

## **HUMAN CAPITAL DEVELOPMENT PROGRAMME**

## **Semi-Annual Budget Monitoring Report**

Financial Year 2024/25

May 2025

Budget Monitoring and Accountability Unit Ministry of Finance, Planning and Economic Development P.O. Box 8147, Kampala www.finance.go.ug



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#### ABBREVIATIONS AND ACRONYMS

ATMS Agro-Industrialisation, Tourism, Minerals, Science, Technology and

Innovation

BMAU Budget Monitoring and Accountability Unit

BOQs Bills of Quantities

BRMS Basic Requirements and Minimum Standards

BTVET Business, Technical and Vocational Education and Training

CA Continuous Assessment

CDO Community Development Officer
CMC Centre Management Committee

CSO Civil Society Organisation
DIS District Inspector of Schools
DLG District Local Government

ECCE Early Childhood Care and Education

ECD Early Childhood Development

EGM Early Grade Mathematics

EGR Early Grade Reading

EMIS Education Management Information System

ESC Education Service Commission

ESIA Environmental and Social Impact Assessment

ESP Expanding Social Protection

FGD Focus Group Discussion

FIEASA Federation of International Education Associations of Southern Africa

FUBA Federation of Uganda Basketball Associations FUFA Federation of Uganda Football Associations

GBV Gender-Based Violence GoU Government of Uganda HC IV Health Centre Level IV

HEI Higher Education Institution

HIV/AIDS Human Immunodeficiency Virus/Acquired Immunodeficiency Syndrome

ICT Information and Communication Technology

IDI Infectious Diseases Institute

IFMS Integrated Financial Management System
IMIS Integrated Management Information System

IRE Islamic Religious Education

LGs Local Governments



MAAIF Ministry of Agriculture, Animal Industry and Fisheries

MoFPED Ministry of Finance, Planning and Economic Development

MGLSD Ministry of Gender, Labour and Social Development

MHPSS Mental Health and Psychosocial Support

MIS Management Information System
MoES Ministry of Education and Sports

MoH Ministry of Health

MoICT&NG Ministry of Information, Communication Technology and National

Guidance

MoPS Ministry of Public Service

MTP Medium-Term Plan

MUST Mbarara University of Science and Technology

NCDC National Curriculum Development Centre
NCHE National Council for Higher Education

NDP III Third National Development Plan

NGBVD National Gender-Based Violence Database

NGO Non-Governmental Organisation

NHATC National High-Altitude Training Centre

NPA National Planning Authority

NWR Non-Wage Recurrent

ODeL Open Distance and eLearning

OFID OPEC Fund for International Development

OVC Orphans and Vulnerable Children
PBS Programme Budgeting System

PCU Project Coordination Unit
PLE Primary Leaving Examination

PPP Public-Private Partnership

PSEA Prevention of Sexual Exploitation and Abuse

PWD Person with Disability

RIF Research and Innovation Fund

SAGE Social Assistance Grant for the Elderly
SCDO Senior Community Development Officer
SEGOP Senior Enterprise Grant for Older Persons

SNE Special Needs Education

SPA School Performance Assessment

STEI Science, Technology, Engineering and Innovation STEM Science, Technology, Engineering and Mathematics



TVET Technical and Vocational Education and Training

UACE Uganda Advanced Certificate of Education

UCE Uganda Certificate of Education

UgIFT Uganda Intergovernmental Fiscal Transfers Programme

UNEB Uganda National Examinations Board

UNFPA United Nations Population Fund

URU Uganda Rugby Union

USEEP Uganda Secondary Education Expansion Project

USh. Uganda Shillings

UWEP Uganda Women Entrepreneurship Programme

WASH Water, Sanitation, and Hygiene YLP Youth Livelihood Programme



#### **FOREWORD**

At the start of the Financial Year 2024/25, the Government of Uganda outlined strategies to restore the economy back to the medium-term growth path with the ultimate vision of a self-sustaining, integrated economy. The strategy emphasized accelerating commercial agriculture, fostering industrialization, and expanding both service sectors and digital transformation. Key areas of focus included enhancing market access and leveraging technological advancements to drive economic growth.

The strategic interventions that were prioritized under various programmes included: roads under Integrated Transport and Infrastructure Services; electricity under the Sustainable Energy Development; irrigation under Agro-Industrialization; Industrial parks under Manufacturing; support to medical schools and science-based research and development under Human Capital Development; as well as oil and gas among others.

Semi-Annual programme assessments were made, and it was established that performance was fairly good. This implies that programmes are on track, but with a lot of improvements required. These monitoring findings form a very important building block upon which programmes can commence the reflective exercises.

The government has embarked on the 10-fold growth strategy that demands for enhanced efficiency and effectiveness within programmes. We cannot afford to have fair performance scores hence forth, as this will jeopardize the prospects of doubling the economic growth rates in the medium term.

Ramathan Ggoobi

Permanent Secretary/ Secretary to the Treasury

#### **EXECUTIVE SUMMARY**

#### Introduction

The Human Capital Development (HCD) Programme report presents monitoring findings for the budget execution period from 1st July to 31st December 2024. The HCD Programme goal is to improve the productivity of labour for increased competitiveness and better quality of life in Uganda.

The report reviews selected interventions in the four sub-programmes of: i) Education, Sports and Skills Development; ii) Labour and Employment Services; iii) Gender and Social Protection; and iv) Population Health, Safety and Management.

The methodology adopted for monitoring involved literature review of the quarterly progress and performance reports, interviews with the respective responsible officers or representatives, and observations and physical verification of reported outputs. The review is based on approved plans and the significance of budget allocations during the monitoring period. The interventions, sub-sub-programmes and projects selected were based on regional representation, level of capital investment, planned annual outputs and the value of releases by 31st December 2024. Physical performance was rated using the achievement of the set output targets for the period under review.

#### **Programme Performance**

#### Financial performance

The total approved budget for the Human Capital Development (HCD) Programme for FY 2024/25, inclusive of external financing, was USh. 10,07 billion, which was later revised to USh. 10,59 billion. A total of USh. 5,92 billion (58.8%) was released, of which USh. 2,99 billion (50.4% of releases) was spent.

Although the budget releases were good at 58.8% relative to the expected half year release of 50%, the overall absorption was low at 50.4%. This was, primarily due to poor performance under external financing (24.8%) and non-wage recurrent (45.7%). In as much as the wage component showed better utilization at 70%, it still fell below expectations due to delayed teacher and health workers recruitment. The low absorption reflects underlying challenges, including delayed procurements, and poor planning resulting from limited institutional capacities of the entities.

#### Physical performance

The overall programme performance was fair (60%). The Population Health, Safety and Management Sub-programme performed better than other sub-programmes. However, this performance was partly attributed to rolled over projects and enhanced service provision. There was parity in the attainment of the target set for the gender and social protection sub-programme, at 58% of the semi-annual targets. The lowest performance, though, in the same category of fair performance was recorded under the Labour and Employment Services sub-programme.

In relation to intervention performance, 63% of the interventions in the programme recorded fair performance while 19% were categorised under the good performance category. There



was only one intervention that recorded very good performance – Improving adolescent and youth health under the Education, Sports and Skills Development Sub-programme. The interventions of this sub-programme dominated the fair performance category, followed by the Population Health, Safety and Management Sub-programme. There was parity between the Labour and Employment Services sub-programme and Gender and Social Protection in contributing to the poorly performing interventions.

This achievement demonstrates expanding access to youth-friendly services, promoting gender equity, and strengthening institutional health systems to support the health and well-being of adolescents and young people. The achievement further underscores strengthened synergies of the programme agencies.

The poorly performing interventions were five, from different sub-programmes. The Gender and Social Protection Sub-programme and the Labour and Employment Sub-programme each contributed two, while the Population Health, Safety and Management Sub-programme contributed one.

