	807,967	0.8%
Ireland	601,685	0.6%
Finland	480,649	0.5%
Others	1,113,403	1.1%
Grand Total:	103,912,318	100.0%

Table VI: Total Humanitarian Assistance

Total Humanitarian Assistance per Donor *
(carry over not included)

Donor	Value US\$	% of funding
United States	49,890,183	36.6%
European Commission	26,326,810	19.3%
United Kingdom	12,947,314	9.5%
Sweden	8,547,647	6.3%
Netherlands	8,170,420	6.0%
Canada	7,288,727	5.3%
Allocations of unearmarked funds by UN agencies	5,293,292	3.9%
Germany	4,721,398	3.5%
Japan	4,568,981	3.4%
Belgium	2,710,699	2.0%
Switzerland	1,443,591	1.1%
Italy	1,114,416	0.8%
Denmark	1,008,576	0.7%
Ireland	662,661	0.5%
Finland	480,649	0.4%
Others	1,113,403	0.8%
Grand Total:	136,288,767	100%

*) Includes contributions to the Consolidated Appeal and additional contribution outside of the Consolidated Appeal Process (bilateral, Red Cross, etc...)



UGANDA

**Table VII: Consolidated Appeal for
Uganda 2004**
Other Contributions (to humanitarian projects not listed in the Consolidated Appeal)
as of 19 October 2004
<http://www.reliefweb.int/fts>

Note that this table is comprehensive to the extent that decisions have been reported to OCHA

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Date	Donor	Channel	Description	Value US\$
Canada				
5 Feb 04	Canada	ICRC	Humanitarian assistance to women, socially vulnerable and IDPs	187,970
Subtotal for Canada				187,970
Denmark				
9 Feb 04	Denmark	SC Denmark	Food aid and education	200,609
Subtotal for Denmark				200,609
European Commission				
9 Jun 04	European Commission	ACF-France	Emergency programme in Northern Uganda	1,139,706
3 Mar 04	European Commission	AVSI	Continued emergency assistance to war-affected population in Northern	3,109,428
3 Mar 04	European Commission	CESVI	Improvement of the hygienic conditions of IDPs in Apac District	996,346
3 Mar 04	European Commission	CONCERN	Emergency water and sanitation project (EWASP)	1,429,316
3 Mar 04	European Commission	GOAL	Emergency public health interventions amongst conflict-affected populations in Pader District, Northern Uganda.	683,791
9 Jun 04	European Commission	ICRC	Improvement of living conditions, health and dignity of vulnerable IDP households in Kitgum and Pader Districts	1,384,804
3 Mar 04	European Commission	MSF, Netherlands	Nutritional and medical emergency relief operations in Lira	1,243,781
9 Jun 04	European Commission	MSF-France	Assistance to IDPs and insecure affected local population in Teso region	1,225,490
9 Jun 04	European Commission	OXFAM GB	Humanitarian assistance to conflict-affected people in Kitgum and Pader Districts	1,593,137
9 Jun 04	European Commission	UN Agencies, NGOs and Red Cross	Humanitarian aid in favour of the people of Uganda to relieve vulnerable population groups affected by insecurity and climatic hazards	5,756,689
Subtotal for European Commission				18,562,488
Germany				
12 Feb 04	Germany	CARITAS	Blankets, food aid and household goods for 25,000 IDPs	264,357
30 Sep 04	Germany	DCV	Humanitarian assistance	300,887
30 Apr 04	Germany	DCV	Food aid for civil war victims	365,854
26 May 04	Germany	Diakonia	Improvement of the food situation and supply of IDPs	473,934
25 Mar 04	Germany	DWH/GAA	Providing ovens, charcoal, clothes and NFI-kits to neediest IDP-families in cities of Lira and Kalongo	315,414
8 Jul 04	Germany	DWH/GAA	Support and repatriation of Ruandian refugees in Uganda	487,211
23 Aug 04	Germany	ICRC	Assistance and protection activities	300,842

UGANDA

**Table VII: Consolidated Appeal for
Uganda 2004**
Other Contributions (to humanitarian projects not listed in the Consolidated Appeal)
as of 19 October 2004
<http://www.reliefweb.int/fts>

Note that this table is comprehensive to the extent that decisions have been reported to OCHA

Page 2 of 3

Date	Donor	Channel	Description	Value US\$
6 Jul 04	Germany	ICRC	Protection and multi-sectoral humanitarian assistance	304,507
10 Feb 04	Germany	Missionszentrale der Franziskaner e.V.	Medicals and food aid	121,891
13 Aug 04	Germany	Missionszentrale der Franziskaner e.V.	Emergency provision for IDPs (medicine, blankets, flour and beans)	127,557
17 Feb 04	Germany	RC/Germany	Provision of basic non-food items for IDPs	134,925
Subtotal for Germany				3,197,379
Ireland				
23 Apr 04	Ireland	Trocaire	Improvement in water and sanitation conditions in IDP camps in Gulu	60,976
Subtotal for Ireland				60,976
Netherlands				
12 May 04	Netherlands	AVSI	Emergency assistance to IDPs living in camps with a special emphasis on women and children	297,687
25 May 04	Netherlands	CESVI	Improvement of living conditions and access to safe water of IDPs in Kalongo	295,914
Subtotal for Netherlands				593,601
Sweden				
7 Jul 04	Sweden	SC Denmark	Emergency education programme for IDP children	816,789
Subtotal for Sweden				816,789
Switzerland				
13 Aug 04	Switzerland	MSF - Switzerland	Gulu programme (IDPs and Street children)	304,688
30 Jul 04	Switzerland	MSF - Switzerland	Gulu programme (IDPs and street children)	312,000
Subtotal for Switzerland				616,688
United States				
5 May 04	United States	AAH	Nutrition programme [USAID/OFDA]	500,000
20 Aug 04	United States	AVSI	Emergency relief commodities, shelter, water and sanitation in Pader, Gulu, Kitgum	560,400
20 Aug 04	United States	CCF	Protection, sexual and gender-based violence in Lira	369,916
20 Aug 04	United States	CRS	Water and sanitation in Kitgum	428,084
5 May 04	United States	GOAL	Health and nutrition programme, shelter, emergency relief commodities [USAID/OFDA]	820,171
5 May 04	United States	IFRC	Refugee assistance [State/PRM]	50,000
23 Sep 03	United States	IMC	To prevent and respond to sexual and gender-based violence in Hoima and Mbarara districts (USAID/BPRM)	259,887

