



**USAID**  
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**UGANDA**



# COUNTRY DEVELOPMENT COOPERATION STRATEGY (CDCS)

SEPTEMBER 22, 2022 – SEPTEMBER 21, 2027

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## EXECUTIVE SUMMARY

Through strong partnerships with the people of Uganda and increased local ownership, the United States Agency for International Development (USAID) will work hand-in-hand with Ugandans to achieve their “Vision 2040” development goals.

In this iteration of its Country Development Cooperation Strategy (CDCS), the people of Uganda are at the center of USAID’s narrative; citizens and refugees are not simply recipients of assistance, but instead, have the authority and agency to define their own development agenda and actively participate in its implementation. Local ownership is the driving force behind USAID’s envisioned programming for the next five years.

Uganda’s development context is dynamic and both national and global events have shaped its operating environment. Uganda has made significant progress across many sectors in the past several decades. For example, the average life expectancy has increased about 20 years over the last two decades alone<sup>1</sup>, and improvements in access to care and treatment for the human immunodeficiency virus (HIV) and acquired immunodeficiency syndrome (AIDS), malaria, tuberculosis (TB), and other communicable and non-communicable diseases have saved numerous lives. The gross domestic product (GDP) has grown considerably over the last 30 years, increasing tenfold and pulling millions of Ugandans out of poverty. School enrollment rates for primary education reached gender parity in 2008 and enrollment rates for girls at the primary level have remained high.<sup>2</sup> Uganda also maintains one of the most progressive and welcoming refugee policies in the world, offering shelter, resources, and opportunities to communities displaced by conflict and disaster. And lastly, Uganda receives higher than average marks on its environmental policies, which conserve and protect valuable natural resources for its growing population.<sup>3</sup>

However, these successes do not capture the entire picture. Uganda’s operating context is facing several challenges, including the secondary impacts of COVID-19. Uganda recorded moderately low numbers of COVID-19 cases and deaths, but both global and local responses to the pandemic, including the closure of schools, resulted in serious social and economic consequences that will have ripple effects for years to come. An estimated 1.8 million more people were pushed into poverty in 2021 alone.<sup>4</sup>

Though Uganda is making significant efforts to combat human trafficking, such as identifying more victims and signing the National Referral Guidelines for Management of Victims of Trafficking in Uganda, victims still lack access to care and allocation of resources to non-governmental organizations working in this space are limited. To date, Uganda is not party to the Protocol to Prevent, Suppress, and Punish Trafficking in Persons, Especially Women and Children. Uganda is one of only a few countries to have not signed on to the Protocol, which supplements the United Nations Convention against Transnational Crime.<sup>5</sup> Consequently, trafficking persists, often under the false pretense of foreign employment opportunities targeted toward poor and vulnerable households and communities.

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<sup>1</sup> US Department of Labor (2019) 2019 findings on the worst forms of child labor: Uganda. [https://www.dol.gov/sites/dolgov/files/ILAB/child\\_labor\\_reports/tda2019/Uganda.pdf](https://www.dol.gov/sites/dolgov/files/ILAB/child_labor_reports/tda2019/Uganda.pdf)

<sup>2</sup> US Department of State (July 2022) Trafficking in persons report. <https://www.state.gov/wp-content/uploads/2022/04/337308-2022-TIP-REPORT-inaccessible.pdf>

<sup>3</sup> Ibid

<sup>4</sup> Government of Uganda (2020) NDPIII [http://www.npa.go.ug/wp-content/uploads/2020/08/NDPIII-Finale\\_Compressed.pdf](http://www.npa.go.ug/wp-content/uploads/2020/08/NDPIII-Finale_Compressed.pdf)

<sup>5</sup> Government of Uganda (2007) Vision 2040. <http://library.health.go.ug/publications/leadership-and-governance/uganda-vision-2040>

<sup>6</sup> World Bank (Accessed March 1, 2022) Life expectancy at birth, total (year) Uganda. <https://data.worldbank.org/indicator/SP.DYN.LE00.IN?locations=UG>

As of 2022, Uganda hosts nearly 1.6 million refugees, the largest refugee population in Africa and the third largest globally, and ongoing conflict and environmental adversities in neighboring countries mean this number is likely to increase. With global funding decreasing, humanitarian assistance will no longer be provided to a large segment of this population, meaning long-term livelihood support is fundamental to their food security and resilience.

Uganda's complex operating environment has influenced not only USAID's strategic priorities over the next five years but also our approach—we will increasingly empower the people of Uganda to be more meaningfully integrated into USAID's programming at every stage.

## STRATEGIC GOAL

USAID's five-year goal is "A partnership with the Ugandan people to put Uganda on a path to achieve its Vision 2040." In advancing this goal, USAID is committed to working toward ensuring that all Ugandans and refugees participate in and reap the benefits of Uganda's growth on its quest to become a more modern and prosperous society. USAID will achieve its goal by focusing on three interrelated priority development objectives (DOs): Health Security Increased, Resilient Growth Enhanced, and Accountability Strengthened. These priority objectives reflect USAID's current and aspirational portfolio, align with broader U.S. Government global initiatives, and contribute to the GOU's National Development Plan III (NDPIII)<sup>7</sup>. NDPIII is the third of six sequential plans to help Uganda achieve its Vision 2040.<sup>8</sup> The DOs are actionable and they clearly outline opportunities to shift away from the traditional development model to one in which local ownership is the norm rather than the exception.



USAID's five-year goal is "A partnership with the Ugandan people to put Uganda on a path to achieve its Vision 2040".

USAID believes its three DOs are the most critical pathways to creating sustainable, equitable change for the average Ugandan. In Uganda's previous CDCS, the average Ugandan was a 14-year-old girl. Now, because of advancements in health, education, livelihoods, and changing demographics, the average Ugandan is a 17-year-old girl. She highlights the importance of maintaining an intersectional approach within our programming and serves as a reminder that youth and the people of Uganda are not monolithic, and that their unique experiences and social identities must be considered when designing and implementing programs. The average 17-year-old girl lives in a rural community where she has limited access to high-quality education and health care; she is unlikely to finish primary school and may be unable to read or write, which limits her agency and ability to make informed decisions; she struggles to find reproductive health information targeted to her unique needs; she lives in poverty and her family struggles to cope with shocks and stresses; she is disenfranchised by the political system and is blocked from participating in community-level advocacy, and she is also at high risk to be married young and to become infected with HIV. All of these factors influence her needs, her self-perception, and where she sees her position in society. By integrating the 17-year-old girl into the Mission's approach to the DOs, technical and support teams will be able to use her as a proxy to check in on the reach and impact of USAID's work and to challenge the way it operates. She also illustrates

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<sup>7</sup> Ibid

<sup>8</sup> World Economic Forum (2021) Global Gender Gap Report 2021. <https://www.weforum.org/reports/global-gender-gap-report-2021/>

USAID's commitment to mainstreaming gender equality and social inclusion (GESI) principles throughout all programming.

The DOs align with both USAID global priorities and domestic GOU priorities. DO 1, Health Security Increased, represents USAID's global push to plan for, mitigate, and respond to current and emerging health threats. Uganda is a Global Vaccine Access partner country, as well as a successful partner in implementing the President's Emergency Plan for AIDS Relief (PEPFAR), the President's Malaria Initiative (PMI), and other health strategies. DO 1 aligns with the GOU's NDP III Pillar on human capital development. DO 2, Resilient Growth Enhanced highlights USAID's emphasis on addressing food security, climate change, economic growth, and access to education. DO 2 aligns with the NDP III private sector development priorities of agro-industrialization, human capital development, climate change adaptation, and natural resource management. DO 3, Accountability Strengthened, represents the Agency's focus on anti-corruption and strengthening democratic institutions and aligns with the GOU's Governance and Security priority area. Every aspect of the results framework aligns with the 18 programmatic areas in the GOU's NDP III to achieve Uganda's Vision 2040. The implementation of nearly all global initiatives in Uganda, including PEPFAR, PMI, and Feed the Future, is being coordinated with the GOU.

### **DO 1: HEALTH SECURITY INCREASED**

DO 1 is critical to ensuring that the people of Uganda have access to high-quality care so that they can be healthier and more productive. USAID will partner with the Ministry of Health (MOH), public and private health facilities and pharmacies, and the community-level actors that serve as the first point of contact to the health system for most Ugandans. This DO will work to ensure that access to care is equitable and that the unique needs of key and marginalized populations, including persons with disabilities (PWDs), are met, including through interventions to address human rights. Activities under DO 1 will integrate GESI principles to better include marginalized voices and strengthen reporting on GESI impact.

DO 1 will be accomplished through three Intermediate Results (IRs). Under IR 1.1, USAID will build on its decades of success in scaling up the prevention and treatment of HIV/AIDS, malaria, TB, and other infectious diseases, including COVID-19. Programming will also focus on the early detection and prevention of future epidemics, using lessons learned during the COVID-19 pandemic. For IR 1.2, DO 1 will strengthen the health systems, by supporting stronger governance within the health sector and advancing human resources for health initiatives to better staff health posts. Work will have an eye toward rural, hard-to-reach areas that are traditionally underserved and that cater to indigenous and marginalized populations, and also include nutrition-specific interventions. USAID will also strengthen health information systems, including at the community level, so that information is more effectively captured, analyzed, disseminated, and used for decision-making. Under IR 1.3, USAID will focus on improving the quality of family health care services, most notably services that focus on children under the age of five, maternal health care, maternal and child nutrition, reproductive health care, and family planning initiatives.

### **DO 2: RESILIENT GROWTH ENHANCED**

For DO 2, USAID will help households and communities build the foundation necessary for improved resilience and economic growth. USAID's activities for IRs 2.1 and 2.2 will focus on areas with the most critical food security and nutrition needs, including Karamoja, refugee-hosting districts, and disaster-prone areas. These activities will increase household incomes and assets (IR 2.1) by diversifying livelihoods, increasing the use of improved climate-sensitive agricultural technologies, and

increasing access to and participation in markets. Activities will also improve the food and nutrition security of vulnerable households (IR 2.2) through nutrition-sensitive approaches and improved access to water, sanitation, and hygiene (WASH), and strengthened dispute resolution and disaster preparedness and management mechanisms. Activities will take into consideration conflict-related shocks and stresses that reduce households' and communities' ability to cope and will put first the principle of doing no harm so that activities do not inadvertently and unintentionally increase tensions, grievances, or advantage certain groups over others. In refugee-hosting districts, USAID will strengthen its efforts to work within the humanitarian-development nexus to support refugees unlikely to return to their home countries to establish secure and resilient livelihoods.

Programming under IR 2.3 will promote natural resource management and biodiversity through implementing best practices in flora and fauna preservation and seeking to reduce incidents of wildlife crime. IR 2.4 will better prepare children to harness their future opportunities through stronger educational foundations and the development of social skills and emotional learning. This includes improving the quality of education, increasing access to skills training, and making sure that children live in safer and healthier environments. Activities under DO 2 will have a specific focus on how women and other marginalized groups perceive their own development challenges and will intentionally include these voices in designs and adaptations to ensure that gender equality and female empowerment principles are at the forefront of livelihoods and economic empowerment.