#### **Programme Challenges**

- 1. Poor planning and laxity under the Human Capital Development Programme demonstrated by different players in the programme. For instance, the Education, Sports and Skills Development Sub-Programme has projects such as USEEP, OFID, and BTVET that have lagged behind largely due to delayed procurements, land acquisition bottlenecks, and weak operational planning. Several projects that were started under the Population Health Safety and Management Sub-programme across the country have stalled, while others are being implemented at a slow pace. These are largely at the Regional Referral Hospitals. The Ministry of Health (MoH) has not been intentional in submitting development projects to the Development Committee for consideration in view of the projects that have stalled and lacking a project code through which they can receive funding. Poor planning is further explained by the delayed acquisition of maintenance service providers as several faulty pieces of equipment lie in health facilities.
- 2. Uneven regional distribution of GROW loans: The GROW loan disbursements were disproportionately concentrated in Central and Western Uganda, largely due to limited outreach and the relatively low presence of women-led enterprises in the Northern and Eastern Regions. This imbalance undermined equitable access to financial support across all targeted areas.
- 3. Low Local Government compliance and data limitations, particularly under the Gender and Social Protection sub-programme: several Local Governments (LGs) failed to submit the required accountability documents and beneficiary files on time, thus stalling disbursement and service rollout. Moreover, limited technical capacity in data management systems affected the precision and timeliness of reporting, thereby compromising planning and monitoring.
- 4. **Health service delivery disruptions** following suspension of the United States-supported operations.

5. **Non-functional management structures**: Rural piped water systems lack effective operational and maintenance structures, increasing the risk of vandalism, theft of components, and premature breakdowns of completed systems.

#### **Conclusion**

The overall programme performance was fair (60%). The service provision interventions performed better than infrastructure development, as 85% of the programme procurements were incomplete by 31st December 2024. Intra sub-programme comparisons indicated that the Population Health, Safety and Management Sub-programme performed better than oter sub-programmes. This was attributed to rolled over projects and enhanced service provision. There was parity in the attainment of the target set for the Gender and Social Protection Sub-programme, at 58% of the semi-annual targets. The lowest performance, though, in the same category of fair performance was recorded under the Labour and Employment Services sub-programme. The attainment of programme results continues to be affected by poor planning, disparities in access to financial services targeting business growth and the empowerment of women businesses, limited compliance, non-functional structures, effective management of water systems, and disruptions resulting from the suspension of funding from the United States Government.

#### Recommendations

- i.) The Ministry of Finance, Planning and Economic Development (MoFPED) and Parliament should strengthen the 'gatekeeping role' during budgeting and appropriation to ensure that critical interventions are allocated funds. In addition, training in project planning, sequencing and procurement management should be strengthened.
- ii.) Regional outreach and enterprise development should be strengthened in underserved areas: MGLSD should collaborate with Local Governments and women's associations to intensify sensitisation, enterprise training, and financial inclusion campaigns in Northern and Eastern Uganda. This will enhance the presence of women-led enterprises and improve equitable access to GROW financing.
- iii.)Local Government compliance and data systems should be enhanced: The MGLSD should strengthen the enforcement of reporting deadlines and accountability standards at the local Government level and invest in digital infrastructure and training to improve the accuracy, timeliness, and utility of data.
- iv.) The Ministry of Health (MoH) should integrate the affected service areas into the existing framework to minimise service delivery disruptions.
- v.) The Ministry of Water and Environment (MWE) and District Local Governments should establish robust management frameworks for rural piped water systems to ensure effective operation and maintenance.



#### **CHAPTER 1: INTRODUCTION**

## 1.1 Background

The Ministry of Finance, Planning and Economic Development's mission is: "To formulate sound economic policies, maximise revenue mobilisation, and ensure efficient allocation and accountability for public resources to achieve the most rapid and sustainable economic growth and development". Through its Budget Monitoring and Accountability Unit (BMAU), the Ministry monitors the implementation of Government programmes and projects by assessing both financial and physical performance indicators against planned targets. The BMAU's mandate supports budget execution, accountability, and improved service delivery.

As the Third National Development Plan (NDP III) concludes in FY 2024/25, BMAU has been conducting Programme-Based Monitoring since FY 2021/22 to track progress towards outcomes outlined in the Programme Implementation Action Plans (PIAPs), programme work plans, and Ministerial Policy Statements.

The semi-annual field monitoring for FY 2024/25 involved verification of fund disbursements and utilisation by implementing entities and beneficiaries, assessment of outputs and intermediate outcomes achieved, gender and equity compliance in budget execution, and adherence to Environmental, Social, Health, and Safety (ESHS) safeguards. The process also examined alignment across sub-programmes and identified key implementation challenges.

The monitoring covered the following programmes: Agro-Industrialisation; Community Mobilisation and Mindset Change; Digital Transformation; Human Capital Development; Innovation, Technology Development and Transfer; Integrated Transport Infrastructure and Services; Mineral Development; Natural Resources, Environment, Climate Change, Land and Water Management; Public Sector Transformation; Private Sector Development; Sustainable Development of Petroleum Resources; and Sustainable Energy Development.

This report presents the monitoring findings for the Human Capital Development Programme, for the period 1st July to 31st December 2024.

### 1.2 Human Capital Development Programme

The Programme primarily contributes to objective four of NDP III, i.e. enhancing the productivity and social well-being of the population. The lead agencies for this programme are the Ministry of Education and Sports (MoES), the Ministry of Health (MoH), the Ministry of Gender, Labour and Social Development (MGLSD), the Ministry of Water and Environment (MWE), public universities and Local Governments (LGs). Other partner/complimentary agencies are: The Ministry of Finance, Planning and Economic Development (MoFPED), the Ministry of Public Service (MoPS), the National Planning Authority (NPA), the Ministry of Agriculture, Animal Industry and Fisheries (MAAIF), the Ministry of Information, Communication Technology and National Guidance (MoICT&NG), Uganda Bureau of Statistics (UBOS), and the private sector, among others.

## 1.3 Programme Goal and Objectives

The programme's goal is to improve the productivity of labour for increased competitiveness and better quality of life for all. The programme objectives are to: (i) improve the foundations for human capital development; (ii) produce an appropriate, knowledgeable, skilled, and ethical labour force (with strong emphasis on science and technology, Technical Vocational and sports); Education and Training (TVET), (iii) streamline Science, Technology, Engineering and Innovation/Science, Technology, Engineering Mathematics (STEI/STEM) in the education system; iv) improve population health, safety and management; (v) reduce vulnerability and gender inequality along the lifecycle; and (vii) promote sports, recreation, and physical education.

## 1.4 Sub-programmes

The programme interventions are implemented through four sub-programmes, namely: i) Education, Sports and Skills Development; ii) Labour and Employment Services; iii) Gender and Social Protection; and iv) Population Health, Safety and Management.

## 1.5 Key Programme Outcomes

The key programme outcomes and the responsible sub-programmes through which these outcomes are delivered are presented in Table 1.1 below.

Table 1.1: Human Capital Development Programme outcomes and responsible sub-programmes

Outcome	Responsible Sub-programme(s)
Improved learning outcomes	Education, Sports, and Skills Development.
2. Improved child development in learning, health,	Education, Sports, and Skills Development, Population
and psychological well-being	Health, Safety and Management.
Improved gains from culture and creative	Labour and Employment Services, Gender and Social
industries	Protection
4. Reduced morbidity and mortality of the	Population Health, Safety and Management
population	
5. Improved social determinants of health and	Population Health, Safety and Management, Gender and
safety	Social Protection
Reduced fertility and dependence ratio	Population Health, Safety and Management
7. Improved occupational safety and health	Labour and Employment Services
management	
8. Reduction in all key forms of inequalities	Gender and Social Protection

Source: Authors' Compilation.