UGANDA

**Table VII: Consolidated Appeal for
Uganda 2004**

Other Contributions (to humanitarian projects not listed in the Consolidated Appeal)
as of 19 October 2004
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Note that this table is comprehensive to the extent that decisions have been reported to OCHA

Page 3 of 3

Date	Donor	Channel	Description	Value US\$
5 May 04	United States	IMC	Health programme [USAID/OFDA]	695,000
5 May 04	United States	IRC	Health, watsan programme [USAID/OFDA]	749,985
20 Aug 04	United States	IRC	Refugee assistance (STATE/PRM)	821,000
20 Aug 04	United States	LWR	Water and sanitation, emergency relief commodities in Katakwi,	571,203
5 May 04	United States	MEDAIR	Watsan, NFI [USAID/OFDA]	273,650
20 Aug 04	United States	Northwest Medical	Health assistance in Lira(USAID/OFDA)	530,574
5 May 04	United States	OFDA	Administrative costs [USAID/OFDA]	11,500
20 Aug 04	United States	RC/Uganda	Health,water and sanitation and shelter assistance in northern Uganda(USAID/OFDA)	498,582
5 May 04	United States	WV	Water and sanitation, shelter and emergency relief commodities [USAID/OFDA]	999,997
Subtotal for United States				8,139,949
Grand Total:				32,376,449

ANNEX II

DONOR RESPONSE TO THE 2003 APPEAL

**Table I : Consolidated Appeal for
Uganda 2003**

Requirements and Contributions per Appealing Organisation
as of 19 October 2004
<http://www.reliefweb.int/fts>

Compiled by OCHA on the basis of information provided by donors and the respective appealing organisation

Appealing Organisation	Original Requirements	Revised Requirements	Contributions	Pledges	Carryover	Total Resources Available	Unmet Requirements	% Covered
AA	180,288	180,288	-	-	-	-	180,288	0.0%
CARE INT	400,000	400,000	-	-	-	-	400,000	0.0%
FAO	3,728,930	3,728,930	-	-	-	-	3,728,930	0.0%
IOM	10,965,805	10,965,805	233,918	-	-	233,918	10,731,887	2.1%
NRC	798,500	798,500	-	-	-	-	798,500	0.0%
OCHA	1,340,972	1,230,199	565,449	-	-	565,449	664,750	46.0%
OXFAM GB	801,843	801,843	-	-	-	-	801,843	0.0%
UNDP	330,000	330,000	-	-	-	-	330,000	0.0%
UNDP/ UNSECOORD	480,900	480,900	-	-	-	-	480,900	0.0%
UNFPA	610,000	610,000	-	-	-	-	610,000	0.0%
UNHCR	15,774,205	15,774,205	14,185,962	-	849,962	15,035,924	738,281	95.3%
UNICEF	5,740,000	5,740,000	3,851,211	-	-	3,851,211	1,888,789	67.1%
WFP	46,892,036	106,600,000	103,880,678	-	-	103,880,678	2,719,322	97.4%
WHO	495,000	495,000	-	-	-	-	495,000	0.0%
GRAND TOTAL	88,538,479	148,135,670	122,717,218	0	849,962	123,567,180	24,568,490	83.4%

ANNEX III

INTERNATIONAL FEDERATION OF RED CROSS AND RED CRESCENT SOCIETIES

SUPPORT TO UGANDA RED CROSS SOCIETY

National Context

The present political debate in Uganda is around the question of who will succeed President Yoweri Museveni – if he does not seek a third term additional to the two constitutional terms in office, and the granting of federal status to Buganda in Central Uganda. The armed conflicts between the rebel LRA and government troops in the North have caused a humanitarian crisis. Negotiations have been conducted for the repatriation of Rwandan refugees in camps currently managed by the Uganda Red Cross Society. The government recently launched a new initiative to seek reconciliation with its neighbours, and it is now moving to improve relations with Rwanda and Sudan. Health epidemics such as malaria, measles, and meningitis are frequent. It is estimated that 54% of the population still lacks access to clean drinking water. Less than half of the population lives within 5 km of a health facility, and there is only one doctor for every 27,000 Ugandans. Although the infection rate is reported to be declining, HIV/AIDS remains a major public health problem and has led to an estimated 800,000 deaths and created an estimated 1.7 million orphans.

The vulnerable groups in Uganda consist of 1.6 million people registered as IDP, about 188,000 refugees and abducted children and adults. A significant number of refugees and IDP lack access to adequate potable water, food, land, shelter and basic services. UN agencies and NGOs have continued to support government efforts towards achieving the objectives of alleviation of human suffering; protection and advancement of human rights; provision of basic social services; reintegration of ex-combatants and returnees; and formulation of a sustainable national programme for recovery.