### **DO 3: ACCOUNTABILITY STRENGTHENED**

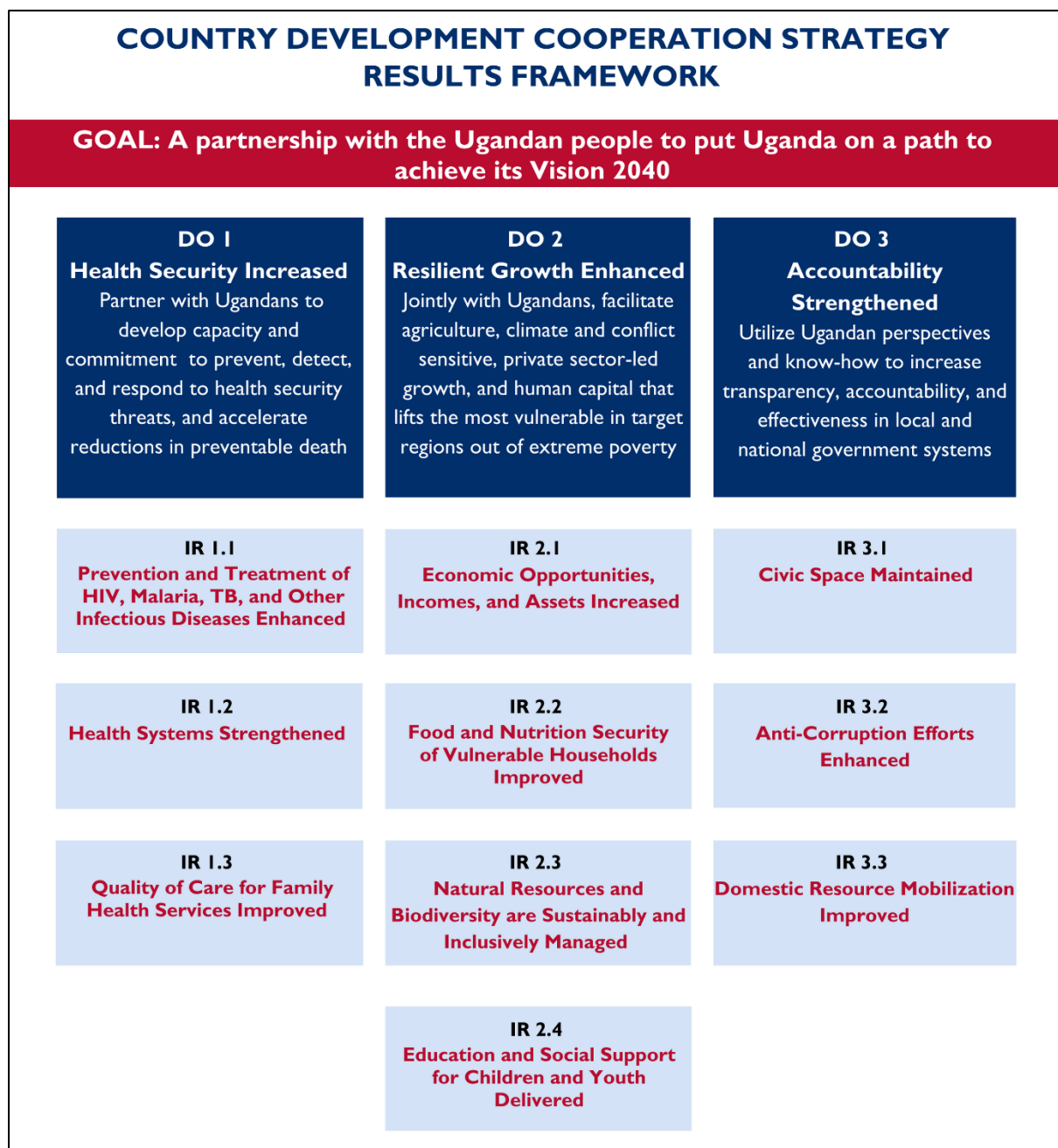
DOs 1 and 2 cannot be attained or sustained without concerted efforts to advance accountability. Result areas in DO 3 touch upon all aspects of the portfolio regardless of sector. Increased accountability will increase direct service delivery in education, health, and agriculture, and promote the protection of the rights of all Ugandans. Activities will improve citizens' ability to more actively participate in civic life and improve the GOU's ability to respond to the dynamic needs of Ugandans and refugees. Activities under IR 3.1 will work to maintain civic space by protecting civil society activists, promoting engagement in political processes, and supporting civil society organizations (CSOs) to advocate for improved development outcomes for all Ugandans. These efforts will support marginalized groups who face heavy persecution, as well as others whose ability to organize and participate civically is constantly challenged. IR 3.2 will help combat corruption in line with the GOU's commitment to this goal by strengthening institutional frameworks and increasing citizens' engagement in holding the GOU accountable for planning, funding, and delivering social services. USAID will also work to increase domestic revenue to better fund public services (IR 3.3) and will proactively partner with the private sector to help build a broader revenue base. All activities under DO 3 will employ a gender equality and female empowerment lens to highlight the different needs of women and girls and to better integrate their specific wants and needs into activities.

### **IMPLEMENTATION AND ADAPTATION**

While the results framework mostly establishes *what* results the Mission will attempt to achieve, it also contains essential elements of how it will achieve them. First, the Mission will hold itself accountable to forging a partnership with the Ugandan people through localization plans, including commitments toward local learning, resources (including local private sector investments), design and implementation, leadership, and systems.

Second, each IR has internal Success Metrics that will inform learning priorities and monitoring and facilitate programmatic adaptations. The potential for conflict is growing in certain areas of the country over natural resources, widening inequality, and a bulging youth population that is outpacing the

availability of economic opportunities. In anticipation of these challenges, and with the awareness that other unexpected changes and challenges could unfold over the course of this strategy, the Mission will continue to prioritize Collaboration, Learning, and Adaptation.



## COUNTRY CONTEXT

Uganda has made significant strides in many development areas over the last several decades, illustrated most dramatically by its increase in life expectancy from 46 years in 2000 to 63 years in 2019.<sup>9</sup> Morbidity and mortality rates have declined in part because of successes in treating and preventing human immunodeficiency virus (HIV)/acquired immunodeficiency syndrome (AIDS) and malaria, increased household and community access to improved market systems, and Uganda’s steep

<sup>9</sup> World Bank (Accessed March 1, 2022) Life expectancy at birth, total (year) Uganda. <https://data.worldbank.org/indicator/SP.DYN.LE00.IN?locations=UG>



economic growth rate from 2000 to 2019 (which was the 22nd highest in the world for this period<sup>10</sup>). Additionally, over the last five years, fertility rates have declined due to improved access to family planning, and this decline will have demographic ripple effects across multiple sectors. However, despite these gains, Uganda will face substantial challenges over the next five years.

Uganda's population growth is still among the highest in the world and an estimated 19 million Ugandans continue to live in poverty<sup>11</sup>. The large youth population, coupled with high fertility rates, will continue to expand Uganda's working-age population at a rate that outpaces job creation. Agriculture employs the largest share of the working poor in Uganda but needs to be modernized to improve household resilience, increase rural well-being, and boost long-term food security. Uganda ranks 66th out of 156 countries on the Global Gender Gap Index.<sup>12</sup> Though Uganda's gender gap of 20.9 percent highlights successes in health, survival, and educational attainment, this score masks the harmful and pervasive everyday realities that impact the average Ugandan woman. More than 60 percent of electoral positions in Uganda belong to men, and household decision-making around reproductive rights, family size, and distribution of resources is adversely impacted by unequal power balances that drive a host of vulnerabilities, including sexual and gender-based violence (SGBV).<sup>13</sup> Compounding the situation is an under-resourced education system in which the majority of adolescent girls will not make it to secondary school. If an adolescent girl has a disability, she is likely unable to attend school at all, as only five percent of children with disabilities in Uganda have access to inclusive education.<sup>14</sup> Additionally, because of deeply rooted gender dynamics, poverty, and limited resources dedicated to addressing their sexual and reproductive needs, adolescent girls are the group most vulnerable to contracting HIV in Uganda.

The COVID-19 pandemic and its ripple effects have hit Uganda hard and will have a lasting impact for generations. Uganda's COVID-induced school closures were the longest in the world and left 15 million children without formal schooling for two years, while lockdowns spurred an economic downturn that resulted in an estimated 1.8 million more Ugandans falling below the poverty line.<sup>15</sup> The COVID-19 crisis has had disproportionate impacts on women, youth, and vulnerable populations; and SGBV, human trafficking, and child labor are on the rise.

Challenges in the sphere of accountability have increasingly impeded progress across all development sectors in recent years. Freedom House classifies Uganda as "not free", scoring it 34 out of 100 on their global freedom index.<sup>16</sup> Uganda currently ranks 114<sup>th</sup> out of 163 countries on the Global Peace Index<sup>17</sup> and faces a variety of conflict drivers that, if left unchecked, could reverse the success of development initiatives and economic progress.

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<sup>10</sup> Rafa, Mickey and Kalandula, Abigail and Bohl, David and Yang, Vivian and Kwasi, Stella and Hanna, Taylor and Moyer, Jonathan D., Advancing Development in Uganda: Evaluating Policy Choices and Their Long-Term Impact (March 25, 2022). Available at SSRN: <https://ssrn.com/abstract=4066838>.

<sup>11</sup> Ibid

<sup>12</sup> Institute for Economics and Peace (2021) Global Peace Index 2021. <https://www.visionofhumanity.org/wp-content/uploads/2021/06/GPI-2021-web-1.pdf>

<sup>13</sup> Ibid

<sup>14</sup> World Bank (2020) Special Needs Education in Uganda: SDG #4 Concerns Quality and Inclusive Education [worldbank.org/en/news/factsheet/2020/02/07/special-needs-education-in-uganda-sustainable-development-goal-sdg-4-concerns-quality-and-inclusive-education](https://www.worldbank.org/en/news/factsheet/2020/02/07/special-needs-education-in-uganda-sustainable-development-goal-sdg-4-concerns-quality-and-inclusive-education)

<sup>15</sup> Rafa, Mickey and Kalandula, Abigail and Bohl, David and Yang, Vivian and Kwasi, Stella and Hanna, Taylor and Moyer, Jonathan D., Advancing Development in Uganda: Evaluating Policy Choices and Their Long-Term Impact (March 25, 2022). Available at SSRN: <https://ssrn.com/abstract=4066838>.

<sup>16</sup> Freedom House (2022) Freedom In the World 2022 report: Uganda Country profile. <https://freedomhouse.org/country/uganda/freedom-world/2022>

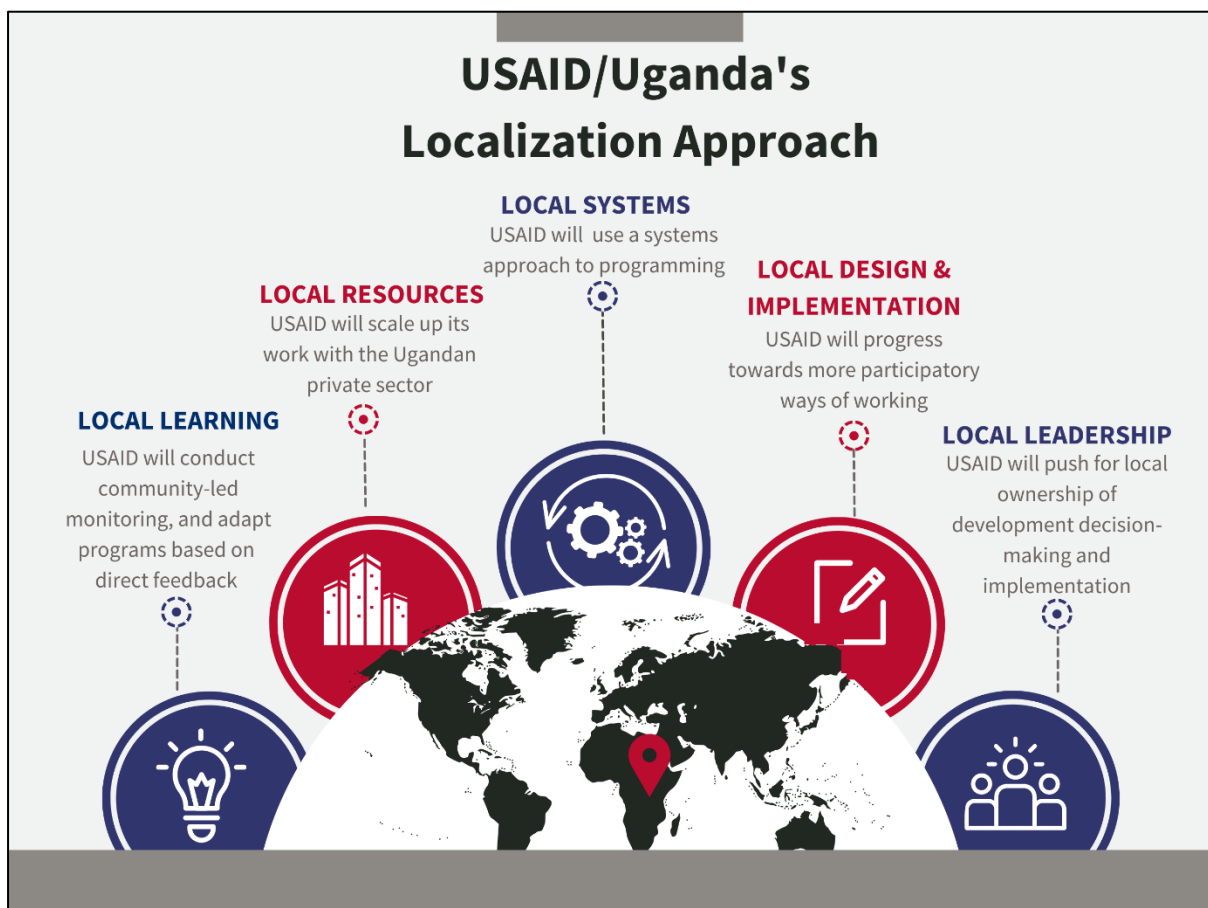
<sup>17</sup> Institute for Economics and Peace (2021) Global Peace Index 2021. <https://www.visionofhumanity.org/wp-content/uploads/2021/06/GPI-2021-web-1.pdf>

## STRATEGIC APPROACH

The operating environment described in the Country Context section above is the backdrop against which USAID has crafted this Country Development Cooperation Strategy (CDCS). This strategy emphasizes accountability and partnerships with local actors. The Mission will also deliberately and consistently work with local partners to ensure that progress is more sustainable and locally led. All programmatic sectors will emphasize local private sector engagement (PSE), both to spur innovation in all new designs, and, when opportunities arise, to prioritize integrating local voices into programmatic design, implementation, and adaptation. Internally, USAID seeks to hold itself more accountable through the rigorous use of data to inform decision-making, in setting ambitious targets for transitioning awards to local partners, and to strengthen internal processes to facilitate intentional and fruitful collaboration among teams. This accountability approach is outlined in detail in the Accountability Strengthened and Performance Management sections below.