## 1.6 Structure of the Report

The report is structured into eight chapters as follows: (1) Introduction; (2) Methodology; (3) Overall Programme Performance; (4) Education, Sports and Skills Development Subprogramme; (5) Labour and Employment Services Sub-programme; (6) Gender and Social Protection Sub-programme; (7) Population Health, Safety and Management Sub-programme; and (8) Conclusions and Recommendations.



#### **CHAPTER 2: METHODOLOGY**

## **2.1. Scope**

This monitoring report presents progress on the implementation of selected interventions under the Human Capital Development Programme for FY 2024/25. The assessment covered four sub-programmes: Education, Sports, and Skills Development; Labour and Employment Services; Gender and Social Protection; and Population Health, Safety and Management. Interventions and their respective outputs were reviewed under each sub-programme. Out of the 60 interventions, a total of 32 were monitored. Selection was based on the following criteria:

- i) Alignment with priorities identified during the NDPIII mid-term review;
- ii) Significant contribution to programme objectives and national priorities;
- iii) High investment value, prioritising interventions with substantial funding;
- iv) Clear articulation of gender and equity commitments in policy documents;
- v) Completion status, focusing on closed projects to assess beneficiary satisfaction, value for money, and intermediate outcomes.

## 2.2 Monitoring Approach and Sampling Methods

A mixed-methods approach combining qualitative and quantitative techniques was employed to assess the physical performance of planned outputs and intermediate outcomes. Performance was measured using various indicators, and progress was analysed by linking reported achievements to corresponding expenditures and targets to assess effectiveness, efficiency, and alignment with programme objectives.

A combination of random and purposive sampling was applied to select interventions and outputs for monitoring, based on Programme Implementation Action Plans (PIAPs), Ministerial Policy Statements (MPSs), and progress reports from the respective Ministries, Departments, Agencies (MDAs), and Local Governments (MDALGs).

#### 2.3 Data Collection

Data was collected using both primary and secondary methods. Secondary data was obtained through a review of key policy and planning documents, including the MPSs for FY 2024/25, National and Programme Budget Framework Papers, PIAPs, the Third National Development Plan (NDP III), quarterly progress reports, MDA work plans, project reports, the Budget Speech, Public Investment Plans, and Approved Estimates of Revenue and Expenditure. Additionally. Data was extracted and analysed from systems such as the Integrated Financial Management System (IFMS), Programme Budgeting System (PBS), Health Management Information System (HMIS), and the Budget portal.

Primary data collection involved consultations and key informant interviews with institutional heads, project or intervention managers, household heads, and service beneficiaries at various implementation levels. Focus group discussions (FGDs) were conducted with beneficiaries where applicable. Field visits across selected districts were made to triangulate findings using observation and photography.

## 2.4 Data Analysis

A combination of qualitative and quantitative methods was used to analyse the data. Qualitative data was reviewed to identify common issues, themes, and patterns that helped explain the experiences of beneficiaries and the events observed in the field. Additionally, insight-based analysis (interpretive analysis) was applied, where the monitoring teams provided independent judgements and interpretations based on their direct engagement and field observations.

Quantitative data was analysed using advanced Microsoft Excel tools to generate descriptive statistics, including percentages and averages. Comparative analysis was conducted across outputs/interventions, intermediate outcome indicators, and overall programme scores. Performance was rated based on the extent of achievement against annual targets, with the overall programme performance computed as the average of the respective sub-programme scores.

Financial performance was assessed by examining both the budget releases and the funds absorption (expenditure) rate. Performance ratings for both programme and sub-programme levels were based on the criteria outlined in Table 2.1. A colour-coded system was applied to rank performance as follows: green (very good), yellow (good), light gold (fair), and red (poor).

Table 2.1: Assessment guide to measure the performance of projects monitored in FY 2024/25 score performance –

Score	Performance Rating	Comment
90% and above	Green	Very Good (Achieved at least 90% of outputs and outcomes)
70% — 89%	Yellow	Good (Achieved at least 70% of outputs and outcomes)
50% – 69%	Light Gold	Fair (Achieved at least 50% of outputs and outcomes)
49% and below	Red	Poor (Achieved below 50% of outputs and outcomes)

Source: Authors' Compilation.

#### 2.5 Ethical Considerations

Entry meetings were held with Accounting Officers or their delegated representatives at the start of each monitoring exercise. Consent was obtained from all respondents, including programme and project beneficiaries. All information collected during the budget monitoring exercise was handled with strict confidentiality and used solely for analysis to inform decision-making, policy reviews, and service delivery improvements.

#### 2.6 Limitations

- a) Misalignment of budgets to PIAP interventions, as budgets and work plans were prepared in sector mode.
- b) Limited credible outcome performance data in the programme institutions as, in some cases, the analysis was done at the output level.



c) Lack of and/or limited reliable and real-time financial data on donor financing, as this aspect is not accessible on the IFMS, especially where funders made direct payments to the service providers, and where the intervention outputs were wholly or partially funded by the donor through the off-budget implementation mechanisms.

#### **CHAPTER 3: PROGRAMME PERFORMANCE**

#### 3.1. Financial Performance

The total approved budget for the Human Capital Development (HCD) Programme for FY 2024/25, inclusive of external financing, was USh. 10,07 billion, which was revised to USh. 10,59 billion. By 31st December 2024, USh. 5,92 billion (58.8%) had been released, of which USh. 2,99 billion (50.4% of releases) was spent (Table 3.1).

Table 3.1: Financial performance of the Human Capital Development Programme as of 31st December 2024 (USh. billion)

Category		Approved Budget	Revised Budget	Released	Spent	% Budget Released	% Releases Spent
Recurrent	Wage	3,922.894	3,945.540	1,965.043	1,376.301	50.1	70
	Non-Wage	2,923.735	3,166.265	2,547.152	1,164.741	87.1	45.7
Development	GoU Dev't	848.978	1,085.548	357.385	187.349	42.1	52.4
	External Fin.	2,374.762	2,374.762	1,046.685	260.008	44.1	24.8
GoU Total		7,695.608	8,197.353	4,869.580	2,728.391	63.3	56.0
Total GoU + Ext Fin (MTEF)		10,070.370	10,572.116	5,916.265	2,988.399	58.7	50.5
Arrears		14.414	14.414	8.131	0.000	336.9	0
Grand Total		10,072.784	10,586.529	5,924.396	2,988.399	58.8	50.4

Source: Programme-Based Budgeting System, IFMS.

Although the budget releases were good, at 58.8%, the overall absorption was low, at 50.4%, primarily due to poor performance under External Financing (24.8%) and Non-Wage Recurrent (45.7%). While the Wage component showed better utilisation at 70%, it still fell below expectations due to delayed teacher recruitment, wage bill restructuring, and payroll system challenges.

At sub-programme level, Gender and Social Protection demonstrated the best performance in both releases (79%) and absorption (96%) due to front-loaded funding and the recurrent nature of its budget. Conversely, Labour and Employment Services recorded the lowest performance, with only 39% of funds released and just 29% absorbed (Table 3.2).

Table 3.2: Financial performance of the Human Capital Development Programme (USh. billion)

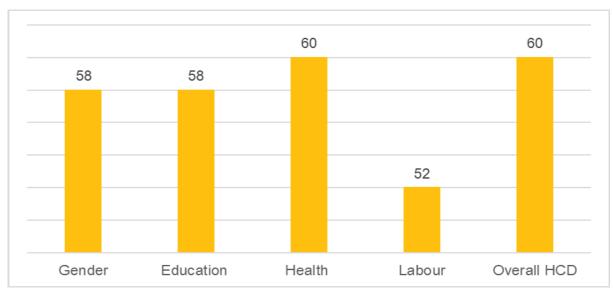
Sub-programme	Total Budget	Revised Budget	Release	Expenditure	% Release	% Spent
Education, Sports, and Skills	4,847	4,903.08	2,543	2,232	52	88
Gender and Social Protection	146	146	115	111	79	96
Labour and Employment Services	391.3	399	156	44	39	29
Population Health, Safety and Management	4,689	4,773	3,469	2,698	73	78
Grand Total	10,073	10,220.29	6,283	5,085	61	81

Source: Programme-Based Budgeting System, IFMS.