Priorities

During its participatory strategic planning process, the Uganda Red Cross Society analysed its organisational strengths and weaknesses and came up with the following priorities and programmes, to:

- Review/develop and strengthen programmes for effective service delivery; Facilitate vulnerable communities in improving their health status by reducing morbidity and mortality arising from common diseases and health emergencies; Predict, prevent and mitigate the impact of disasters; Assist families who are scattered, separated and without timely news of armed conflicts, internal unrest, violence, and/or natural calamities; Mobilise the youth as the most active volunteer force to respond to the needs of vulnerable people in their community and to disseminate the ideals of Uganda Red Cross; Expand Uganda Red Cross' funding sources by developing and implementing an appropriate resource mobilisation strategy;
- Improve and maintain the corporate image of Uganda Red Cross; Strengthen and maintain the structure, policies, constitution, procedures and systems of Uganda Red Cross; Improve networking systems to make use of existing expertise within the Movement in line with the Seville Agreement and with other organisations as per Strategy 2010; Develop and implement volunteer and membership management policy guidelines in line with Federation Strategy 2010 and Ouagadougou Declaration; Strengthen the capacity of the national society's branches for effective service delivery; Develop and maintain a management information system to facilitate the various activities of the national society at headquarters and sub-branch levels.

Movement Context

Bilateral programmes between the URC and Danish Red Cross focus on health services, HIV/AIDS prevention and care and a youth programme. The American Red Cross supports the HIV/AIDS programme linked to blood donor services. The Swedish Red Cross provides technical assistance to branch capacity building through a number of twinning programmes in Uganda, while the German Red Cross continues to co-fund emergency operations based on national and international appeals. The ICRC has supported the URC in the field of preparedness, training and dissemination. It also co-funds the communication programme of the national society and contributes to branch capacity building.

The Federation programmes for the period 2004-07 will focus on crosscutting OD programme capacity building aspects and possible refugee programmes depending on the political developments in the region. The main challenge for the URC is to continue progressing towards the characteristics of a well functioning national society, while at the same time providing effective assistance to the most vulnerable; this includes more than 1.6 million internally displaced persons.

Primary support to the Uganda Red Cross from the Movement in 2002-2004

Partner	Health	Relief	Disaster Management	Humanitarian Values	Organisational Development	Other
ICRC			xx	xx		xx
Federation		xx			xx	
Danish Red Cross	xx		xx		xx	xx
Swedish Red Cross		xx	xx		xx	
Norwegian Red Cross	xx		xx		xx	
American Red Cross	xx		xx			
German Red Cross		xx	xx			
British Red Cross			xx		xx	xx
Netherlands Red Cross	xx		xx			xx
Finnish Red Cross						xx
Japan Red Cross		xx				
Spanish Red Cross						xx

STRENGTHENING THE NATIONAL SOCIETY

Organisational Development (OD)

The national society is a key actor within the humanitarian field in Uganda. Its chairman is a member of the Federation Board while the Secretary General was a trusted chairman of the RC-NET from 2000-2004. All national societies in the region have adopted 'Promotion of Red Cross Red Crescent Principles and Humanitarian Values' as one of the four core areas of the Federation's Strategy 2010. A Regional Communications Forum, a network of all national society communications officers from the region, was established in 2001. The capacity building aspects of humanitarian values are included in the OD programme.

The sub-regional office provides context-specific, tailor-made capacity-building and organisational development support to national societies, prioritised on the basis of in-country need and national society commitment to development. The Objective of the OD Programme is to improve the capacity of the Uganda Red Cross both at headquarters and branches to provide timely and effective response during disasters through adequate human and financial resources while upholding the fundamental principles and values of the Movement.

Expected results

It is expected that this OD intervention would help the National Society: - establish a strong and more focused senior management team; build institutional strength and dynamics; continually strengthen financial management systems and capacity; develop a strong and broad resource base; develop capacity to manage complex emergencies; develop and apply appropriate IT policies; participate in cross – border cooperation within the East Africa region.

COORDINATION, COOPERATION, AND STRATEGIC PARTNERSHIPS

The Federation East Africa sub – regional office covers Kenya, Rwanda, and Uganda. There are plans to incorporate Burundi and Tanzania by 2005. The sub-regional office has facilitated the development and updating of the CAS³⁴ and provided coordination services in the region to all National Societies. As the Secretariat's primary communication link with the National Societies in the region, the office has disseminated Federation policies and strategies and ensured knowledge sharing between different stakeholders in the region. It manages its resources and competencies for optimal assistance to the National Societies in the region and strives towards maximising sub-regional fundraising and resource mobilisation.