## LOCALIZATION

A critical focus of this CDCS is USAID's partnership with the Ugandan people it prioritizes operationalizing USAID's emphasis on putting Ugandans at the forefront of progress and change. USAID teams have identified and committed to specific, actionable, and innovative localization activities. These activities fall under the following areas:



**Local Learning:** USAID will conduct community-led monitoring, and adapt programs based on direct feedback from communities and beneficiaries on their needs, their aspirations, and on USAID’s performance. Local voices, input, and ideas will be intentionally integrated into all new activity designs.

**Local Resources:** USAID will scale up its work with the Ugandan private sector. USAID’s efforts around PSE will also work to improve Uganda’s domestic resource mobilization as a means to generate domestic revenue to sustainably fund and expand public services.

**Local Systems:** USAID will continue to use a systems approach to programming, as it was a critical component of the previous CDCS but will focus on when and under what circumstances programming should take a more adaptive and iterative approach. This local systems lens will support USAID to program emergently with local actors and enable experimentation and innovation. Working with local systems in mind will also allow USAID to engage critical local actors to design and implement relevant solutions to complex programs.

### SYSTEMS APPROACH

A systems approach recognizes the complex nature of development work and provides a lens to realize better results. This approach builds in flexibility to the extent possible and identifies lessons learned and changes in the operating context to support adaptive management.

**Local Design and Implementation:** USAID will continue to progress towards more participatory ways of working, including in the activity design and implementation stages. This includes committing to more co-creation design methods, including field-based scoping trips for new designs, and to building more robust relationships with Ugandan thought-leaders to inform design concepts and encourage innovation.

**Local Leadership:** This effort will amplify local voices and ensure that USAID’s programming is relevant, sustainable, and inclusive. USAID’s push for local ownership of development decision-making

and implementation will also critically examine which voices are heard. This push will promote an environment where all staff can become Mission leaders, no matter the position or rank, and will see USAID identify and partner with local reformers, particularly youth.



*The 17-year-old girl represents the average Ugandan.*  
Photo credit: USAID.

A focal point of this CDCS is the 17-year-old girl who represents the average Ugandan and will act as a proxy to let USAID know if and how its programming is reaching all Ugandans. In addition to strengthening localization efforts, USAID will think critically about whose voices are

heard, what agency they have to make decisions that impact their lives, and how programming can better incorporate and respond to the wants and needs of marginalized populations. This critical thinking is especially true for women and girls, and USAID programming across all sectors will work to strengthen gender equality and social inclusion (GESI) integration at the activity and implementing partner level. This integration will be accomplished through capacity building, by strengthening reporting on GESI impact for improved adaptive management, and by bolstering feedback loops to ensure that USAID’s programs are reaching the 17-year-old girl effectively.

The GOU remains a key partner to advance development goals. USAID will continue to partner with the GOU, to maximize and sustain development investments. USAID has very positive relationships with specific actors within the GOU that are essential for Uganda's human development including the Ministry of Health (MOH), with local government officials, and many other GOU counterparts. These relationships will be leveraged and built upon. Focusing on strategic entry points within the GOU for collaboration will be done in conjunction with nongovernmental actors to build the capacity of civil society and the private sector. USAID will work to uphold and strengthen the vibrant CSO community as a key partner in advancing Uganda's development trajectory. This upholding and strengthening will be done through targeted, demand-driven capacity building and legal reform measures.

USAID is also working to increase domestic resource mobilization as a means to increase domestic revenue that can be used to self-fund and expand public services, as well as to enhance self-reliance and lessen dependence on foreign aid. Some funding for development initiatives is available from the GOU, but these budgets remain low compared to the outside support received from USAID and other development partners. USAID will continue to work to build self-reliance and to develop a plan with the GOU to reduce international donor dependency so that Uganda can incrementally take on more of the financial responsibility of development.

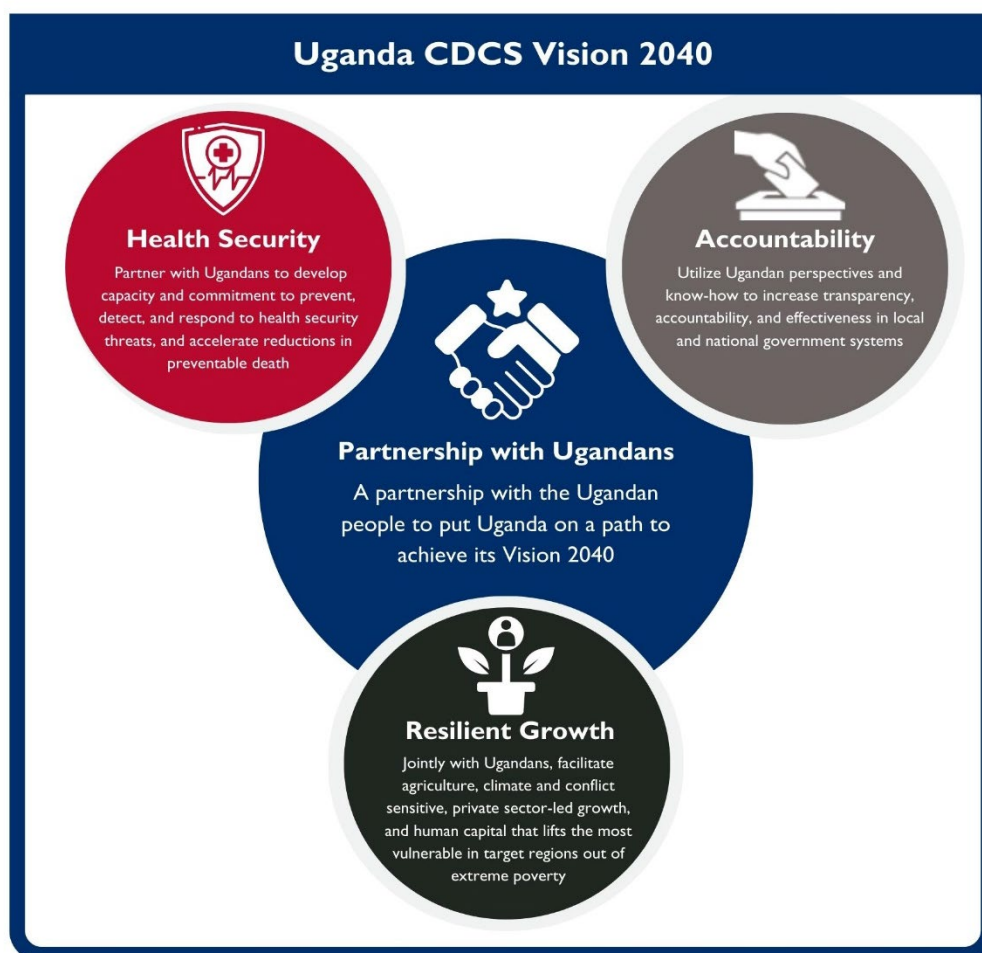
USAID closely collaborates with many other U.S. Government (USG) agencies operating in Uganda, including, the Department of State's Bureau of Population, Refugees, and Migration; the Department of Defense; the Centers for Disease Control; Peace Corps; and the U.S. International Development Finance Corporation. Uganda is a key national security partner, and USAID works in close collaboration with other USG entities to advance this partnership.

USAID plays a leadership role in the donor community, where like-minded partners work in concert, often with technical assistance from the U.S. Treasury Department, to increase the GOU's financial commitment to advancing shared goals. Uganda hosts a large number of bilateral and international nongovernmental donors working across a wide variety of sectors. Additionally, there are hundreds of international and local nongovernmental organizations carrying out initiatives at all levels. USAID is the largest bilateral development partner and other major donors include the World Bank, the European Union, United Nations agencies, and the Global Fund. USAID actively participates in donor working groups to coordinate strategies and interventions, including the Local Development Partners Group, and other sectoral working groups focusing on health, education, water, sanitation, and hygiene (WASH), economic growth, and refugees.

Through the CDCS development process, USAID engaged with donors and other stakeholders to identify areas for further collaboration, to get input on how to improve USAID's partnership model, and to map out areas where other donors can support USAID's strategy. As USAID is emphasizing localization, it will not work solely with large international donors, but will focus on local partners. This focus will include deliberately shifting programming to local implementers where possible, building the capacity of local organizations, and forging new partnerships with local organizations and institutions. As described above, USAID will use innovative means to integrate local voices, resources, and actors into programming.

## RESULTS FRAMEWORK

USAID’s five-year goal is a “partnership with the Ugandan people to put Uganda on a path to achieve its Vision 2040.” To achieve this goal, USAID is committed to working toward ensuring that all Ugandans and hosted refugees participate in and reap the benefits of Uganda’s growth on its quest to become a more modern and prosperous society. USAID will achieve this goal by focusing on three interrelated priority areas: Health Security, Resilient Growth, and Accountability.



### DO 1: HEALTH SECURITY INCREASED

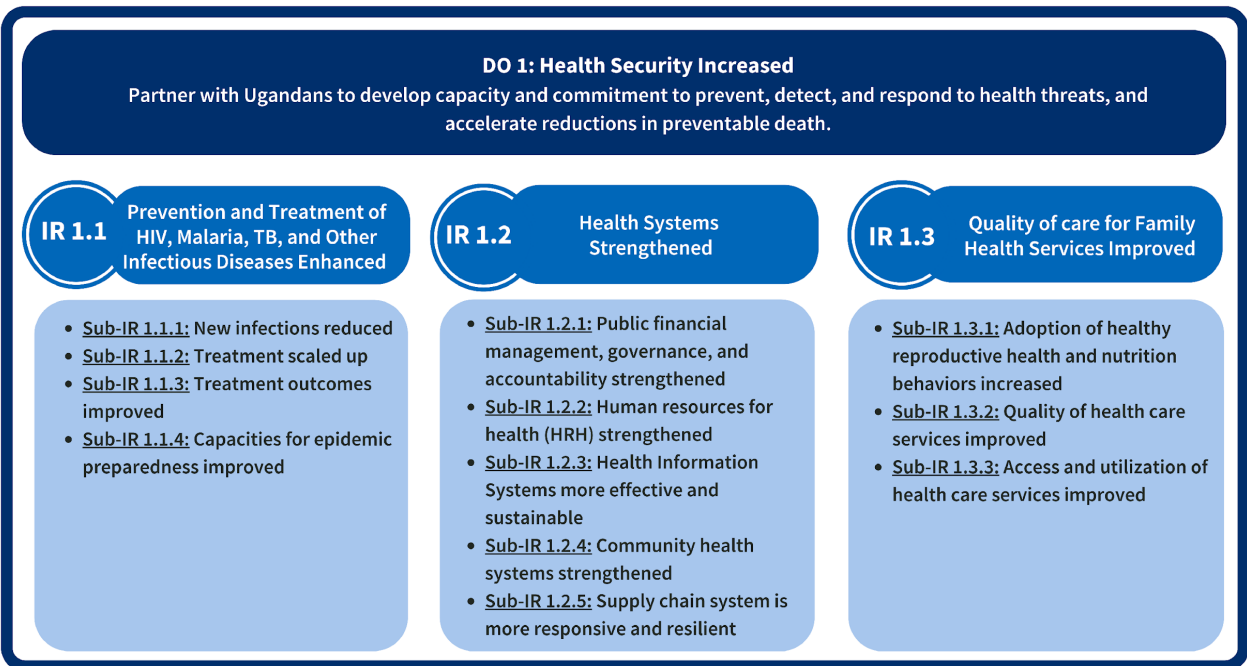
*Development Hypothesis:* IF detection, prevention, and treatment of known, potential, and future epidemics is strengthened; access to high-quality basic health and nutrition services are improved; and the health system elements are strengthened; THEN the overall health security of Ugandans will be strengthened.