## 3.2 Physical Performance

The overall programme performance was fair, rated at 60%. The Population Health, Safety and Management Sub-programme performed better than their counterparts in the programme (Figure 3.1). This was attributed to rolled over projects and enhanced service provision. There was parity in the attainment of the set targets for the gender and social protection sub-programme at 58% of the semi-annual targets. The lowest performance was recorded under the Labour and Employment Services Sub-programme (52%).

Figure 3.1: Overall performance of Human Capital Development Programme by 31st December 2024

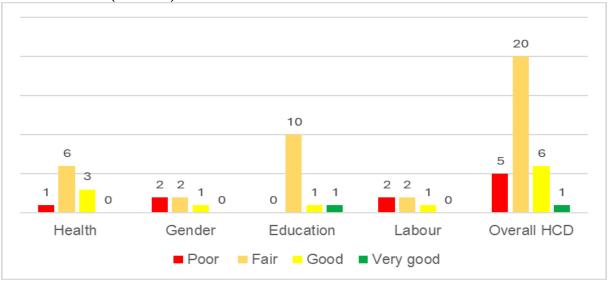


Source: Field Findings, Authors' Compilation.

In relation to intervention performance, 63% of the interventions in the programme recorded fair performance, while 19% were categorised under the good performance category. There was only one intervention that recorded very good performance.

The Education, Sports and Skills Development Sub-programme interventions dominated the fair performance category, followed by the Population Health, Safety and Management Sub-programme. There was parity between Labour and the Employment Services Sub-programme and Gender and Social protection in contributing to the poorly performing interventions (Figure 3.2).

Figure 3.2: Summary performance of interventions by sub-programme by 31st December 2024 (number)



Source: Field Findings, Authors' Compilation.

The outstanding performing interventions were those involving improving adolescent and youth health under the Education, Sports and Skills Development Sub-programme. This achievement demonstrates expanding access to youth-friendly services, promoting gender equity, and strengthening institutional health systems to support the health and well-being of adolescents and young people. The achievement further underscores strengthened synergies of the programme agencies.

Two of the poor performing interventions were observed under the sub-programme of Gender and Social Protection, namely\_expanding the scope and coverage of care, support and social protection services for the most vulnerable groups and disaster-prone communities, and implementing the Uganda Gender Policy Action Plan. One other intervention from the Population Health, Safety and Management Sub-programme entailed increasing financial risk protection for health, with emphasis on implementing the National Health Insurance Scheme. The other two poorly performing interventions were from the Labour and Employment Sub-programme, namely providing incentives to increase enrolment in skills-scarce TVET programmes to reverse the currently inverted skills triangle, and implementing an incentive structure for the recruitment, training, and retention of the best brains in the teaching profession across the entire education system.



## CHAPTER 4: EDUCATION, SPORTS AND SKILLS DEVELOPMENT SUB-PROGRAMME

#### 4.1 Introduction

The sub-programme contributes to four out of six HCD Programme objectives of the Third National Development Plan (NDP III) which are to: i) improve the foundations for human capital development; ii) Streamline Science, Technology, Engineering and Innovation (STEI) and Science, Technology, Engineering and Mathematics (STEM) in education; iii) promote sports, recreation, and physical education; and iv) produce an appropriate, knowledgeable, skilled and ethical labour force with strong emphasis on science and technology, Technical Vocational Education and Training (TVET) and sports.

The expected outcomes are: i) an increased proportion of the labour force transitioning into decent employment from 34.5% to 55%; ii) improvement in the world sports ranking in niche sports: football (77th to 70th), netball (6th to 4th), and athletics (9th to 4th); iii) increased average years of schooling from 6.1 to 11 years; iv) increased learning adjusted years of schooling from 4.5 to 7 years; v) an increased percentage of employers satisfied with the training provided by the TVET institutions from 40% to 65%; and vi) increased ratio of Science and Technology graduates to Arts graduates from 2:5 to 3:5.

The sub-programme is comprised of 23 interventions (Annex 2) implemented under 18 Central Government<sup>1</sup> and Local Government, as well as other partner implementing agencies. These include: The Ministry of Health (MoH), the Ministry of Gender, Labour and Social Development (MGLSD), the Ministry of ICT and National Guidance (MoICT&NG), and the Ministry of Water and Environment (MWE).

## 4.2 Sub-Programme Financial Performance

The approved budget for FY 2024/25 is USh. 4,903 billion, of which USh. 2,543 billion (51.9%) was released, and USh. 2,232 billion (87.7% of releases) was spent (Table 4.1). The release performance was very good, while absorption was fair, mainly due to low expenditure under the externally financed projects.

Table 4.1: Education, Sports and Skills Development Sub-programme financial performance by 31st December 2024

Budget Category	Approved Budget (USh.)	Released (USh.)	Spent (USh.)
Wage Recurrent	2,624,117,030,330	1,291,131,385,669	1,246,401,821,995
Non-Wage	1,370,925,409,991	902,320,911,685	742,854,128,925
GoU Dev't	416,796,242,676	231,643,922,772	213,549,860,554
Ext Fin.	489,940,301,010	117,099,148,167	28,023,951,376
GoU Total	4,411,838,682,997	2,425,096,220,126	2,202,805,811,474
Total GoU+Ext Fin (MTEF)	4,901,778,984,007	2,542,195,368,293	2,230,829,762,850
Arrears	1,302,096,969	1,302,096,969	1,048,921,571
Total Budget	4,903,081,080,976	2,543,497,465,262	2,231,878,684,421

Source: Programme-Based Budgeting System, IFMS.

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<sup>&</sup>lt;sup>1</sup> Ministry of Education and Sports (MoES), Uganda National Examinations Board (UNEB), National Council for Higher Education (NCHE), Uganda Business and Technical Examinations Board (UBTEB), Education Service Commission (ESC), 12 public universities, and National Curriculum Development Centre (NCDC).

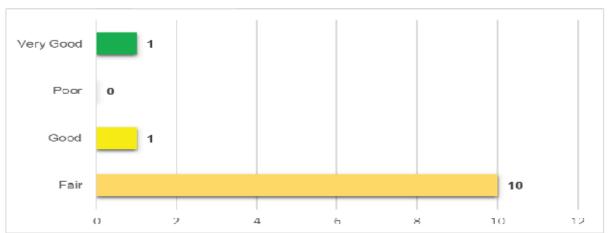
The wage category accounted for 53.5% of the total approved budget and registered a release rate of 49.2% and an absorption rate of 96.5%, reflecting the labour-intensive nature of the education sector, driven by a large teaching workforce.

Non-Wage Recurrent (NWR) accounted for 27.9% of the budget, with a release rate of 65.8% and an absorption rate of 82.3%. The development component was 18.5% of the total budget, with a release rate of 48.6% and an absorption rate of 54.1%. The low absorption of development funds was largely attributed to the underperformance of externally financed projects, which had an absorption rate of only 23.9%, compared to 92.2% under Gou-funded projects. The key constraints were mainly due to inefficiencies in project management and rigid development partner conditions.

## 4.3 Sub-programme Physical Performance

Overall, sub-programme performance was fair, with an average achievement of 58.3% across all interventions. While 85% of the interventions fell within the fair performance range, one intervention, improving adolescent and youth health, registered very good performance, with 95% of planned activities implemented, and another, upgrading the Education Management Information System, registered good performance with a 76.6% achievement rate. Notably, none of the interventions were rated as "poor", indicating that all areas had at least acceptable levels of performance, as illustrated in Figure 4.1.