³⁴ CAS- Cooperation Agreement Strategy

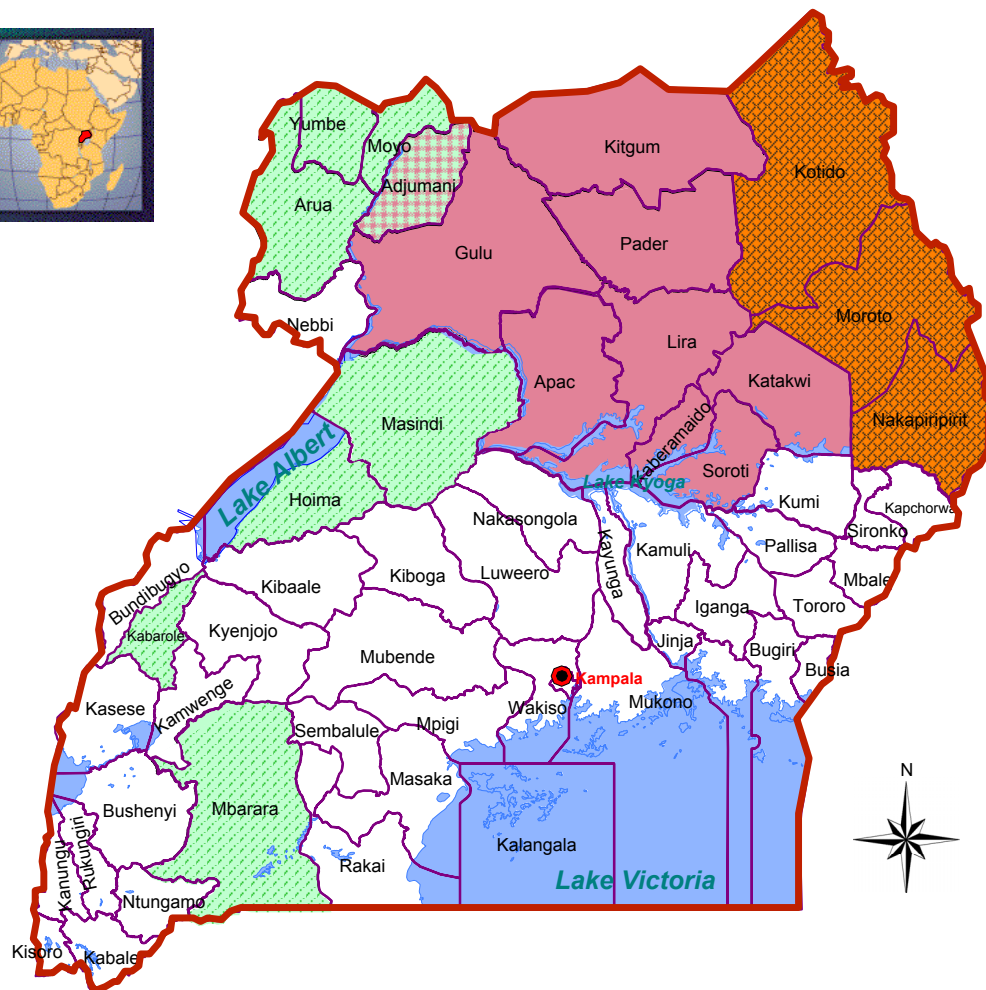
ANNEX IV

MAP OF CONFLICT-AFFECTED DISTRICTS AS OF SEPTEMBER 2004



OCHA - UGANDA

Affected Districts AS OF SEPTEMBER 2004



- Conflict Affected - Last Reported number of IDPs receiving relief food: 1,380,211**
- Refugees - Last Reported Number: 218,846**
- Drought Affected - Last Reported Number : 125,000**
- Adjumani district - Last Reported Number: 20,000 Ugandan nationals and 25,000 refugees displaced**