A health worker prepping a COVID-19 vaccine.  
Photo credit: USAID.

*Development Hypothesis:* Narrative: Stronger health system functionality will support better and more equitable and inclusive access to high-quality care, especially for family health services (reproductive, maternal, newborn, and child health and nutrition services). Stronger functionality includes stronger supply chain management, better linkages between the different levels of the health systems from community health centers to national level hospitals, and increased access to information, testing, and treatment options. By strengthening all elements of health care, including increased

sharing of information nationally, de-politicizing service delivery, and building Ugandans' ability and willingness to seek care, Uganda will be better prepared to handle future health threats.



Uganda has made significant progress in many areas of health over the past several decades, evidenced by its incredible gains in life expectancy from only 46.23 years in 2000 to 63.37 years in 2019.<sup>18</sup> This increase in life expectancy is due to successes in the testing and treatment of infectious and non-communicable diseases, including HIV/AIDS, malaria, and tuberculosis (TB); declining maternal and child mortality rates; and stronger overall health systems. Despite the overall progress, some areas have stagnated, and Uganda still faces considerable health challenges. Climate change will also intensify disease burdens, for example, by increasing the rate and range of mosquito-borne illnesses like malaria.<sup>19</sup>

<sup>18</sup> World Bank (Accessed March 1, 2022) Life expectancy at birth, total (year) Uganda. <https://data.worldbank.org/indicator/SP.DYN.LE00.IN?locations=UG>

<sup>19</sup> United Nations (Accessed May 4, 2022) Climate Change and Malaria – a complex relationship.

In regard to infectious diseases, progress has been mixed. USAID, along with the GOU, civil society, and development partners, has made significant progress in curbing the HIV epidemic. New infections have declined steeply from approximately 94,000 in 2010 to approximately 38,000 in 2020, and an estimated 90 percent of HIV positive Ugandans are receiving treatment.<sup>20</sup> Though malaria cases have fallen, Uganda still has the third highest global burden of cases and a high rate of malaria deaths (8 percent).<sup>21</sup> Rates of TB have been slowly but steadily rising over the last decade, with an estimated 90,000 new cases in 2020.<sup>22</sup> Uganda's approximately 164,000 COVID-19 cases from the start of the pandemic through the first half of 2022 further strained the ability of the health systems to prevent and treat other diseases.

The COVID-19 pandemic has stalled economic progress and exacerbated existing health challenges due to supply chain interruptions, increased strain on already overstretched health facilities, additional barriers to accessing routine care, and increased risks to children and adolescents, including orphans and vulnerable children (OVCs). Many young people were exposed to sexual and physical violence during Uganda's COVID-19 national lockdowns, which kept children out of school for two years. Disrupted supply chains, rising food costs, and repeated lockdowns impeded many Ugandans' already limited access to nutritious foods and nutrition-specific services, intensifying malnutrition among the most vulnerable. The pandemic has highlighted the need to strengthen Uganda's health systems overall in order to better detect, prevent, and respond to future threats and epidemics, while also making progress on reducing the endemic infectious disease burden and improving routine care and treatment.

Uganda's experience as an equatorial country that has encountered many domestic and international epidemics highlights the importance of increasing local capacity to improve health security. Strengthened local health security capacity will support Uganda to mitigate current and future infectious disease outbreaks, lessen both mortality and morbidity, and in turn enhance the well-being and livelihoods of the people of Uganda.

Conflict has a significant impact on health care delivery and outcomes. Conflict in Uganda exacerbates the challenge of fully staffing remote health facilities and distributing supplies to remote areas, such as Karamoja. Conflict also has serious negative impacts on mental health, uptake of routine care and immunizations, and key populations' ability to seek services. This is especially true for indigenous groups who may experience other compounding obstacles to care.

In alignment with USAID's global prioritization of health security, the Mission has selected this DO to reflect the importance of health and its impact on all aspects of well-being, security, and economic prosperity. The COVID-19 pandemic, as well as Uganda's experience with HIV/AIDS, TB, Ebola, and other infectious diseases, shows that infectious disease threats know no borders. This experience also reinforces the critical need to support Uganda's health systems to provide high-quality care at every level, while also strengthening their ability to detect and respond to new threats as they emerge.

DO I will build on the momentum of USAID's previous successes in the health sector to support Uganda to achieve its health goals and to help ensure that all Ugandans have access to quality prevention, care, and treatment services. This objective links to the CDCS's five-year goal by providing technical support that bolsters Uganda's health systems to more independently respond to future

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<https://www.un.org/en/chronicle/article/climate-change-and-malaria-complex-relationship>

<sup>20</sup> UNAIDS (2021) Country factsheets Uganda 2020. (Retrieved July 19, 2021)

<https://www.unaids.org/en/regionscountries/countries/uganda>

<sup>21</sup> Severe Malaria Observatory (2020). Knowledge sharing for malaria: Uganda.

<https://www.severemalaria.org/countries/uganda>

<sup>22</sup> Stop TB Partnership (2022) Tuberculosis situation in 2020: Uganda

[https://www.stoptb.org/static\\_pages/UGA\\_Dashboard.html](https://www.stoptb.org/static_pages/UGA_Dashboard.html)

health security challenges, and it also aligns with the GOU's priority to bolster human capital development.

USAID will focus on increasing local capacity and holistically strengthening health systems to support locally-led development that is responsive to the evolving needs of the people of Uganda, especially underserved groups. USAID will analyze the disease burden, past progress, strategic interests, and GOU priorities to determine where and how it will work. Ultimately, this DO will support the GOU, local government, civil society, the private sector, and other key stakeholders to develop stronger health systems to prevent, detect, and respond to health security threats and to accelerate reductions in preventable morbidity and mortality. DO 1 will also focus on improving care for key groups at all levels, so that pregnant women, adolescents, neonates, children, persons with disabilities (PWDs), and indigenous populations, among other groups, receive the care they need regardless of location, class, gender, or other status.



### WHAT DOES A SUCCESSFUL DO 1 LOOK LIKE FOR THE 17-YEAR-OLD GIRL?

- She has easy access to the services and commodities necessary to both prevent and treat infectious diseases, including being vaccinated against COVID-19.
- She has consistent access to high-quality care and has both the information and authority to make decisions about her own health, including family planning, nutrition, and immunization services.
- Competent health systems provide her with completed referrals and continuity of care.
- Service provision is focused on her specific needs and takes into account her physical and mental health, resources, and environment.

## INTERMEDIATE RESULTS

### IR 1.1 PREVENTION AND TREATMENT OF HIV, MALARIA, TB, AND OTHER INFECTIOUS DISEASES ENHANCED

#### OPERATING CONTEXT

Progress has been mixed across the spectrum of infectious diseases present in Uganda, with considerable gains in some areas and challenging bottlenecks in others. Though Uganda has made significant advances in combating its HIV epidemic, it is still ranked eleventh globally in terms of HIV prevalence (5.8 percent of adults) and has the fifth highest number of deaths attributed to AIDS annually (about 21,000).<sup>23</sup> Access to infectious disease testing, treatment, and high-quality care in Uganda has improved significantly, but to reach epidemic control USAID must build on national progress while also addressing the root causes for each disease.

Gender dynamics play an important role in all of the infectious diseases that USAID works to confront. Women are disproportionately affected by HIV, with a prevalence of 6.8 percent compared to 3.9 percent among men.<sup>24</sup> and 66 percent of new HIV infections are contracted by adolescent girls aged

<sup>23</sup> UNAIDS (2019) Median estimates. [https://www.unaids.org/sites/default/files/media\\_asset/2019-UNAIDS-data\\_en.pdf](https://www.unaids.org/sites/default/files/media_asset/2019-UNAIDS-data_en.pdf)

<sup>24</sup> UNAIDS (2021) Country factsheets Uganda 2020. <https://www.unaids.org/en/regionscountries/countries/uganda>



10 to 19.<sup>25</sup> This infection rate is attributed to early marriage, younger sexual debut for girls, intergenerational sex, violence against women, and differences in decision-making power.<sup>26</sup> Other key populations also bear much higher rates of HIV infection than the general population. These include sex workers (estimated HIV prevalence of 31.3 percent), men who have sex with men (estimated HIV prevalence of 13.2 percent), and people who inject drugs (estimated HIV prevalence of 17 percent).<sup>27</sup> LGBTQI+ people are at heightened risk. For instance, transwomen are 49 times more at risk of HIV infection than the general population.<sup>28</sup>

Pregnant women are especially vulnerable to malaria due to reduced immunity. Malaria among pregnant women can be lethal as it causes severe anemia which can compound the risk of hemorrhage and other complications.<sup>29</sup> TB is four times more prevalent in men than in women, possibly due to men's increased time spent out of the house and their larger social network structures.<sup>30, 31</sup>

### PROGRAMMATIC RESPONSE

Programming under this IR will work to decrease both mortality and morbidity. Activities will reduce new cases of key infectious diseases by scaling up proven prevention methods through improved access to commodities, drugs, immunizations, and information, while also continuing to find innovative means to reach key populations. This scale-up will be done in alignment with USG initiatives such as the President's Emergency Plan for AIDS Relief (PEPFAR), the President's Malaria Initiative, Global Vaccine Access, the Global Accelerator to End TB, and the Global Health Worker Initiative. Example activities include distribution of insecticide-treated bed nets and residual indoor spraying to prevent malaria. Initiatives to accelerate the control of TB will focus on areas with high endemicity, such as Karamoja, and will use targeted methods to reach men and improve retention-in-care rates. Activities will provide holistic support to adolescent girls to reduce their risk of HIV infection through the Determined, Resilient, Empowered, AIDS-free, Mentored and Safe initiative. Currently, over half of all

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<sup>25</sup> UNICEF (2022) Adolescent development: Uganda. <https://www.unicef.org/uganda/what-we-do/adolescent-development#:~:text=According%20to%20the%20Ministry%20of,babies%20into%20their%20mid%2D40s>

<sup>26</sup> USAID/Uganda (2021) Gender Equity and Social Inclusion Analysis (Internal)

<sup>27</sup> Ibid

<sup>28</sup> Ssekamatte, T., Isunju, J.B., Naume, M. et al. Barriers to access and utilisation of HIV/STIs prevention and care services among trans-women sex workers in the greater Kampala metropolitan area, Uganda. *BMC Infect Dis* 20, 932 (2020). <https://doi.org/10.1186/s12879-020-05649-5>

<sup>29</sup> Malaria Consortium (n.d.) Malaria in pregnancy. <https://www.malariaconsortium.org/pages/child-and-maternal-health/about-malaria-in-pregnancy.html>

<sup>30</sup> Ministry of Health (2019) Tuberculosis and Leprosy Case Management Desk Guide: A Flip Chart for Frontline Health Care Providers. Kampala.

<sup>31</sup> Miller, P.B., Zalwango, S., Galiwango, R. et al. Association between tuberculosis in men and social network structure in Kampala, Uganda. *BMC Infect Dis* 21, 1023 (2021). <https://doi.org/10.1186/s12879-021-06475-z>

PEPFAR awards are being implemented by local partners, and USAID will continue to transition awards to local partners. Other, non-PEPFAR awards will follow suit and focus on local ownership as well.



Young girls supported by the DREAMS Initiative  
Photo credit: H.Mason/USAID.

## IR 1.2 HEALTH SYSTEMS STRENGTHENED

### OPERATING CONTEXT

Uganda's health systems operate using a decentralized referral system, in which the patient's first point of contact with GOU-supported health entities is often with a community health extension worker or village health team. As needed, a patient will progress through various tiers of health centers (from level II to level IV), general hospitals, regional referral hospitals, and national referral hospitals. This "hub and spoke" model offers increasing levels of specialization, with less specialized care in rural communities and additional, more specialized services at each progressive level.

