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Country note****Uganda***Summary*

The Executive Director presents the country note for Uganda for a programme of cooperation for the period 2001 to 2005.

The situation of children and women

1. Over the past 15 years, Uganda has enjoyed a stable Government, sustained economic growth and rapid social development. Annual per capita income has increased from about \$186 in 1991/92 to \$346 in 1997/98. However, disparities in the distribution of wealth have widened, and the number of children whose rights are violated, or are at risk of being violated, is growing. It is estimated that almost 44 per cent of the country's 21 million people live in absolute poverty.

2. Uganda's robust macroeconomic stabilization has not been matched by a measurably positive transformation of

the social sector. This is due partly to HIV/AIDS, which poses the greatest challenge to Uganda's citizens and places a burden on the country's resources through rising medical expenditures, absenteeism from work, the need to train replacement labour and labour shortages stemming from HIV/AIDS mortality and morbidity. The agricultural sector has already been seriously affected by the epidemic, and national capacity-building efforts are endangered.

3. After a steady and impressive decline in the infant mortality rate since 1985, progress has levelled off during the 1990s to around 97 per 1,000 live births. The under-five mortality rate is 147 per 1,000 live births. Over one third of children under 35 months old are stunted, and the proportion who are wasted has more than doubled, indicating a significant increase in vulnerability and an undermining of children's right to nutrition and growth. Only 38 per cent of Uganda's children aged 12 to 23 months are fully vaccinated, compared to 81 per cent in 1990. Endemic malaria is the leading cause of child

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** An addendum to the present report containing the final country programme recommendation will be submitted to the Executive Board for approval at its second regular session of 2000.

mortality, responsible for up to 30 per cent of all deaths in the two- to four-year-old age group.

4. The maternal mortality rate, estimated at 506 per 100,000 live births, accounts for 17 per cent of all deaths among women 15 to 49 years of age. Such deaths are rooted in women's powerlessness and unequal access to employment, education, basic health and other resources.

5. Uganda's attempts to prevent and control HIV/AIDS have resulted in a decrease in the number of new cases in the 15- to 24-year-old age group. Nevertheless, the HIV seroprevalence rate remains dangerously high. More than 1.9 million people have already died from AIDS, and the number of children orphaned due to AIDS, estimated at 1.7 million, is expected to rise to 3.5 million by 2010. Approximately 26 per cent (43,000) of babies are infected through mother-to-child transmission every year, and two thirds of them do not live to see their second birthday. Adolescent girls aged 15 to 19 years are four to six times more likely to be infected than their male counterparts.

6. Since the January 1997 launching of the Universal Primary Education (UPE) initiative, which provides for free primary education for up to four children per family, annual enrolment has more than doubled from 2.9 million to 6.5 million. More children than ever are having their rights to education realized through UPE. However, the quality of education needs to be improved, and UNICEF is one of the key players seeking to meet the extraordinary challenges posed by 6.5 million children now in school in terms of quality and gender equity in access. The main factors that hamper the realization of girls' rights to education are early pregnancies, high drop-out rates, and poor sanitation facilities that prevent many of them from continuing once they reach maturity.

7. Insecurity, conflicts and continuous human rights violations affect 11 out of Uganda's 45 districts. With 533,000 internally displaced persons, children's rights to a family, parental support, and education and health services are undermined. The abduction of children in the north and west represents a major violation of the Convention on the Rights of the Child; more than 10,000 have been abducted and some have been recruited as child soldiers. Sexual abuse of children is frequently reported, the number of children living in the streets is increasing and 250,000 children work as domestic or agricultural labourers.

8. Attempts to engage civil society in the partnership process present a formidable challenge, given resource constraints and the difficulties of communication. However, citizens need to be empowered, and the voiceless

need to be heard in setting development priorities. Three major efforts to engage civil society in recent years deserve mention: the "Vision 2025" exercise; the Uganda Participatory Poverty Assessment Project; and the United Nations Common Country Assessment.

Lessons learned from past cooperation

9. The current country programme promotes government ownership and has gained credibility through the implementation of strategies that best serve the needs of children. Donors have translated their confidence in the programme into a 31 per cent increase in resources. In light of greater competition for dwindling resources, this increase is an indication of how well the programme is faring.

10. The challenges posed by HIV/AIDS continue to require a flexible response, including an increased focus on public health communication, counseling services and interventions at the community level, particularly in schools. The UNICEF-supported AIDS education project for schools was the first of its kind in Uganda, resulting in the integration of life skills and AIDS information in the curricula. The promotion of new approaches for orphan care, drawing on the collaborative energy of non-governmental organizations and community-based groups, should be further stressed.

11. UNICEF must continue to seek to ensure that equity issues pertaining to girls, children with disabilities and out-of-school children are adequately addressed in the government's Education Sector Investment Plan. A particularly useful form of alternative education — Complementary Opportunities for Primary Education — enables 8- to 14-year-olds who have never been to school to receive basic education. In the area of health, National Immunization Days have succeeded in achieving optimal coverage for oral polio vaccine (above 95 per cent), and future approaches to immunization must build on this positive experience to enable Uganda to regain its former immunization rates.

12. The tragic situation of children affected by armed conflict will continue to call for a three-pronged response, including: advocacy to draw the world's attention to the plight of children abducted by the Lord Resistance Army; support for the implementation of appropriate psychosocial care systems; and support for the provision of basic social services to conflict-affected areas.