September 2004 - sources: WFP, UNHCR

ANNEX V

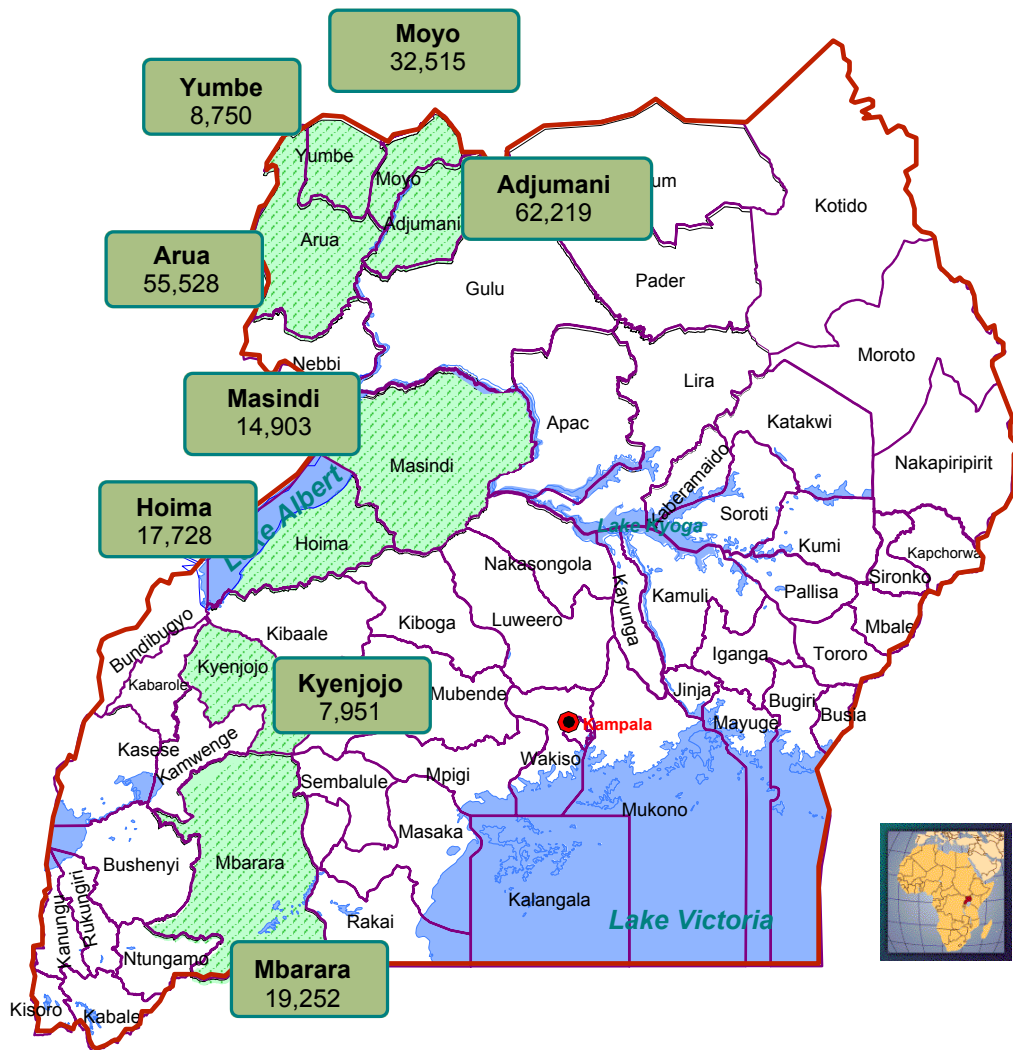
MAP OF REFUGEE LOCATIONS AS OF JULY 2004



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Refugees reported by District as of July 2004

Reported Number of Refugees by UNHCR: 218,846



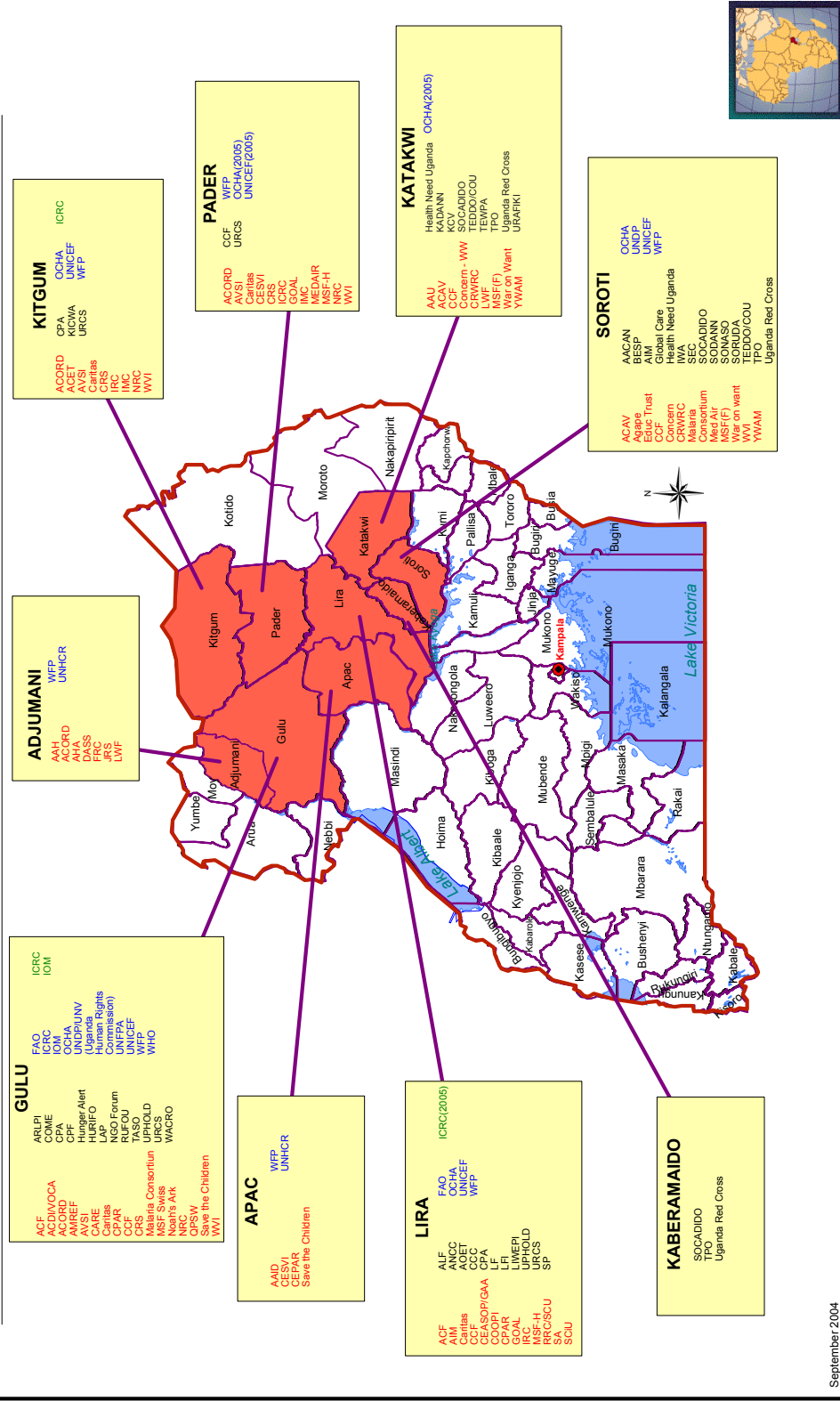
September t 2004

ANNEX VI



OCHA - UGANDA

International Organizations, Non-Governmental Organisations and UN Agencies based in conflict affected districts - as of September 2004