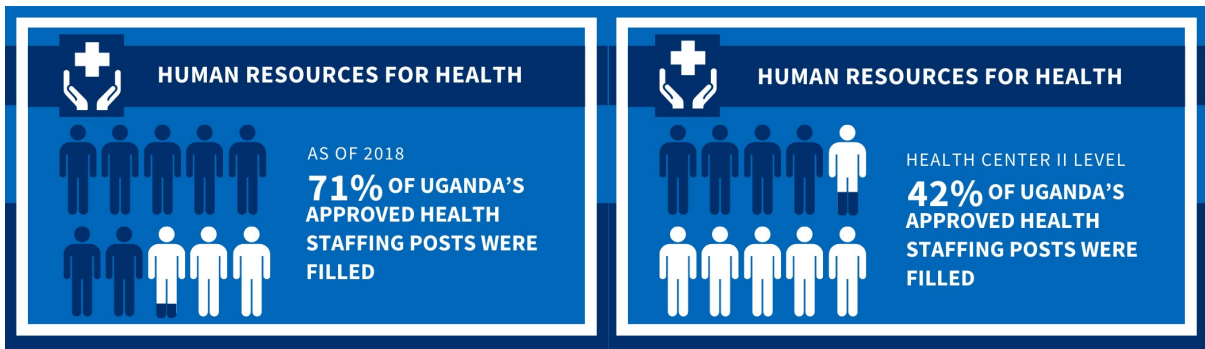
The functionality and strength of the health systems are key to ensuring that the people of Uganda receive life-saving drugs, visit health centers staffed with qualified health professionals and that governance structures promote communication and data sharing between facilities. There are regional differences in the availability of functioning health care facilities, with 45 percent located in the Central region which is disproportionate to the percentage of the population located in this area<sup>32</sup>

Human resources for health is a core component of a functional health system. Only 71 percent of Uganda's approved health staffing posts were filled as of 2018, with wide variation at different levels. For example, only 42 percent of posts are filled at the health center II level, the level that serves communities most directly.<sup>33</sup> Supply chain management to help ensure the availability of essential drugs and commodities is also a critical component, as stock outs of every day, life-saving drugs are common. In addition, proper hazardous and non-hazardous medical waste disposal is an issue that needs attention as the waste produced from medical service provision has potential health and environmental impacts. The private sector plays a critical role in the health systems, as many Ugandans rely on private clinics, both private-for-profit (PFP) and faith-based and secular private-not-for-profit (PNFP), for health care. Uganda's complex system of private and public entities and actors at different levels requires stringent reporting to quickly and effectively track routine health information, potential outbreaks, regional and demographic data, availability of essential medicines, and more. The building blocks of governance, human resources for health, and reliable information and reporting systems all contribute to strengthened, more responsive health systems that can adapt and improve to better meet the people of Uganda's needs.

<sup>32</sup> Uganda Bureau of Statistics (UBOS) (2021) UBOS Statistical abstract 2020.

<http://library.health.go.ug/sites/default/files/resources/UBOS%20Statistical%20Abstract%202020.pdf>

<sup>33</sup> Ibid



**PROGRAMMATIC RESPONSE**

USAID will continue to strengthen health systems by addressing several core challenges simultaneously. It will work with the public National Medical Stores and PFP and PNFP partners to strengthen the pharmaceutical and medical supply chain by increasing local capacity to plan, finance, and implement solutions to supply chain challenges. Programming will also advance good governance to improve performance, transparency, leadership, accountability, and efficiency within health systems, ensuring that Uganda is well prepared to respond to and mitigate potential outbreaks and other health threats.

Activities will bolster information systems, including those for surveillance of nutrition-related data, disease outbreaks, and routine uptake of services. These information systems will inform adaptations and quickly alert the MOH and other stakeholders of potential challenges. Private clinics, hospitals, and pharmacies play a fundamental role in Ugandan health care, so will be supported to better participate in information systems, regulatory systems, and networks that ensure oversight and accountability. Additionally, USAID will work with health facilities to properly and safely segregate, collect, store, transport, treat, and dispose of the hazardous and non-hazardous waste produced through health care provision.

Interventions will specifically target community-level health systems and structures, as this is the most common entry point for most Ugandans. This programming will strengthen linkages between community level health centers and regional referral hospitals, facilitating more complete and timely reporting, and improving supply chain management and coordination at the district and community levels. Data collection will also be strengthened to ensure that it effectively captures women, girls, and other marginalized populations for improved planning and decision-making.

**IR 1.3 QUALITY OF CARE FOR FAMILY HEALTH SERVICES IMPROVED**

**OPERATING CONTEXT**

High-quality family health care services, including reproductive health; maternal, newborn, and child health; adolescent health; and nutrition services play a significant role in improving the accessibility, acceptability, and effectiveness of interventions at all health system levels. Although progress has been made on many fronts, key groups are not receiving the care that they need. Adolescent girls, in particular, continue to be vulnerable to inequities and heightened risks. The MOH reports that one-quarter of adolescent girls become pregnant by the age of 19.<sup>34</sup> Young girls' and boys' sexual and

<sup>34</sup> UNICEF (2022) Adolescent development: Uganda. <https://www.unicef.org/uganda/what-we-do/adolescent->

reproductive health needs must be addressed so that they can access information and services to protect themselves from unintended pregnancies, SGBV, early marriage, and other harmful outcomes.

Unmet family planning (FP) needs also remain high despite steady progress. In 2020, an estimated 30.4 percent of women and girls of all ages reported an unmet FP needs.<sup>35</sup> Access to voluntary FP methods is vital to the health and well-being of women and to ensure safe pregnancies and childbirth. Uganda's maternal mortality ratio has been steadily declining but remains high at 375 deaths per 100,000 live births.<sup>36</sup> Similarly, neonatal mortality rates have declined drastically to 19.2 deaths per 1,000 live births, but remain above the global average,<sup>37</sup> which is also true for the under-five mortality rate of 43.<sup>38</sup> Nutrition is also a key challenge. Only two-thirds of mothers report exclusively breastfeeding their babies,<sup>39</sup> and anemia—which reflects nutritional deficiencies, illness, and other factors—affects more than half of all children under five and one-third of women.<sup>40</sup> Harmful gender dynamics impact women and children's health as well. About half of all women in Uganda experience SGBV in their lifetime,<sup>41</sup> and this has long-standing physical, mental, and emotional impacts on individual and family health and well-being. Designing, monitoring, and adapting programming to address and respond to these dynamic gender needs are core components of USAID's activities.

### PROGRAMMATIC RESPONSE

USAID's work in the area of family health has evolved away from direct service delivery and toward expanding local capacity and sustainability of locally-operated and managed services. USAID will support both public and private health care providers to make a wide array of contraceptive options available so that women and girls can choose the methods that best suit them. Interventions will also engage in social, and behavior change communication to provide key populations the culturally relevant tools and information they need to make healthy decisions. This communication will include targeted campaigns and community advocacy efforts. USAID will work with public facilities and PFP and PNFP clinics to improve the quality of care and to assess the needs of different populations, such as educating mothers about their babies' nutritional and immunization needs, targeting male adolescents with information about sexually transmitted infections and their prevention methods, and working with marginalized populations to identify barriers to accessing compassionate, appropriate, and safe care. Interventions in this space will also monitor how family health services are catering to the unique needs of PWDs, children, and indigenous populations. Activities will focus on prevention of SGBV through community sensitization and strengthening referral linkages and institutional capabilities, as well as improving clinical care and services such as psychosocial counseling, access to shelters, and clinical case management.

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[development#:~:text=According%20to%20the%20Ministry%20of,babies%20into%20their%20mid%2D40s](#)

<sup>35</sup> FP2030 (Accessed May 25, 2022) Contraceptive use: projected trends in mCPR. Uganda. <https://fp2030.org/uganda>

<sup>36</sup> World Bank (2022) Maternal mortality ratio: Uganda. <https://data.worldbank.org/indicator/SH.STA.MMRT?locations=UG>

<sup>37</sup> World Bank (2022) Mortality rate, neonatal (per 1,000 live births): Uganda.

<https://data.worldbank.org/indicator/SH.DYN.NMRT?locations=UG>

<sup>38</sup> UNICEF (2022) Country profiles: Uganda. <https://data.unicef.org/country/uga/>

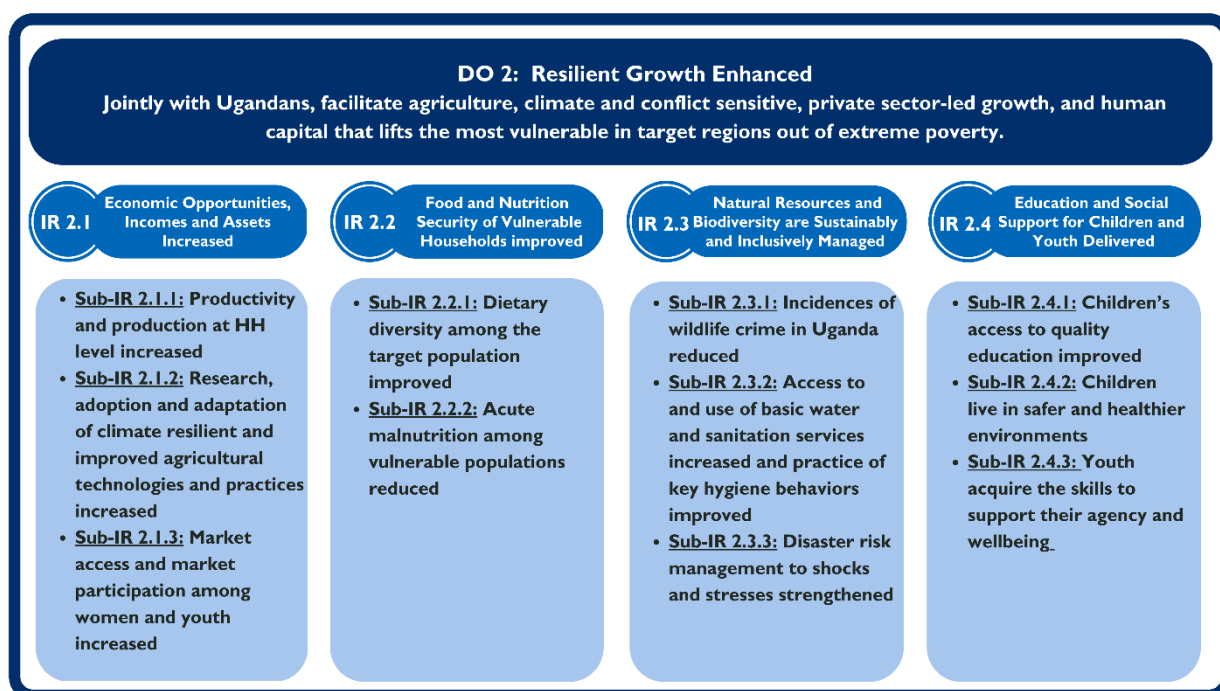
<sup>39</sup> Ibid

<sup>40</sup> USAID (2021) Uganda: Nutrition Profile. [https://www.usaid.gov/sites/default/files/documents/tagged\\_Uganda-Nutrition-Profile.pdf](https://www.usaid.gov/sites/default/files/documents/tagged_Uganda-Nutrition-Profile.pdf)

<sup>41</sup> World Economic Forum. (2021). Global Gender Gap Report 2021. <https://www.weforum.org/reports/global-gender-gap-report-2021/>

## DO 2: RESILIENT GROWTH ENHANCED

*Development Hypothesis:* IF households, communities, and systems are supported to better respond to shocks and stresses such as climate change; impacts to daily subsistence, such as food and water security, are mitigated; income generation opportunities and linkages to markets are improved; the natural resources and biodiversity of the country are sustainably and inclusively managed, and children and youth receive the education and social support needed to be able to harness opportunities, THEN Uganda will have more sustainable, resilient, and inclusive economic growth.



*Development Hypothesis Narrative:* By linking the immediate needs of households—access to safe and climate-resilient water and sanitation services, food security, nutrition, access to markets, and the ability to respond to shocks and stresses—with foundational necessities (education, social and behavior change, and inclusive and accountable natural resource management) the people of Uganda will have increased opportunities to grow their household income.

Over the last ten years, Uganda has benefited from significant economic growth—averaging 6.3 percent annually—the seventh highest rate in Sub-Saharan Africa.<sup>42</sup> This success is laudable, but significant challenges remain in ensuring that this growth is inclusive, sustainable, and responsive to Uganda's demographic realities. Women make up 75 percent of the agricultural labor force but face

Youth make up the majority of Uganda's population and continue to face challenges as they enter the workforce as the labor market has fallen drastically short of meeting demand.