13. The establishment of a Management Information System Unit (MISU) has improved UNICEF Uganda's control environment and risk assessment mechanisms. MISU acts as a central repository of management information and is charged with improving accountability and oversight functions by ensuring a consistent and effective interface between operations and programme activities. The concepts embodied by MISU — a proactive approach to control and transparency — are being promoted at the local level, with strong government leadership and support. The active reinforcement of already established systems of accountability and control must be maintained under the new country programme.

14. With respect to programme implementation: focused targeting is an effective way of ensuring that resources are directed towards the areas most in need; balance must be achieved between process and outcome to ensure tangible and sustainable benefits for women and children; intended to foster collaboration and the integration of programmes, the current programme component design was not comparable to that of government ministries and local authority departments, and clarification of the roles and responsibilities among counterparts and UNICEF needs to be addressed; and because the current programme is being implemented at district and three lower administrative levels in each of the 45 districts, it has been difficult to work within a common implementation and monitoring framework.

Proposed country programme strategy

15. The strategy for the 2001-2005 country programme responds to a vision of children in the twenty-first century in which their human rights are respected, protected and fulfilled. The movement towards these new norms will only emanate from operational strategies that pay greater attention to the fundamental and structural causes of people's blight and intergenerational poverty. In accordance with Uganda's decentralized system, the Poverty Eradication Action Plan, which provides a framework for the development of detailed sector plans and investment programmes, will serve as a basis for future collaboration between UNICEF and the Government of Uganda.

16. The overall programme goals are to: (a) identify duty-bearers and enable them to respect, protect and realize the universal rights of the Ugandan child; (b) ensure the realization of the rights of the most disadvantaged and vulnerable women and girls to free them from all forms of

discrimination; and (c) strengthen the capacity of communities to analyse, assess, set priorities, take action and monitor outcomes at the local level.

17. Three strategies will guide the programme: (a) advocacy and social mobilization to make the realization of children's rights a measure of social progress; (b) empowerment through household/community capacity-building that will help to widen community members' range of choices in facilitating their own survival, development and participation (more than 50,000 local council leaders will be trained as mobilizers to promote community capacity-building efforts, and they will be supported by extension workers at district, sub-county and parish levels); and (c) a renewed emphasis on building capacity for emergency preparedness and responsiveness, rather than cure or rehabilitation.

18. The *HIV/AIDS: rights to self-protection* programme will focus on: (a) adolescents' rights to friendly health and other social services and to accurate, timely information and psychosocial life skills, communicated through various channels and linked to an expansion of voluntary and confidential testing and counseling (VCTC); (b) VCTC for pregnant women, linked to an expanded application of antiretroviral drug therapy for the prevention of mother-to-child transmission, supported by community-based strategies designed to strengthen women's rights to take control of their sexual and reproductive life; and (c) supporting community-level capacity-building and action programmes to realize the rights of children affected by AIDS.

19. The *maternal well-being, early child care and development, and rights* programme will focus on activities that will strengthen the delivery of integrated primary health care services at district and subdistrict levels. These include: (a) the care and feeding of young children, with special attention to the 0- to 3-year-old age group; (b) combating communicable diseases, poor health and malnutrition to guard against impaired cognitive and emotional development; and (c) care for pregnant women.

20. The *community-based malaria prevention and control* programme will focus on: (a) community-based interventions that increase awareness and preventive behaviour at the household level, create opportunities for malaria treatment as close to home as possible and ensure wide access to insecticide-treated mosquito nets; (b) support to activities that will ensure that pregnant women receive malaria prophylaxis and treatment; (c) the promotion of community-based and clinical interventions that will build on the ongoing Integrated Management of

Childhood Illnesses strategy; and (d) strengthening the capacity for epidemic preparedness and prompt response to malaria epidemics.

21. The *child-friendly basic education and learning* programme will define and promote “child-friendly” education to help improve the quality of basic education, with an emphasis on the early grades of primary school, and to ensure the participation of children (particularly girls) and parents in the learning process. Efforts will focus on: (a) helping the most vulnerable and disadvantaged children enter school and complete basic education; (b) supporting innovation in education by concentrating on working and disabled children, and children in conflict zones; (c) promoting/facilitating students’ and parents’ participation in school governance; (d) ensuring that life skills education is integrated into basic education; and (e) providing sanitation facilities to promote health and hygiene.

22. The *rights of children in armed conflict* programme will focus on: (a) eliminating the use of children in armed conflict; (b) reducing vulnerability to violence and abuse;

and (c) promoting psychosocial care. It will be built around local monitoring and national and international advocacy to stop child abductions and to release children held in captivity; the provision of psychosocial care; mechanisms to reduce the vulnerability of women and children to physical and sexual abuse; and initiatives to reduce the incidence of landmine injuries.

23. In implementing the programme, UNICEF will build on its successful fund-raising strategy and continue to advocate for additional resource allocations for children through, for example, the Heavily Indebted Poor Countries initiative. In supporting a sector-wide approach, UNICEF will apply the comparative advantage it has gained through its direct work with communities.

Estimated programme budget

Estimated programme cooperation, 2001-2005^a

(In thousands of United States dollars)

	<i>Regular resources</i>	<i>Other resources</i>	<i>Total</i>
HIV/AIDS: rights to self-protection	3 814	16 000	19 814
Maternal well-being, early childhood care and development, and rights	5 374	16 000	21 374
Community-based malaria prevention and control	3 814	8 000	11 814
Child-friendly basic education and learning	4 432	13 000	17 432
Rights of children in armed conflict	2 566	6 000	8 566
Resource mobilization and cross-sectoral costs	5 900	16 000	21 900
Total	25 900	75 000	100 900

^a These are indicative figures only which are subject to change once aggregate financial data are finalized.