Figure 4.1: Performance of interventions in the Education, Sports and Skills Development Sub-programme by 31st December 2024 (number)



Source: Author's Compilation.

An overview of the performance of the intervention is presented in Table 4.2.

Table 4.2: Overview of the Interventions Performance by 31st December 2024

S/N	Intervention	Performance	Remarks
		Rating	
1	Institutionalise the training of ECD		Fair performance of 56.6 % registered by mid-FY
	caregivers at public PTCs and enforce		2024/25. All activities under MoES were partially
	the regulatory and quality assurance		implemented.
	system of ECD standards.		·
2	Improve adolescent and youth health		Performance was very good, with 95% of planned
			activities implemented, demonstrating significant
			progress in expanding youth-friendly services and
			strengthening institutional health systems to
			support adolescent and youth well-being.



S/N	Intervention	Performance Rating	Remarks
3	Equip and support all lagging primary and secondary schools and higher education institutions to meet the basic requirements and minimum standards.	J	Intervention performance was fair, with 68.4% of planned outputs achieved. Outstanding performance was registered in the Recruitment and Confirmation of Education Personnel (94.8%), Examination Assessment and Certification (89.7%), and Provision of Instructional Materials (75.8%). However, overall performance was affected by lower scores in outputs such as Curriculum Development (48.2%).
4	Roll out Early Grade Reading (EGR) and Early Grade Maths (EGM) in all primary schools to enhance proficiency in literacy and numeracy.		Overall performance was fair, at 55%. While the number of teachers trained (130) matches the planned total, the geographical coverage goal (4 LGs) was not achieved, which significantly affected the overall objective of equitable national rollout.
5	Upgrade the Education Management Information System to include functions for tracking enrolment, dropout, retention, and uniquely identifying learners, teachers, and institutions.		Good performance of the EMIS intervention, with 76.6% of the planned outputs achieved.
6	Provide early exposure to STEM/STEI to children (e.g., introduction of innovative science projects in primary schools).		Overall performance was fair, with 66% of planned outputs achieved. A key milestone was the successful procurement and delivery of 334 sets of mini-laboratory equipment to MoES stores.
7	Provide the critical physical and virtual science infrastructure in all secondary schools and training institutions.		Mixed performance; average physical progress at 58%. Major projects (e.g., USEEP, BTVET-II) lagged at 25–30%, with less than 35% funds absorption attributed to procurement delays, land issues, and poor planning.
8	Promote STEM/STEI-focused strategic alliances between schools, training institutions, high-calibre scientists, and industry.		Fair performance was registered under the intervention, with 65.7% of the planned activities achieved. Although institutional capacity varied across universities, most performed well against their individual planned activities.
9	Develop and implement a framework for institutionalising talent identification, development, and professionalisation.		Fair performance of 65.2% achieved. Key outputs such as the approval of the National Sports Policy.
10	Establish regional sports-focused schools/sports academies to support early talent identification and development, and the training of requisite human resources for the sports subsector.		Fair performance of 67% was registered, with four out of six planned outputs achieved.

S/N	Intervention	Performance Rating	Remarks
11	Maintain existing facilities and construct appropriate and standardised recreation and sports infrastructure at national, regional, and Local Government levels and in schools in line with the country's niche sports (i.e., football, netball, athletics, and boxing).		Overall intervention performance was fair, at 53.3%. Projects such as Hoima City Stadium (20%) and Kyambogo training grounds (27%) registered delays, posing risks to Uganda's readiness for AFCON 2027.
12	Leverage public-private partnerships (PPPs) for funding of sports and recreation programmes.		Overall performance was fair, with 56.9% achievement, and only 29 National Sports Federations and Clubs supported out of the planned 51.

Source: Author's Compilation.

#### **Detailed performance by intervention and outputs is presented hereafter:**

## 4.3.1 Institutionalise training of ECD caregivers at public PTCs and enforce the regulatory and quality assurance system of ECD standards

The intervention aims to strengthen Early Childhood Care and Education (ECCE) in Uganda by building caregiver capacity and establishing a strong regulatory framework for early childhood.

The lead implementing agencies include the Ministry of Gender, Labour and Social Development (MGLSD), the Ministry of Education and Sports (MoES), the National Curriculum Development Centre (NCDC), Local Governments, the private sector (particularly private school proprietors), and Non-Governmental Organisations (NGOs). MoES, NCDC and Local Governments (LGs) were monitored.

In FY 2024/25, MoES planned to: i) retool 25 pre-primary teacher educators on the ECD teacher training curriculum; ii) hold feedback sharing and consultation meetings with key ECCE stakeholders to enhance the implementation of ECCE in eight underserved LGs; iii) hold staff training and capacity building of Centre Management Committee (CMC) members; iv) disseminate ECCE specific WASH guidelines; v) print and disseminate guidelines on the establishment of ECD centres; and vi) monitor 300 ECD schools on Basic Requirements and Minimum Standards (BRMS).

NCDC planned to: vii) review and disseminate the ECD training curriculum; viii) print 1,000 copies of the developed ECCE materials; and ix) orient 200 master trainers on the developed Early Learners Materials oriented.

#### **Performance**

Fair performance of 56.6% was registered by the end of December 2024. All activities under MoES were partially implemented due to funding shortfalls and limited coverage across target districts. In contrast, NCDC delivered key outputs such as curriculum review and special needs caregiver training, though it also faced resource limitations that constrained coverage. Details of key achievements are shown in Table 4.3.

Table 4.3: ECCE intervention implementation status by institution as of 31st December 2024

Institution	Planned Activity	Actual Achievement	Implementation Status
MoES	a) Retool 25 pre-primary teacher educators on the ECD teacher training curriculum.	Not implemented by half year due to inadequate funds.	Not Implemented.
	b) Hold feedback sharing and consultation meetings with key ECCE stakeholders in 8 underserved LGs.	Conducted in 4 (50%) districts: Sheema, Mbarara, Yumbe, and Koboko. Feedback was made on ECCE policies and standards.	Partially Implemented.
	c) Staff training and capacity building of Centre Management Committees (CMCs).	Conducted in 4 (50%) districts: Obongi, Yumbe, Koboko, and Adjumani.	Partially Implemented.
	d) Disseminate ECCE-specific WASH guidelines.	Printed and disseminated in Bushenyi and Ishaka districts to address hygiene issues in ECCE centres.	Partially Implemented.
	e) Monitor 300 ECD schools on Basic Requirements and Minimum Standards (BRMS).	150 (50%) ECD schools monitored.	Partially Implemented.
NCDC	<ul> <li>a) Review and disseminate the ECD training curriculum.</li> </ul>	Revised Learning Frameworks reviewed and disseminated.	Fully Implemented.
	b) Print 1,000 copies of the developed ECCE materials.	100 copies each of: Curriculum Learning Frameworks (Baby, Middle, Top classes), Orientation Training Manual, Assessment Guidelines, and Implementation Guidelines printed and disseminated. 100 (50%) master trainers oriented.	Partially Implemented.
	c) Orient 200 master trainers on ECCE materials.	100 master trainers planned by Dec 2024 not oriented due to inadequate funds.	Not Implemented.
	d) Revise learning outcomes and align curriculum with guidelines (off-budget support).	Learning outcomes and competencies revised; Curriculum aligned with guidelines in Dec 2024 workshop. 62 caregivers trained on using homeschooling resources for learners with Special Needs (Autism and Spectrum Disorder); caregiver training manual developed.	Fully Implemented.

Source: Field Findings.

### Implementation of ECD/ECCE in Local Governments in Uganda

The assessment of the Local Governments revealed critical systemic gaps, regional disparities, and fragile sustainability in early childhood education services across Uganda.