<sup>42</sup> Rafa, Mickey and Kibandula, Abigail and Bohl, David and Yang, Vivian and Kwasi, Stellah and Hanna, Taylor and Moyer, Jonathan D., Advancing Development in Uganda: Evaluating Policy Choices and Their Long-Term Impact (March 25, 2022). Available at SSRN: <https://ssrn.com/abstract=4066838>

the greatest barriers to accessing capital, markets, and land ownership, which undermines their ability to respond to shocks and stresses and to graduate from poverty.<sup>43</sup> There is also a disconnect between women's high labor force participation rates (ranking 28th globally<sup>44</sup>) and their lower rates of earned income compared to male counterparts (ranking 83rd globally). Youth make up the majority of Uganda's population and continue to face challenges as they enter the workforce as the labor market has fallen drastically short of meeting demand.<sup>45</sup> Even higher levels of unemployment persist among youth with disabilities as they are often stigmatized by employers, making them even more vulnerable and dependent on others' livelihoods.<sup>46</sup>

Agriculture-led growth provides a critical pathway to poverty reduction.<sup>47</sup> However, Uganda's agriculture sector is in need of investment to modernize technologies and meet the changing needs of Uganda's population and environment. Climate change has had deleterious impacts on the resilience of agriculture dependent households, threatened biodiversity and conservation efforts, and increased natural hazards and disaster risk. Food insecurity and malnutrition are persistent challenges. Forty one percent of Ugandans are undernourished, and stunting—which has lasting impacts on cognitive development—affects 37 percent of children aged 18-35 months.<sup>48</sup>

Uganda's underfunded education system has struggled to support the well-being of children and youth or to adequately prepare them to productively participate in the economy. According to the Ministry of Education and Sports, only 22 percent of age-appropriate children were enrolled in secondary schooling in 2017, and this rate is even lower in many poor-performing districts.<sup>49</sup> In addition to low retention rates, the quality of education is poor. Poor performance has only worsened during the COVID-19 pandemic, which saw Ugandan children endure the longest school shutdown in the world and left them vulnerable to trafficking, child labor, teenage pregnancy, early marriage, and the degradation of their rights.<sup>50</sup>

A key pillar of DO 2 is a focus on Karamoja, specifically to improve resilience (primarily programmed under IR 2.2). Years of conflict, insecurity, and widespread poverty have resulted in the worst development indicators in Uganda for Karamoja's one million citizens. Over 65 percent of the population in Karamoja live in abject poverty,<sup>51</sup> with consistently high acute and chronic malnutrition rates among children and a 77 percent illiteracy rate among women.<sup>52</sup> The overall situation in Karamoja is not improving; in fact, during CDCS development, calls for urgent humanitarian assistance went out to address the spiking food insecurity and malnutrition rates in the region. The present resurgence of conflict also threatens to undermine progress in the region and stall the transition from humanitarian assistance to more long-term development that USAID and other partners have been working toward. Conflict-sensitive approaches are necessary to ensure USAID-supported activities

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<sup>43</sup> USAID/Uganda (2021) Gender Equity and Social Inclusion Analysis (Internal)

<sup>44</sup> World Economic Forum (2021) Global Gender Gap Report 2021: Insight Report. [https://www3.weforum.org/docs/WEF\\_GGGR\\_2021.pdf](https://www3.weforum.org/docs/WEF_GGGR_2021.pdf)

<sup>45</sup> Merotto, Dino (2020) Uganda: Jobs Strategy for Inclusive Growth. World Bank. <https://openknowledge.worldbank.org/handle/10986/33342>

<sup>46</sup> USAID/Uganda (2021) Gender Equity and Social Inclusion Analysis (internal)

<sup>47</sup> UBOS. (2020) Uganda Annual Agricultural Survey 2018 (p. 348)

<sup>48</sup> USAID (June 2021) Uganda: Nutrition Profile. [https://www.usaid.gov/sites/default/files/documents/tagged\\_Uganda-Nutrition-Profile.pdf](https://www.usaid.gov/sites/default/files/documents/tagged_Uganda-Nutrition-Profile.pdf)

<sup>49</sup> Uganda Ministry of Education & Sports. (2017). Education Abstract 2017 (p 222) <https://www.education.go.ug/wp-content/uploads/2019/08/Abstract-2017.pdf>

<sup>50</sup> UNICEF (Aug 2021) The socioeconomic impact of COVID-19 on children. [https://www.unicef.org/uganda/media/10831/file/Impact%20of%20COVID-19%20on%20children%20in%20Uganda\\_01\\_13.09.2021.pdf](https://www.unicef.org/uganda/media/10831/file/Impact%20of%20COVID-19%20on%20children%20in%20Uganda_01_13.09.2021.pdf)

<sup>51</sup> UBOS (2020) Uganda National Household Survey 2019/2020 Report. [https://www.ubos.org/wp-content/uploads/publications/09\\_2021Uganda-National-Survey-Report-2019-2020.pdf](https://www.ubos.org/wp-content/uploads/publications/09_2021Uganda-National-Survey-Report-2019-2020.pdf)

<sup>52</sup> Ibid

do not increase tensions, and grievances or inadvertently advantage certain groups over others, so as to do no harm.

In response to the context, USAID seeks to improve the resilience and quality of life of Uganda's most vulnerable households, while recognizing that economic growth investments must be inclusive, private sector-led, and climate and conflict-sensitive. Four critical IRs will contribute to this multisectoral DO. DO 2 works in the development-humanitarian nexus, where economic growth, resilience, natural resource management, education, and child and youth development and protection all help Ugandans and refugees graduate from poverty and secure a prosperous future.

In a departure from the previous CDCS, resilience programming will be intentionally geographically focused, particularly working in Karamoja, refugee-hosting districts, and disaster-prone areas, as coordinated with USAID's Bureau for Resilience and Food Security and Bureau for Humanitarian Assistance. This resilience programming will be layered and sequenced with livelihood, nutrition, WASH, disaster preparedness and risk reduction, and biodiversity interventions at the local and household levels. For example, in Karamoja, persistent climate-induced drought is preventing households from escaping dependence on repeated humanitarian assistance so integrated, multisectoral approaches are needed. Conflict-related shocks also pose a major challenge to resilience as increasing instability disrupts value chains and forces people to alter or abandon livelihood opportunities. In Karamoja, renewed violence, cattle raiding and rising ethnic tensions impact households' and communities' abilities to invest in their futures.

With the transition of less vulnerable refugees off humanitarian assistance early in the life of this CDCS period, USAID's work in refugee-hosting districts will increasingly incorporate refugees within transitional and development activities to support sustainable and resilient livelihoods. Additionally, since the geographic focus areas are prone to conflict due to scarce and diminishing natural resources, topography, ethnic tensions, and political factors, conflict-sensitive initiatives will also overlay activities whenever feasible.

The IRs contributing to this DO will address several interwoven areas that contribute to stronger resilience and economic growth, while also recognizing USAID's strengths, portfolio, and relevant earmarks. USAID plays a major role in many interagency initiatives that fuel its priorities and underpin DO 2. Uganda is designated as a priority country for Feed the Future, Water for the World, Power Africa, Prosper Africa, and Nutrition, and USAID's interconnected work under these initiatives will drive resilience and economic growth. DO 2 also contributes to the CDCS goal by aligning with the GOU's NDPIII priority areas of agro-industrialization, human capital development, and climate change, natural resources, environment, and water management. USAID will support sustainable interventions in these areas.



## WHAT DOES A SUCCESSFUL DO 2 LOOK LIKE FOR THE 17-YEAR-OLD GIRL?

(The following responses are relevant to the 17-year-old refugee as well as the 17-year-old Ugandan.)

- Her household and community are supported to better respond to shocks and stresses, such as climate change-related weather events, natural hazards, price increases, and conflict.
- Her and her family's food and nutrition security is improved and they have a more varied, nutritious diet all year round.
- Her parents and older siblings have diversified livelihoods that provide more stable sources of income.
- The environment around her is protected and she has better access to WASH services.
- She is better educated, equipped with foundational skills such as reading, and protected from SGBV to ensure that she reaches her full potential as a productive member of society.

### INTERMEDIATE RESULTS

#### IR 2.1: ECONOMIC OPPORTUNITIES, ASSETS, AND INCOMES INCREASED

##### OPERATING CONTEXT

Uganda's agricultural sector presents significant opportunities to reduce poverty; 85 percent of the population lives in rural areas and agriculture makes up close to one quarter of Uganda's economy.<sup>53</sup> Many households depend on subsistence farming and are extremely vulnerable to external shocks and stresses, including those brought on by climate change and conflict. Rates of poverty backsliding are extremely high, and two-thirds of Ugandans who graduate to above the poverty line end up falling back below.<sup>54</sup> Gender disparities also hinder progress as women are often relegated to roles within or close to the home and are burdened by unpaid care work that decreases their ability to more actively participate in and benefit from economic opportunities.



*A young farmer harvesting coffee off his parents' plantation*  
Photo credit: USAID.

##### PROGRAMMATIC RESPONSE

Activities contributing to this IR will increase Ugandan—and, to the extent possible, refugee—households' incomes and assets by improving their market access, use of agricultural technologies, and adoption of climate and conflict sensitive approaches, and by diversifying their livelihoods. There will

<sup>53</sup> UBOS (2020b) Uganda Annual Agricultural Survey 2018 (p. 348)

<sup>54</sup> USAID (2021) Uganda: Nutrition Profile. [https://www.usaid.gov/sites/default/files/documents/tagged\\_Uganda-Nutrition-Profile.pdf](https://www.usaid.gov/sites/default/files/documents/tagged_Uganda-Nutrition-Profile.pdf)



be a specific focus on how women interact with and benefit from markets so that their needs are taken into account and incorporated into activity implementation. As such, a GESI lens will be applied during design and implementation to support flexibility and adaptations. Activities will apply market systems approaches so that Ugandan institutions can better respond to and participate in a changing and increasingly global market. USAID activities under this IR align with Uganda's Global Food Security Strategy Country Plan to expose communities to new areas for growth, expand access to electricity, and support them to uptake new climate sensitive technologies and commercialize climate smart agriculture. USAID also recognizes the importance of the private sector to modernize agriculture through supporting new areas of economic growth, innovation, and capital infusion. Strengthening market systems and value chains will facilitate connections between households and private sector actors for improved job creation and economic opportunity.

## **IR 2.2 FOOD AND NUTRITION SECURITY OF VULNERABLE HOUSEHOLDS IMPROVED**

### **OPERATING CONTEXT**

Almost one-third of children under five in Uganda are stunted, which has ripple effects on children's health and education that can trap families in a poverty loop.<sup>55</sup> In Uganda's most vulnerable regions, like Karamoja and certain refugee-hosting districts, nutrition and food security trends have seen only limited gains despite heavy investments, underscoring the persistence of the regions' multisectoral development challenges.<sup>56</sup> For example, 84 percent of Karamoja's population is unable to afford a nutritious daily diet and 30 percent face high levels of acute food insecurity.<sup>57</sup> The drivers of food insecurity in Uganda are complex and interrelated, involving high rates of poverty, low levels of education, and recurring drought and natural disasters, as well as underlying conflict and inequitable access to land.<sup>58</sup>

### **PROGRAMMATIC RESPONSE**

USAID activities under this IR will improve the resilience of agriculture-dependent households through food and nutrition security, including resilience to climate change, natural disaster hazards, and conflict. Activities will build on the promising results of the Bureau for Humanitarian Assistance's Resilience Food Security Activities and graduation approach, as well as Feed the Future's food security and nutrition programming. USAID's activities under this IR will work adaptively towards improving dietary diversity, expanding access to nutritious foods, and reducing malnutrition through nutrition-sensitive approaches. Since nutrition trends in Uganda vary significantly by region, USAID will layer and sequence multisectoral activities under this IR in target areas of highest food security and nutrition needs, including refugee-hosting communities, Karamoja, and disaster-prone areas, to help communities overcome the need for humanitarian assistance. Interventions will also focus on the differing needs between men, women, boys, and girls, to ensure that activities are better targeted to the specific needs of these groups. In Karamoja specifically, USAID will facilitate dialogues between local communities and the government on how to build the resilience of pastoral households and

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<sup>55</sup> Ibid

<sup>56</sup> IPC Acute malnutrition analysis February 2021 - January 2022

[https://reliefweb.int/sites/reliefweb.int/files/resources/IPC\\_Uganda\\_Karamoja\\_AcuteMalnutrition\\_2021Feb2022Jan\\_Report.pdf](https://reliefweb.int/sites/reliefweb.int/files/resources/IPC_Uganda_Karamoja_AcuteMalnutrition_2021Feb2022Jan_Report.pdf)

<sup>57</sup> Ibid

<sup>58</sup> USAID (2021) Uganda: Nutrition Profile. [https://www.usaid.gov/sites/default/files/documents/tagged\\_Uganda-Nutrition-Profile.pdf](https://www.usaid.gov/sites/default/files/documents/tagged_Uganda-Nutrition-Profile.pdf)

mitigate the impacts of resurgent land and resource conflicts between different ethnic and socioeconomic groups.