September 2004

ANNEX VII

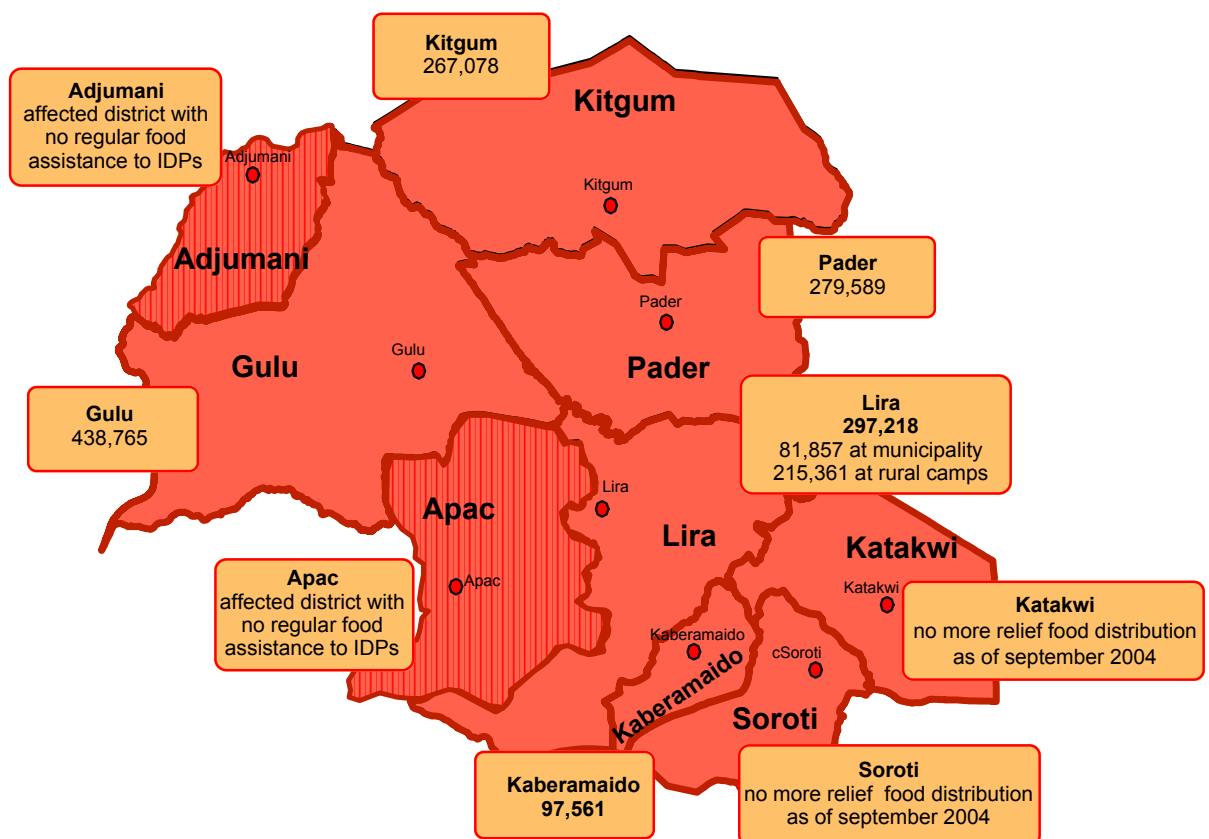


OCHA - UGANDA

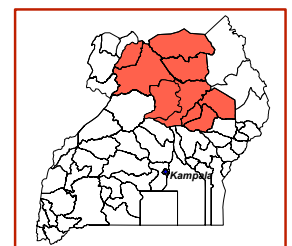
Number of IDPs benefiting from Relief Food in the conflict affected districts

AS OF SEPTEMBER 2004

Total number reported by WFP : 1,380,211



30 September 2004



ANNEX VIII

ACRONYMS AND ABBREVIATIONS

AACAN	Action Against Child Abuse and Neglect
AAH	Aktion Afrika Hilfe
AAU	Action Aid Uganda
ACF	Action Contre la Faim (Action Against Hunger)
ADEO	Arua District Education Office
ADF	Allied Democratic Forces
AHA	African Humanitarian Action
AIDS	Acquired Immuno Deficiency Syndrome
AMREF	African Medical and Research Foundation
ANC	Ante natal care
ARLPI	Acholi Leaders Peace Initiative
ART	Anti Retroviral Treatment
ARVs	Anti-Retroviral
AVSI	Associazione Volontari per il Servizio Internazionale
CAO	Chief Administrative Officer
CAP	Consolidated Appeal Process
CARE	Cooperation for Assistance and Relief Everywhere
CARITAS	International Conference of Catholic Churches
CBOs	Community Based Organisations
CCF	Christian Children's Fund
CEASOP	Collaborative Efforts to Alleviate Social Problems
CESVI	World Aid from Italy
CHAP	Common Humanitarian Action Plan
CONCERN	Concern
COOPI	Cooperazione Internazionale/Italy
CORPs	Community Resource Persons
CPA	Concerned Parents Association
CPAR	Canadian Physicians for Aid & Relief
CRC	Convention of the Rights of a Child
CRS	Catholic Relief Services
CSB	Corn Soya Blend
CSOs	Community Service Organisations
DAR	Development Assistance to Refugees
DAT	District AIDS Taskforce
DDRR	Demobilisation, Disarmament, Rehabilitation and Reintegration
DDHS	District Directorate of Health Services
DED	German Development Service
DFSCO	Deputy Field Security Coordinator
DHAC	District HIV/AIDS Committee
DHMT	District Health Management Team
DDMCs	District Disaster Management Committees
DG/NARC	Donor Group on Northern Uganda, Amnesty and Recovery from Conflict
DOTS	Directly Observed Treatment Strategy
DPT	Diphtheria, Pertussis and Tetanus
DRC	Democratic Republic of Congo
DWO	District Water Officer
ECD	Early Childhood Development
ECU	Emergency Coordination Unit
EmOC	Emergency Obstetric Care
FAO	Food and Agriculture Organisation (of the United Nations)
FFA	Food for assets