Over-Reliance on private and donor support: ECD service delivery in the monitored Local Governments remains overly dependent on private actors and donor funding. Koboko and Bukedea have no public ECD centres, while in Yumbe, the exit of key partners like Plan International and World Vision disrupted services. In Lobule Sub-county (Koboko), eight ECD centres closed following UNHCR's withdrawal, underscoring the sector's vulnerability in the absence of sustained Government investment.

**Quality and infrastructure gaps:** All monitored districts exhibited serious gaps in infrastructure and compliance with minimum standards, especially concerning Water, Sanitation, and Hygiene (WASH) facilities. These challenges are most severe in underserved areas, where poor learning conditions and limited instructional resources hinder the holistic development of young learners.

Community-level barriers to ECD uptake: Low household incomes and negative perceptions towards early childhood education, as evidenced in Bukedea, Koboko, Yumbe, and Butaleja, continue to limit community engagement and reduce the demand for ECD services. The lack of local ownership and limited parental involvement pose significant challenges to the sustainability of interventions.

### **Challenges facing ECCE**

- i) Limited access to ECCE and high costs: The dominance of private providers has made ECCE services largely unaffordable and inaccessible to many families, especially those in low-income and rural communities.
- ii) Weak quality assurance: Inconsistent service quality across ECCE centres, both public and private, reflects gaps in regulation, supervision, and adherence to national standards.
- iii) Low parental and community involvement: Minimal engagement from parents and communities continues to hinder holistic child development and the sustainability of ECCE initiatives.

#### **Opportunities for Improvement**

Table 4.4 presents key opportunities for improving ECCE service delivery, along with the primary responsible entities for each intervention area.

Table 4.4: Opportunities for improvement and responsible actors

Opportunity	Primary Responsible Entities
Promote collaboration between Government, private sector actors, and development partners to expand access and bridge service delivery gaps, particularly in underserved areas.	- MoES  - Ministry of Gender, Labour and Social Development (MGLSD)  - Local Governments  - Development partners and NGOs
Invest in training and professional development for ECCE caregivers to enhance teaching quality and child outcomes.	<ul> <li>National Curriculum Development Centre (NCDC)</li> <li>MoES (Teacher Training Department)</li> <li>Private training institutions</li> </ul>
Ensure effective policy implementation through regular supervision and enforcement of quality standards.	<ul> <li>- MoES (Policy and Directorate of Education Standards Departments)</li> <li>- MGLSD (ECD policy oversight)</li> <li>- Local Governments (District Inspectors of Schools)</li> </ul>

Source: Authors' Compilation.



## 4.3.2 Improve adolescent and youth health

The intervention aims to improve adolescent and youth health by expanding access to youth-friendly services, such as Menstrual Health Management (MHM), teacher training on the School Health Policy, and safe environmental practices in schools. It adopts a multi-sectoral approach involving MoES, MoH, MGLSD, public universities, Local Governments, regional hospitals, and civil society organisations (CSOs).

The planned outputs under MoES were: a) developing the Gender and Violence against Children (VAC)<sup>2</sup> in Education Strategic Plan; b) supporting the rollout of the Gender for Development Uganda action; c) providing technical support on the rollout of the life skills toolkit; d) finalising the Menstrual Hygiene Management guidelines; e) Conduct creation of awareness through media engagement; and f) celebration of the International Menstrual Health and Hygiene Day.

#### **Performance**

The overall performance was very good, at 95%. This achievement demonstrates expanding access to youth-friendly services, promoting gender equity, and strengthening institutional health systems to support the health and well-being of adolescents and young people. Key achievements included:

- i) *Gender and VAC in the Education Strategic Plan developed:* Consultations were held across various districts to inform the Gender and VAC in Education Strategic Plan. A validated draft was awaiting review by relevant working groups.
- ii) *Technical support on the rollout of the life skills toolkit provided:* MoES provided technical support for the rollout of the toolkit and joined joint monitoring missions. The Gender Unit also engaged in assessments on the prevention of sexual exploitation and abuse (PSEA) in health training institutions under the "We Train for Health" Programme.
- iii) *Menstrual Hygiene Management guidelines finalized:* With support from the United Nations Population Fund (UNFPA) and the Embassy of Ireland, MoES finalised the MHM guidelines and produced a documentary to raise awareness and combat stigma surrounding menstruation.
- iv) Awareness through media engagement conducted: Media campaigns and community outreach activities were conducted in 12 districts, targeting school managers, teachers, and student clubs to promote menstrual health, advance gender equality, and foster safe and supportive school environments.
- v) International Menstrual Health and Hygiene Day celebrated: This was celebrated in Butaleja District, where dignity kits, menstrual cups, and disposable pads were donated to girls and female teachers. The initiative aimed to reduce absenteeism among girls, promote gender equality, create a more inclusive learning environment, and enhance the well-being and empowerment of girls in schools.

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<sup>&</sup>lt;sup>2</sup> VAC refers to all forms of physical, emotional, sexual abuse, neglect, and exploitation that children may experience, whether at home, in school, in the community, or online.

### Youth-friendly services in Makerere University

Makerere University Hospital was recently placed under the College of Health Sciences and continues to provide a broad range of services. The hospital primarily serves students but also attends to staff and the general public, handling 130–170 patients daily. In 2024, outpatient visits rose from 29,762 (2023) to 32,560, comprising 44.5% male and 55.5% female patients. Of these, 67.2% (21,857) were students, 25.9% (8,446) staff, and 6.9% (2,257) private clients from surrounding communities.

- a) Specialised services and infrastructure development: The hospital significantly expanded its capacity to offer outpatient and inpatient care, emergency services, a 10-bed Intensive Care Unit (ICU), an 8-bed dialysis unit, radiology, Ear Nose and Throat (ENT), dental services with 32 chairs at the main campus, mental health care, and gynaecology. It also established the first Olink Proteomics Lab in Eastern Africa and enhanced support for students with disabilities through specialised care and ambulance services.
- b) Access and inclusion: The hospital is represented on Makerere University's disability selection committee and prioritises care for students with special needs. However, significant access barriers remain, including the lack of zebra crossings for safe movement from the university to the hospital, and the absence of a health clinic at Makerere's Jinja campus, forcing students to rely on external referral hospitals for medical services.
- c) *Health outreach and community engagement:* The hospital partners with institutions such as the Infectious Diseases Institute (IDI) and the Uganda Heart Institute to deliver youth- and community-friendly services, including safe male circumcision, HIV prevention, mental health support, and family planning. It also conducts outreach activities like family health days and immunisation drives in nearby communities such as Kagugube, extending its reach beyond the university.
- d) Academic and research integration: The hospital plays a vital role in training medical students and conducting research. It received funding from the Research and Innovation Fund (RIF) and developed innovations like a mobile app enabling patient-doctor interaction. Current research priorities include infections of the reproductive system and adolescent/youth health, especially related to HIV prevention.

## **Key Challenges**

- i) Underfunding: The hospital received only USh. 293 million in FY 2024/25, a sharp decline from USh. 680 million in FY 2023/24. This reduction is inadequate in light of the growing patient numbers. Although students pay USh. 50,000 functional fee, it falls short of covering the actual cost of health care, resulting in a substantial funding gap that threatens service continuity and quality.
- ii) *Drug supply gaps:* Although the hospital operates at a level above HC IV, it does not receive essential medicines from the National Medical Stores (NMS), limiting its ability to provide comprehensive treatment.



iii) Rising mental health burden: Increased cases of academic stress, financial hardship, and personal challenges among students have led to higher demand for mental health services, including counseling and substance abuse support, placing a strain on the hospital's limited mental health capacity.

#### Recommendation

• Makerere University should prioritise increasing the hospital's budget to align with rising patient demand and service complexity, to ensure sustainable, high-quality care.