## **IR 2.3 NATURAL RESOURCES AND BIODIVERSITY ARE SUSTAINABLY AND INCLUSIVELY MANAGED**

### *OPERATING CONTEXT*

Uganda's biodiversity is a critical pathway to long-term sustainable economic growth. For example, forests and wetlands support populations dependent on water and crops for agriculture. The major threats to Uganda's biodiversity include human-wildlife conflict, illegal grazing, poaching, the illicit trade in wildlife, and encroachment on wetlands.<sup>59</sup> Uganda's natural resources, including water, air, and land, are critical to supporting resilient economic growth.

### *PROGRAMMATIC RESPONSE*

Activities under this IR will support community governance and management of protected wildlife, conservatories, and reserves so that both communities and biodiversity can thrive. Programming will be done in a conflict-sensitive way to avoid inadvertently causing harm or deepening tensions within communities and government (especially around protected areas, refugee-hosting communities, natural resource extraction areas, and land use). Activities will also focus on the importance of clean and adequate water resources, recognizing WASH as a basic health necessity, and water as an essential input for production.

USAID will work to educate communities on conservation methods, improve biodiversity land use plans, and strengthen national frameworks for gazetted wildlife areas. WASH in schools and addressing the specific WASH needs for female students will also be a focus. As women are often in charge of domestic activities, including collecting water, integrating their wants and needs into designs and implementation is a priority. USAID will also support PSE that incentivizes conservation efforts through ecotourism and green enterprise development. Working in partnership with local communities, governments, and private sector actors will allow USAID to improve the sustainability of its conservation efforts, reduce human-wildlife conflict, and improve the overall governance frameworks for land management. Activities under this IR will also reduce threats to biodiversity that result from wildlife crimes, such as poaching and trafficking. Building institutional capacity to address and prevent wildlife crimes can improve the conservation of endangered species. Additionally, activities will strengthen disaster risk reduction management.

## **IR 2.4 EDUCATION AND SOCIAL SUPPORT FOR CHILDREN AND YOUTH DELIVERED**

### *OPERATING CONTEXT*

Underlying this IR is USAID's commitment to improving the accessibility and quality of basic education while emphasizing the overall well-being of children and youth—the largest segment of Uganda's population. Uganda's basic education situation is challenging; less than half of students who complete primary school are literate and high levels of teacher absenteeism impede student achievement.<sup>60</sup>

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<sup>59</sup> Convention on Biological Diversity (Accessed May 2022) Country Profiles: Uganda; main details.

<https://www.cbd.int/countries/profile/?country=ug>

<sup>60</sup> UNICEF Uganda (Accessed May 2022) Quality of basic education. <https://www.unicef.org/uganda/what-we-do/quality-education>

Furthermore, children with disabilities face even greater challenges to accessing education and the majority of their accommodation needs go unmet—only 0.1 percent of education sector funding is devoted to special needs education.<sup>61</sup> Uganda faces multiple challenges over the next five years that heighten the critical importance youth and children will play in Uganda’s development trajectory. A recent conflict analysis highlights the growing vulnerability of youth who do not have sustainable livelihood prospects to be recruited into violence and political conflict.<sup>62</sup>



Students learning early grade reading skills in a USAID-supported classroom. Photo credit: USAID.

The COVID-19 pandemic and prolonged school closures also created a secondary epidemic of SGBV against girls resulting in higher rates of teenage pregnancy, interruptions to or abandonment of education, and long-lasting psychosocial impacts. During extended COVID-19 lockdowns, reported increases in SGBV were concerning<sup>63</sup> The increase also laid bare the pervasive social and cultural norms that perpetuate gender-based inequities in social protection, stigmatization, and access to a safe educational and home environment.

### PROGRAMMATIC RESPONSE

Activities under this IR will equip children and youth with the foundational skills needed to be productive members of society. Programming will aim to improve early grade reading outcomes through teacher development, community engagement in school management, and support for educational materials from the Ministry of Education and Sports. Activities will also incorporate and integrate disability inclusion to help ensure that scholastic opportunities are inclusive. Additionally, USAID will work through local partners to provide critical child protection services for OVCs and their families and will address gender-specific needs, including girls’ heightened risk of dropping out of school early. USAID will also improve access to technical and vocational education and training and accelerated learning programs for out of school youth so that the children of Uganda can grow into engaged, productive citizens who are able to withstand future socioeconomic shocks.

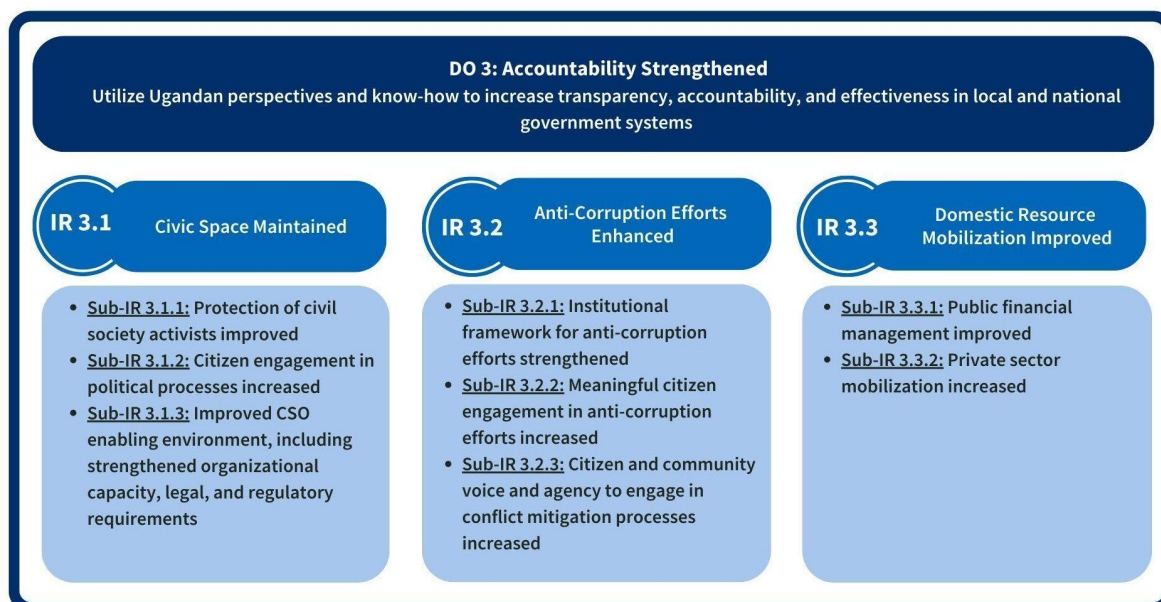
<sup>61</sup> World Bank. (2020). Special Needs Education in Uganda: SDG #4 Concerns Quality and Inclusive Education <https://www.worldbank.org/en/news/factsheet/2020/02/07/special-needs-education-in-uganda-sustainable-development-goal-sdg-4-concerns-quality-and-inclusive-education>

<sup>62</sup> USAID/Uganda (2022) Conflict Assessment. (Internal).

<sup>63</sup> The Nordic Africa Institute (2021) COVID reveals flaws in the protection of girls in Uganda: recommendations on how to tackle sexual and gender-based violence. [https://reliefweb.int/sites/reliefweb.int/files/resources/NAI%20Policy%20Note%202021%205\\_Sexual%20violence%20in%20Uganda\\_Final%20version.pdf](https://reliefweb.int/sites/reliefweb.int/files/resources/NAI%20Policy%20Note%202021%205_Sexual%20violence%20in%20Uganda_Final%20version.pdf)

## DO 3: ACCOUNTABILITY STRENGTHENED

*Development Hypothesis:* IF civic space, anti-corruption efforts, and local ownership are strengthened, AND domestic resource mobilization is increased, THEN a more empowered society will promote accountable governance that enables all Ugandans to participate in a more democratic future.



*Development Hypothesis Narrative:* Promoting accountable democracy, effective governance, and a commitment to human rights requires strengthening civil society to maintain civic space and protect human rights, building robust anti-corruption efforts to hold the government accountable, fostering locally-led development, and improving domestic resource mobilization. This DO underpins the other two DOs in that increased accountability leads to more effective development programming, stronger and more functional government systems, a conducive environment for economic growth, and improved social service delivery.

Over the previous CDCS period, Uganda’s ratings on several international governance indices declined or stagnated across a number of indicators. Uganda currently ranks 142/180 on the Corruption Perceptions Index by Transparency International (compared to 151/176 at the beginning of the previous CDCS period) with 69 percent of Ugandans perceiving corruption to have increased. The vast majority of Ugandans (78 percent) believe that their country is performing poorly at addressing corruption.<sup>64</sup> Uganda’s government performs lower than both the global median and other countries in the region on the World Bank’s government effectiveness index.<sup>65</sup> Uganda also has one of the largest informal economic sectors in the world (relative to formal employment), which is a significant obstacle to strengthening government effectiveness.<sup>66</sup> As these informal economic enterprises are unregulated, the GOU has little ability to develop a wider tax base for increased revenue. Women make up the

<sup>64</sup> Transparency International (2019) Global Corruption Barometer for Africa 2019. <https://www.transparency.org/en/gcb/africa/africa-2019>

<sup>65</sup> World Bank (2022) Worldwide governance indicators. <https://databank.worldbank.org/source/worldwide-governance-indicators>

<sup>66</sup> USAID/Uganda (2022) Conflict Assessment. (Internal)

vast majority of workers in the informal sector<sup>67</sup> and are disadvantaged in terms of regulatory protection and linkages to decision-making processes.

Over the next several decades, Uganda has the opportunity to expand its GDP through oil, potentially increasing government revenue by a cumulative \$6.99 billion by 2030 and \$26.77 billion by 2044.<sup>68</sup> However, without the appropriate policy environment and governance frameworks in place, these potential gains may not be fully recognized.<sup>69</sup>

USAID recognizes the critical role that accountability plays in underpinning all development progress, and the urgency of prioritizing it during the crucial period of the next five years. In the short- and long-term, improved accountability is essential for attracting private sector investment, encouraging formal employment, increasing productivity, and expanding social services. Strengthening accountability and improved governance has broad benefits that guarantee the lasting impact of other USAID investments across its portfolio. In a recent futures analysis by the Pardee Center, improved transparency and governance resulted in the single most significant potential impact on Uganda's GDP growth over time compared to any other factor.<sup>70</sup> Additionally, Uganda is a U.S. State Department Tier 2 Trafficking in Persons country meaning that trafficking in persons remains a critical issue.<sup>71</sup> USAID will continue to work with GOU counterparts as well as CSOs and other stakeholders to identify and address the root causes of trafficking.

Social and gender norms are critical considerations for how Ugandans participate in corruption, how they are impacted by corruption, and the risks they incur by participating in anti-corruption activities. The gendered social expectations for men, women, youth, and PWDs shape their options for how to interact with corruption. This makes it even more important for USAID to meaningfully engage the voices and perspectives of not only men, but also women, female and male youth, PWDs, refugees, and other marginalized groups. A GESI approach begins from the premise that, to level the playing field, a disproportionate share of resources should be directed toward those most in need, including women, youth, PWDs, and those living in extreme poverty. Understanding the specific needs of different subpopulations will help target interventions, improving the efficiency of resource allocation and leading to more equitable outcomes. Activities will empower those who are most in need of government services to meaningfully participate in the planning and prioritization of public spending and building their capacity to hold the government accountable for service delivery. Empowering traditionally marginalized groups can result in more robust and effective functioning of institutions and create demand for effective and equitable services.

USAID will work towards this DO by advancing accountability efforts in partnership with civil society and the GOU, including fostering local ownership, improving domestic resource mobilization, and harnessing the private sector to accelerate the transition of economic activity from the informal to the formal sector. This DO represents a critical pathway for Uganda to move away from its dependence on foreign assistance. This DO also contributes to the larger CDCS goal by supporting

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<sup>67</sup> International Center for Women's Research (2022) Impact of COVID-19 on women workers in the urban informal economy in Uganda and Kenya. <https://reliefweb.int/report/kenya/impact-covid-19-women-workers-urban-informal-economy-uganda-and-kenya>

<sup>68</sup> World Bank Group (March 2022) Uganda Oil Revenue Management: Closing Gaps in the Fiscal and Savings Frameworks to Maximize Benefits. <https://openknowledge.worldbank.org/handle/10986/33899>

<sup>69</sup> Arezki, Rabah, and Markus Brückner. (October 2011) Oil Rents, Corruption, and State Stability: Evidence from Panel Data Regressions." *European Economic Review*, vol. 55, no. 7, Oct. 2011, pp. 955–963

<sup>70</sup> Rafa, Mickey and Kbandula, Abigail and Bohl, David and Yang, Vivian and Kwasi, Stellah and Hanna, Taylor and Moyer, Jonathan D., *Advancing Development in Uganda: Evaluating Policy Choices and Their Long-Term Impact* (March 25, 2022). Available at SSRN: <https://ssrn.com/abstract=406683>

<sup>71</sup> US Department of State (July 2022) Trafficking in persons report, <https://www.state.gov/wp-content/uploads/2022/04/337308-2022-TIP-REPORT-inaccessible.pdf>

the GOU's priority area of improving governance and also by strengthening CSOs and local institutions to hold the GOU accountable in achieving the Vision 2040 goals.