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GAA	German Agro Action
GAM	Global Acute Malnutrition
GBV	Gender-based Violence
GDP	Gross Domestic Product
GDS	German Development Services
GEF	Global Environmental Fund
GEM	Girls' Education Movement
GOAL	Irish NGO
GoS	Government of Sudan
GoU	Government of Uganda
GTZ	Deutsche Gesellschaft für Technische Zusammenarbeit
GUSCO	Gulu Support the Children Organisation
HA	Hunger Alert
HBC	Home-based Care
HC III	Health Centre III
HDI	Human Development Index/Indices
HIV	Human Immuno-deficiency Virus
HPCT	Hugh Pilkington Charitable Trust
HQs	Headquarters
HRs/RoL	Human Rights and Rule of Law
HURIFO	Human Rights Forum
IASC	Inter-Agency Standing Committee
ICADS	Information Collection, Analysis and Dissemination System
ICC	International Criminal Court
ICLA	Information, Counseling and Legal Aid
ICRC	International Committee of the Red Cross
IDP	Internally Displaced Person
IDU	Intravenous Drug Users
IEC	Information, Education and Communication
IFRC	International Federation of the Red Cross and Red Crescent Societies
IGAs	Income Generating Activities
ILO	International Labour Organization
IMAS	International Mine Action Standards
IMC	International Medical Corps
IMU	Information Management Unit (of UN OCHA)
Inter-Aid	Inter-Aid Uganda
IOM	International Organization for Migration
IRC	International Rescue Committee
ITNs	Insecticide Treated Nets
JRC	Jesuit Refugee Committee
JRS	Jesuit Refugee Service
KICWA	Kitgum Concerned Women's Association
KYU	Kyambogo University
LAP	Legal Aid Project
LC	Local Councils
LDU	Local Defence Units
LM	Land Mine
LRA	Lords' Resistance Army
LTSH	Land Transport Shipping and Handling
LWF	Lutheran World Federation
LWR	Lutheran World Relief
MAC	Mine Action Centre
MACWG	Mine Action Coordination Working Group
MAAIF	Ministry of Agriculture, Animal Industry and Fisheries

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MCH	Mother and Child Health
MDGs	Millennium Development Goals
MDRP	Multi Demobilisation and Reintegration Programme
M&E	Monitoring & Evaluation
MoE	Ministry of Education
MoH	Ministry of Health
MOSS	Minimum Operating Security Standards
MRE	Mine Risk Education
MSF	Médecins Sans Frontières
MSF/F	Médecins Sans Frontières/ France
MSF/Sw	Médecins Sans Frontières/ Switzerland
MSF/H	Médecins sans Frontières/ Holland
MTCT	Mother to Child Transmission
MT	Metric Tons
NRM-O	National Resistance Movement Organisation
NCDC	National Curriculum Development Centre
NFA	National Forest Authority
NFIs	Non-Food Items
NGOs	Non-Governmental Organisations
NRA	National Resistance Army
NRC	Norwegian Refugee Council
NTLP	National Tuberculosis and Leprosy Programme
O&M	Operation and Maintenance
OCHA	Office for the Coordination of Humanitarian Affairs
OFDA	Office for Foreign Development Assistance
OHCHR	Office of the High Commissioner for Human Rights
OIF	Operation Iron Fist
OIFII	Operation Iron Fist II
OPM	Office of the Prime Minister
OPV3	Oral Polio Vaccine
OVCs	Orphans and Vulnerable Children
OXFAM GB	Oxford Committee for Famine Relief (Great Britain)
PCTC	Pilot Community Therapeutic Care
PEAP	Poverty Eradication Action Plan
PEP	Post Exposure Prophylaxis
PHA	People Living with HIV/AIDS
PMTCT	Prevention of Mother to Child Transmission
PLWHA	Persons Living with HIV/AIDS
PoC	Protection of Civilians
PRRO	Protracted Relief and Recovery Operation (WFP)
PSPC	Private Sector promotion Centre
PWG	Protection Working Group
RDP	Recovery and Development Programme for Northern Uganda
RH	Reproductive Health
RUFOU	Rural Focus Uganda
SALW	Small Arms and Light Weapons
SC	Save the Children - Uganda
SC Dk	Save the Children Denmark
SCE	Self Coordinating Entity
SCiU	Save the Children in Uganda
SCU	Sponsoring Children Uganda
SEC	Soroti Environment Concern
SFC	Supplementary Feeding Centre
SGBV	Sexual and Gender-Based Violence
SMT	Security Management Team