## 4.3.3 Equip and support all lagging primary, secondary schools and higher education institutions to meet the basic requirements and minimum standard

Basic requirements are minimum requirements for the provision of quality education and training in educational institutions such as classrooms, instructional/reading materials, and staff organisation and development, while minimum standards are basic set measures or benchmarks of expected performance and achievement for effective teaching, learning, and institutional management.

The planned outputs for FY 2024/25 include monitoring, inspection and support supervision of 2,290 education institutions; procurement and distribution of 2,212,653 copies of P.1 – P.4 books and 3000 metallic cabinets to 3,000 UPE schools; recruitment of education personnel; administration of examinations processes for the basic levels of education by UNEB; and continued implementation of curriculum adaptation by NCDC, and accreditation and quality assurance by NCHE.

#### **Performance**

The overall intervention performance was fair, with 68.4% achievement of planned outputs. Outstanding performance was registered in the Recruitment and Confirmation of Education Personnel (94.8%), Examination Assessment and Certification (89.7%), and Provision of Instructional Materials (75.8%). Moderate results were registered under Monitoring, Inspection and Support Supervision (53.7%), Accreditation and Quality Assurance (58.1%), and Curriculum Development (48.2%). Details of output performance are presented hereafter:

- a) Monitoring, Inspection, and Support Supervision: Monitoring in education involves continuous assessment of educational institutions to identify issues and areas for improvement, while inspection evaluates schools against established standards. KCCA was monitored, and the planned activities included:
  - i) Conducting comprehensive inspections of 626 schools to ensure they meet basic standards and provide quality education.
  - ii) Conducting the School Performance Assessment (SPA) in 79 UPE schools.
  - iii) Carrying out follow-up inspections to assess the implementation of Basic Requirements and Minimum Standards (BRMS) in the boarding sections of 255 private schools.

By the end of December, the overall performance of monitoring and inspection activities in KCCA was fair, with 53% of the targets achieved. The inspection covered 334 schools. The performance varied across divisions, with Nakawa and Kawempe exceeding expectations, each achieving 74% of their targets. Lubaga performed fairly, at 54%, while Makindye and Central Divisions fell short, with performance rates of 38% and 37%, respectively.

#### **Key School Inspection and Monitoring Highlights**

- i) Forty-four schools with boarding sections were issued implementation notices. These schools are being supported to meet the Basic Requirements and Minimum Standards before being allowed to operate boarding sections or face closure.
- ii) A total of 184 schools were found to meet the Basic Requirements and Minimum Standards. These schools were provided with guidance on areas requiring improvement.
- iii) Twenty-seven schools with boarding sections were issued closure notices due to failure to meet Boarding Basic Requirements and Minimum Standards.

School Performance Assessment (SPA) of 79 Government-Aided Primary Schools: The performance was good at 81.8% across five quality performance indicators (Table 4.5). School Management and Head Teacher Performance recorded the highest score (42.3/50), followed by Learning Environment (17.5/20) and Effectiveness of Teaching and Learning (17.2/25). Involvement of Parents and the Community was also strong at 4.7/5. Overall, the results reflect good school performance, particularly in leadership, learning environment, and community and parental engagement.

Table 4.5: School Performance Assessment (SPA) results for 79 Government-aided primary schools

	Targeted Score	Actual Score	Rating
Effectiveness of teaching and learning	25	17.2	Good
Learning environment	20	17.5	Good
School management and head teacher performance	50	42.3	Good
Involvement of parents and community	5	4.7	Good
Organisation & management of the boarding section	-	-	Fair
Total Score	100	81.8	Good

Source: Field Findings.

**b) Provision of Instructional Materials:** MoES, through its Instructional Materials Unit (IMU), is responsible for procuring and distributing instructional materials to primary and secondary schools across the country, aiming to improve the quality of education and student learning.

The plan this FY 2024/25 is to: i) procure 1,380,591 copies of English readers, Local Language and English dictionaries, and IRE Readers for P5–P7 learners; ii) procure 2,000 metallic cabinets for UPE primary schools; iii) finalise the National Instructional Materials Policy; and iv) monitor the state and management of instructional materials in UPE schools across the country. The performance of key outputs is highlighted below:



**Procurement of instructional materials for P5–P7:** A total of 1,393,049 copies of English, Integrated Science, and Social Studies textbooks and teachers' guides for P5–P7 were procured (see details in Table 4.6). These materials were distributed to all public primary schools at a 5:1 pupil-to-book ratio. MoES cleared 50% of the payments upon verification of the deliveries. However, due to insufficient funds, Islamic Religious Education (IRE), English dictionaries, and Local Language books were not procured.

Table 4.6: Summary of the P5-P7 instructional materials procured as of 31st December 2024

S/No	ltem	Quantity (Copies)Procured
1	P.5 English Readers	430,398
2	P.7 Integrated Science Learners' Textbooks	242,800
3	P.7 Integrated Science Teachers' Guides	36,306
4	P.7 Social Studies	242,800
5	SST Teachers' Guides	36,306
6	P.6 Integrated Science Learners' Textbooks	368,133
7	P.6 Integrated Science Teachers' Guides	36,306
Total C	uantity Procured	1,392,049

Source: Field Findings.

The publishers (contractors) distributed the books to the central locations, such as sub-county headquarters or designated schools, where head teachers were to collect the materials for their respective schools. Additionally, the District's Local Governments (DLGs) were not involved in the distribution process. This lack of coordination, combined with transportation challenges in rural and remote areas due to long distances and poor road networks, led to delays in delivering instructional materials to their respective schools.

**Procurement of non-curriculum books:** MoES spent USh. 753,600,000 on non-curriculum books for secondary schools, despite these items not being included in the approved budget, and core curriculum materials remaining unfunded. This reflects poor prioritisation and highlights the need for a clear, transparent framework to guide the selection and justification of non-curriculum materials.

Metallic cabinets for UPE primary schools procured: The procurement commenced, with suppliers pre-qualified under a three-year framework contract. While the distribution of cabinets aims to improve the storage of instructional materials, it remains insufficient to meet the overwhelming storage needs of many schools. Consequently, a large number of schools continue to face storage challenges, impacting the safekeeping and longevity of instructional materials.

*National Instructional Materials Policy finalised:* The draft was presented to the Top Management of MoES for review and consideration.

State and management of instructional materials in UPE schools monitored: Monitoring was conducted in 24 districts<sup>3</sup> (18 in the Eastern Region and 6 in the Central Region).

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<sup>&</sup>lt;sup>3</sup>These included Kamuli, Iganga, Jinja, Luuka, Butaleja and Buyende, Mayuge, Namayingo, Pallisa, Kibuku, Mbale, Manafwa, Sironko, Bududa, Namutumba, Tororo, Bukwo and Kween, Mpigi, Butambala, Bukomasimbi, Wakiso, Mityana and Mubende.

However, the limited number of staff in the department restricted the scope of the monitoring process.

c) Examination, Assessment and Certification: This is a key function overseen by the Uganda National Examinations Board (UNEB). UNEB's core mandate is to "streamline, regulate, coordinate, and conduct credible national examinations and award certificates at the basic levels of education." The Board ensures that assessments at these levels are conducted with integrity, consistency, and fairness, providing a reliable and accurate measure of student achievement.

The planned outputs include i) candidates registered; ii) Primary Leaving Examination (PLE) registers publicly displayed; iii) examination papers developed (paper setting and moderation); iv) District Inspectors of Schools sensitised; v) examination question papers and result slips printed; vii) examiners recruited; viii) contracted field professionals trained; and ix) capacity in continuous assessment built. Under the UNEB Infrastructure Development Project (Project 1356), the target was to commence the construction of a 10-floor e-Assessment and Digital Centre (Phase 1).