**WHAT DOES A SUCCESSFUL DO 3 LOOK LIKE FOR THE 17-YEAR-OLD GIRL?**

- She is able to freely participate in a vibrant civil society and advocate for her rights, and CSOs are able to make demands that impact her life.
- Anti-corruption efforts are making progress that positively impacts her trust in government [1] and the quality of services she receives.
- More domestic resources are being mobilized and channeled into improved social services that she can access regardless of her location, party affiliation, gender, or identity.
- Localization is built into the USAID program cycle so that her voice is heard, projected, and incorporated into programming and she has the authority and opportunity to meaningfully engage in civic activities.

## INTERMEDIATE RESULTS

### IR 3.1: CIVIC SPACE MAINTAINED

#### OPERATING CONTEXT

IR 3.1 focuses on maintaining civic space as a means to support and maintain Uganda's long history of housing a vibrant civil society network. The formal justice system is also in need of reform to build trust and credibility amongst communities.<sup>72</sup> Activities under this IR will improve the legal enabling environment to expand access to justice for civil and political rights, particularly for marginalized and key populations, including women and girls. USAID will support citizens to safely exercise their civil and political rights as well as access to justice and other referral services.

#### PROGRAMMATIC RESPONSE

USAID will strengthen the capacity of Ugandan CSOs to operate and adhere to GOU requirements. Activities will support CSOs to better advocate for and influence national and local development priorities. Together, activities under this IR will promote a more supportive enabling environment for a vibrant civic space and democratic inclusion. Programming will also focus on human rights as a core component. This will be done through access to justice, monitoring and documenting human rights abuses, and strategically capitalizing on opportunities for Ugandans to advocate for improvements.


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<sup>72</sup> USAID/Uganda (2022) Conflict Assessment. (Internal)

## IR 3.2 ANTI-CORRUPTION EFFORTS ENHANCED

### OPERATING CONTEXT

IR 3.2 recognizes that corruption undermines all aspects of public life in Uganda and across all sectors of USAID's investments. Corruption is increasingly difficult to address in Uganda because it has become normalized and accepted as a way of life at all levels of society. Close to half of all Ugandan respondents admitted to paying bribes to access public services, including education, health care, and the police.<sup>73</sup> Corruption in the public sector also comes in non-monetary forms, and in service delivery sectors it presents itself through high levels of absenteeism and misappropriation of resources. Reports of corruption at all levels also undermine national level efforts to root out fraud and misconduct that can negatively impact public perception and weaken the ability of citizens to participate in the formal system.



Close to half of all Ugandan respondents admitted to paying bribes to access public services, including education, health care, and the police.

### PROGRAMMATIC RESPONSE

Activities under this IR will strengthen accountability and oversight to reduce corruption in key public service sectors. This involves working with Uganda's anti-corruption institutions to improve systems that sanction public perpetrators of corruption and to strengthen their leadership to better fight corruption in its various forms. USAID activities will help build coalitions to amplify citizens' calls for government accountability and fortify accountability processes in the service delivery sectors where USAID invests. The voices of women, girls, and other marginalized populations will be intentionally integrated into these efforts to ensure that these populations are not only visible but also able to meaningfully participate. Additionally, activities will combat the norms and behaviors that enable and facilitate corruption at national, subnational, and community levels.

## IR 3.3 DOMESTIC RESOURCE MOBILIZATION IMPROVED

### OPERATING CONTEXT

Activities contributing to IR 3.3 focus on improving domestic resource mobilization as a means for Uganda to better fund its own development. Throughout the period of the last CDCS, Uganda's government expenditure exceeded revenue, creating consistent deficits and leading to a pattern of recurrent borrowing. USAID and like-minded donors will work with the Ministry of Finance and line ministries to strengthen their capacity to identify and manage increased funding commitments for key social sectors. USAID will also work with Ugandan institutions to improve tax policy and budget allocation for basic services, as well as to improve the private sector regulatory framework to boost private sector investment.

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<sup>73</sup>Afrobarometer (2019) Uganda round 8 data. <https://www.afrobarometer.org/survey-resource/uganda-round-8-data-2019/>

### *PROGRAMMATIC RESPONSE*

For IR 3.3, USAID will continue to implement its PSE strategy. It will revisit the strategy, however, to identify more opportunities to engage with Ugandan commercial actors, including the diaspora, and to assess how the private sector can better meet the needs of women, girls, and other marginalized populations. USAID will support partnerships that attract a broad range of commercial investments. Additionally, programming will improve the regulatory and tax policies that allow for investments to have positive spillover effects on Uganda's public service provisions.

USAID will support the Ministry of Finance Tax Policy Department to enhance their capacity to formulate, implement, and monitor the impact of tax policies. This will increase revenue while providing a conducive environment for private sector investment, businesses growth and expansion. The GOU is encouraged to channel these increases into social sectors. USAID will continue to work with the Uganda Revenue Authority (URA) and subnational local governments to simplify tax administration procedures and enhance voluntary compliance.



## MONITORING, EVALUATION, AND LEARNING

The CDCS strategic priorities and approaches will guide the Mission's Monitoring, Evaluation, and Learning (MEL) approaches. Highlights of these approaches are described below and will be further described in the Mission Performance Management Plan (PMP) and individual Activity MEL Plans.

Periodic portfolio reviews and learning events will be foundational to adaptable program implementation and the PMP. The Mission will continue to use its robust approaches for measuring all important program outcomes. The Mission will constantly monitor contextual factors that may derail program implementation in order to quickly make needed adjustments.

With an eye toward greater external accountability and stronger local partnerships through engaging with local stakeholders to identify our learning priorities and to provide feedback on our performance, will be another focus of our MEL approach. This localization approach includes making field-based and experiential learning more frequent, systematic, and intentional to allow Mission staff to review portfolio performance in the field and with key stakeholders. Localization will also require us to use different approaches to monitor and measure our program progress. Methods like the USAID/DRC Participatory Institutional Capacity Assessment and Learning Index assessment tool are an opportunity for the Mission to measure success without predefined goals, but rather with goals that are developed in partnership with stakeholders over the course of program implementation. Both the Success Metrics and localization commitments will help the Mission to better monitor results.

In terms of evaluation and learning, USAID will build on its past efforts to incorporate collaborating, learning, and adapting into all activities. During the previous CDCS period, Uganda set the foundation to become a "Mission of Learning" by prioritizing new opportunities for collaboration and shifting the locus of learning to communities and stakeholders. During this CDCS period, the Mission will focus on how learning is used internally and externally. This focus will support adaptations and flexibility in the face of contextual changes and lead to a better understanding of programmatic assumptions.

Evaluations will be commissioned to enhance understanding of if, how, and why activities and programs are achieving objectives. The schedule and types of evaluations will be decided jointly between technical offices, the Program Office, and the Office of Acquisition and Assistance (OAA) to ensure that the evaluations drive programmatic decision-making and are also in line with broader Agency guidance.

The Mission's PMP will have a robust learning agenda. All staff will support the identification of learning questions that evaluations, learning reviews, research studies, and routine monitoring will seek to answer. A key component of this learning agenda will be the Mission's internal performance towards making our programming sensitive to the needs of the 17-year-old girl and other marginalized populations, including refugees. To that end, indicators along the results framework will be appropriately disaggregated by sex and other categories, such as disability status, ethnicity, and legal status, to fully capture the intersectionality of our programming. Another key component of the learning agenda will be the incorporation of learning questions that focus on the internal Success Metrics and localization efforts. The Mission will ensure that local knowledge and expertise, systems, and structures are reflected in MEL strategy. The PMP and learning questions will be revisited annually as the Mission will adapt the questions and approaches based on evolving needs.

The Mission has recently migrated to the Development Information Solution system. The MEL approach and subsequent PMP will ensure that the system's requirements are supportive and appropriately aligned with the Mission's learning aims. Geographic Information Systems continue to

be critical components of the Mission’s MEL approach to support implementing partner collaboration and help the Mission tell its story.

# ANNEX: UGANDA COUNTRY ROADMAP 2023



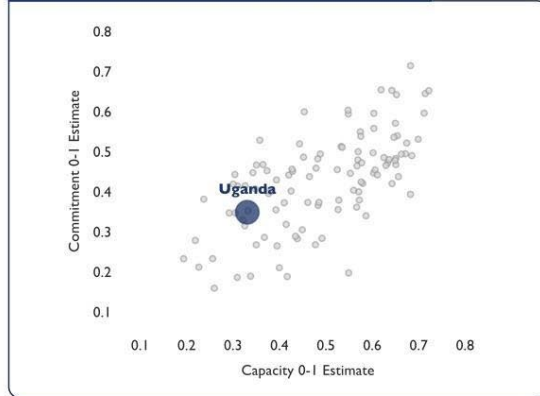
## UGANDA FY 2023 COUNTRY ROADMAP



### LEGEND

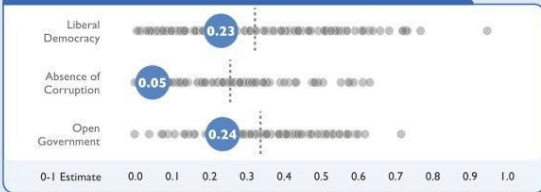


### LOW- & MIDDLE-INCOME SNAPSHOT

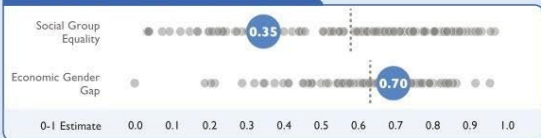


## COMMITMENT

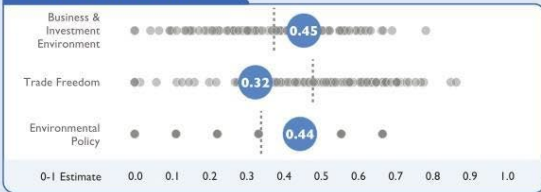
### OPEN AND ACCOUNTABLE GOVERNANCE



### INCLUSIVE DEVELOPMENT



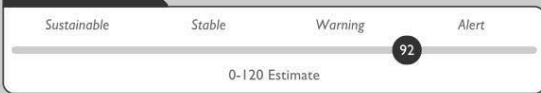
### ECONOMIC POLICY



### RISK OF EXTERNAL DEBT DISTRESS

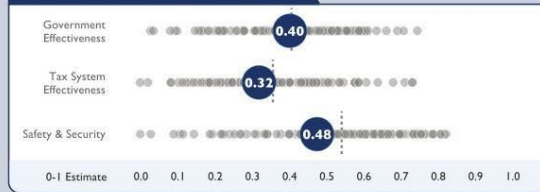


### FRAGILITY

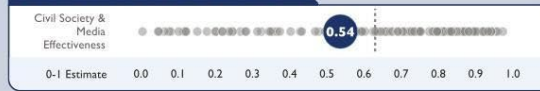


## CAPACITY

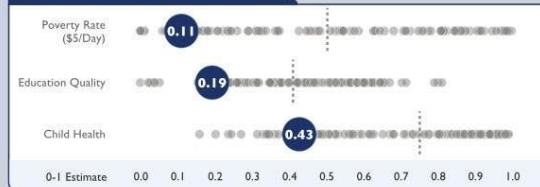
### GOVERNMENT CAPACITY



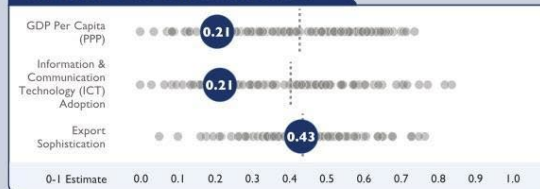
### CIVIL SOCIETY CAPACITY



### INDIVIDUAL CAPACITY



### CAPACITY OF THE ECONOMY



United States Agency for International  
Development

Plot 2577 Ggaba Road, Nsambya

Kampala, Uganda

[www.usaid.gov/uganda](http://www.usaid.gov/uganda)