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SORUDA	Soroti Rural Development Agency
SRS	Self-Reliance Strategy
STD	Sexually Transmitted Disease
STI	Sexually Transmitted Infection
SPLA/M	Sudan People's Liberation Army/Movement
SUFIGA	Support for income Generating Activities
SV	Sexual Violence
TASO	The AIDS Support Organisation
TBAs	Traditional Birth Attendants
TB	Tuberculosis
TEWPA	Teso Women Peace Activists
TFC	Therapeutic Feeding centre
ToTs	Training of Trainers
TPO	Transcultural Psycho-social Organisation
TT	Tetanus Toxoid
UAC	Uganda AIDS Commission
UHRC	Uganda Human Rights Commission
UK	United Kingdom
UN	United Nations
UNAIDS	United Nations Programme on HIV and AIDS
UNCT	UN Country Team
UNDP	United Nations Development Programme
UNEB	Uganda National Examination Board
UNEPI	Uganda National Expanded Programme for Immunisation
UNESCO	United Nations Educational, Scientific and Cultural Organization
UNFPA	United Nations Population Fund
UNGASS	United Nations General Assembly Special Session on AIDS
UNHCR	United Nations High Commissioner for Refugees
UNICEF	United Nations Children's Fund
UNRF II	Uganda National Rescue Front II
UNSECOORD	United Nations Security Coordination Office
UNV	United Nations Volunteers
UPDF	Uganda People's Defense Forces
UPE	Universal Primary Education
URCS	Uganda Red Cross Society
USAID	United States Agency for International Development
UXO	Unexploded Ordnances
VAM	Vulnerability Assessment Mapping
VCT	Voluntary Counselling and Testing
VHCs	Village Health Committees
WACRO	War Affected Children's Rehabilitation Organisation
WatSan	Water and Sanitation
WES	Water and Environmental Sanitation
WFP	World Food Programme
WHO	World Health Organization
WVI	World Vision International

Consolidated Appeal Feedback Sheet

If you would like to comment on this document please do so below and fax this sheet to + 41-22-917-0368 (Attn: CAP Section) or scan it and email us: CAP@ReliefWeb.int Comments reaching us before 28 February 2005 will help us improve the CAP in time for 2006. Thank you very much for your time.

Consolidated Appeals Process (CAP) Section, OCHA

Please write the name of the Consolidated Appeal on which you are commenting:

- 1. What did you think of the review of 2004?
How could it be improved?**

- 2. Is the context and prioritised humanitarian need clearly presented?
How could it be improved?**

- 3. To what extent do response plans address humanitarian needs?
How could it be improved?**

- 4. To what extent are roles and coordination mechanisms clearly presented?
How could it be improved?**

- 5. To what extent are budgets realistic and in line with the proposed actions?
How could it be improved?**

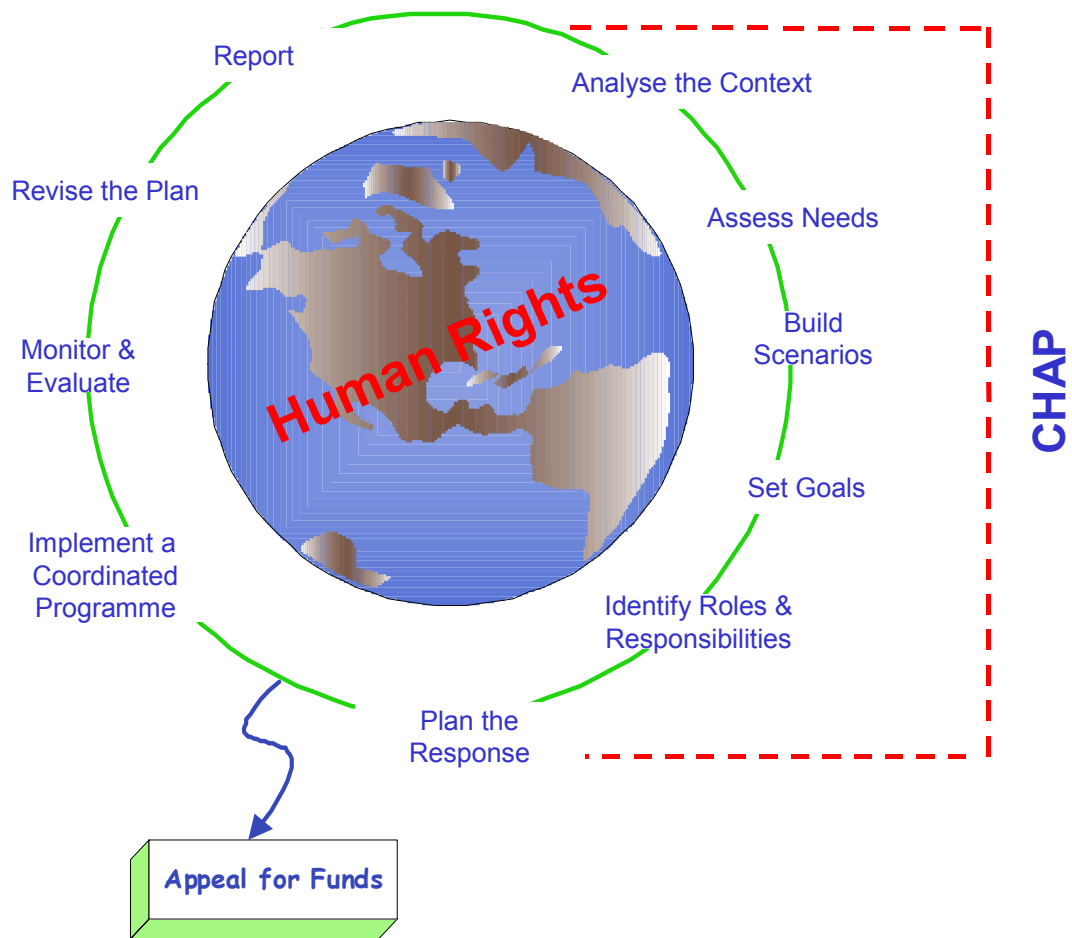
- 6. Is the presentation of the document lay-out and format clear and well written?
How could it be improved?**

Please make any additional comments on another sheet or by email.

Name:
Title & Organisation:
Email Address:

The Consolidated Appeals Process:

an inclusive, coordinated programme cycle in emergencies to:



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