By 31st December 2024, UNEB's overall performance was good, with 89.7% of planned targets achieved. The candidate registration for PLE, examination administration, and production of examination materials outputs performed exceptionally well, achieving 100% of the targets. However, there was a shortfall in candidate registration at the secondary level, where only 379,620 out of the planned 498,783 Uganda Certificate of Education (UCE) candidates sat for examinations, indicating challenges in candidate turnout. Further investigation is needed to address the shortfalls in candidate registration and participation at the secondary level. Additionally, the number of special needs candidates registered and examined increased by 25.5%, from 2,652 in 2023 to 3,328 in 2024, and the majority were males. The construction of the e-Assessment and Digital Centre did not progress beyond the finalisation of project BOQs and ESIA approval.

Performance highlights of key planned outputs are presented below:

Candidates registered and examined: UNEB registered and examined 798,763 candidates in PLE, exceeding the planned target of 786,823 candidates. This increase was largely driven by higher-than-expected registration from UPE schools. For the UCE, the planned target was 498,783 candidates. However, only 379,620 candidates sat for the examinations, indicating a significant shortfall in turnout. This gap highlights the need for further investigation into the underlying challenges affecting candidate participation and the development of appropriate interventions to address them.

**Public display of PLE registers:** All the registers were displayed for public viewing, as planned. This reinforced transparency in the examination process and provided stakeholders, including parents and schools, with access to critical examination-related information.

**Examination paper setting and moderation:** UNEB completed the setting and moderation of all eight PLE and 116 UACE examination papers, ensuring that they met the required academic and technical standards.



Sensitisation of District Inspectors of Schools (DISs): UNEB planned to sensitise 235 DISs, but sensitised 230. The sensitisation efforts helped to prepare Local Government Education authorities for the smooth execution of the PLE examinations.

**Production and printing of examination materials**: The Board met its targets as a total of 3,304,656 PLE answer booklets and 192,000 security envelopes were produced. Additionally, UNEB printed 12,600,000 UCE answer booklets and 2,350,000 UACE answer booklets, adequately meeting the requirements for the administration of secondary-level examinations.

Contracted professionals and examiners trained: The Board hired 65,452 contracted field professionals for the PLE, achieving 99.6% of the planned target of 65,733. Additionally, 8,500 examiners were recruited for the marking process, ensuring adequate personnel for efficient script evaluation. To enhance scoring quality and reliability, UNEB trained 592 new examiners.

For secondary education, a total of 30,782 professionals were recruited and trained. Additionally, 520 area supervisors and 1,200 key stakeholders were sensitised, encouraging comprehensive engagement across various levels of the examination process. UNEB surpassed expectations in sensitisation and professional development.

Capacity building in continuous assessment and examiner retooling: A total of 63,041 teachers were trained in the implementation of continuous assessment (CA). Additionally, 5,200 examiners were retooled to ensure they were equipped with the CA skills and knowledge for the examination marking process under the Lower Secondary Curriculum.

Special Needs Education (SNE): UNEB demonstrated its commitment to inclusivity by developing a database for SNE candidates. In line with this commitment, 9,576 UCE SNE answer booklets and 1,750 UCE SNE graph papers were produced, and 1,820 UACE SNE answer booklets were printed. Special categories included the blind, deaf, physically handicapped, and those with learning challenges such as dyslexia. These efforts highlight UNEB's dedication to providing equitable assessment opportunities for all students.

*Marking venues:* To support the efficient processing of examination scripts, UNEB hired a total of 21 marking venues (14 for UCE and 7 for UACE). These venues provided adequate infrastructure for the marking of scripts, ensuring that the marking process was conducted in a controlled and organised environment.

**Security and integrity measures:** The Board signed a Memorandum of Understanding (MoU) with security agencies, which helped to reinforce the security measures in marking centres to safeguard the examination process. Additionally, a quality assurance audit was conducted for the PLE examination system, ensuring that operational procedures adhered to the highest standards of accountability.

Construction of e-Assessment and Digital Centre (Phase 1): The target was to commence the construction of a 10-floor e-Assessment and Digital Centre. However, this was not achieved. Progress was limited to the finalisation of the project's BOQs and the approval of the Environmental and Social Impact Assessment (ESIA) report.

#### Challenges

- 1. High cost of competency-based assessment: The effective implementation of competency-based assessment requires substantial financial resources for continuous teacher retooling, training in project-based learning, and capacity building for continuous assessment scoring. Additionally, the assessment of practical subjects remains particularly expensive due to the need for specialised equipment and materials.
- 2. Escalating examination administration costs: The costs associated with the administration of examinations, including field operations and marking, have significantly increased. Contracted professionals, such as examiners and invigilators, continue to demand higher allowances to offset the effects of inflation and rising living costs, putting a financial strain on the Board.

#### Recommendation

- The UNEB, in collaboration with MoFPED, should review and standardise the allowances for contracted professionals to ensure fair remuneration while maintaining financial sustainability.
- d) Recruitment and Confirmation of Education Personnel: The Education Service Commission (ESC) is mandated to oversee appointments in the education service, including recruitment, confirmation, promotion, transfer, and discipline of personnel.

For the first half of FY 2024/25, the ESC planned to: i) appoint 1,500 personnel, ii) confirm 1,500 personnel; iii) verify 250 appointments; iv) regularise 12 appointments; v) redesignate 12 personnel; vii) grant study leave to 10 personnel; vii) discipline 6 personnel; viii) support 40 District Service Commissions (DSCs). Under the Project 1602 Retooling of the Education Service Commission, the plan was to roll out the e-recruitment system; and ix) train 40,000 e-recruitment system stakeholders and users countrywide.

Under health and safety, the ESC aimed to: ix) provide HIV/AIDS support for staff living with HIV; and x) develop an HIV/AIDS policy. Regarding environmental initiatives, the ESC planned to: (xi) procure 500 trees for distribution in selected schools for planting; (xii) sensitise 1,000 teachers to the effects of climate change during recruitment; and xii) establish a committee on climate change adaptation and mitigation.

By 31st December 2024, the ESC had very good performance, achieving 94.8% of the planned targets. This was largely driven by overperformance in personnel redesignations and HIV/AIDS interventions. Notably, the redesignation of personnel far exceeded expectations, reaching 1,620% of the planned figure (405 redesignations against a target of 25). This was attributed to the high number of submissions received by the Commission. Similarly, HIV/AIDS prevention and control activities performed well, surpassing the planned targets.

The personnel management function had mixed results. While appointments and confirmations fell below target, verification, regularisation, and disciplinary actions exceeded expectations. However, climate change adaptation efforts lagged, achieving only 67% of the planned activities. The detailed performance of key outputs is highlighted below:

i) The ESC appointed a total of 957 (680 males and 277 females) education personnel, including 347 BTVET staff and 613 teachers, for 46 schools to operationalise the seed



schools under the Uganda Intergovernmental Fiscal Transfer (UgIFT) Programme. Each UgIFT school received an average of 21 teachers. However, the rapid increase in student enrolment due to the UgIFT interventions has placed considerable strain on both the available infrastructure and staffing capacity, which may potentially impact the quality of education provided.

- ii) For the 91 UgIFT schools, the recruitment process for 2,852 personnel was underway, and a supplementary budget of USh. 103 billion was allocated for the exercise. However, petitions in Parliament highlighted concerns over irregularities in the recruitment process, including allegations of bribery, nepotism, and the exclusion of existing teachers in those schools.
- iii) A total of 1,100 personnel (825 males and 275 females) were confirmed, though this fell short of the half-year target. Despite this, deliberate efforts by MoES significantly improved the confirmation process, enhancing overall efficiency.
- iv) Appointments of 513 personnel (256 males and 257 female) were verified, a key measure in addressing the issue of ghost teachers on the payroll. In addition, 22 appointments (8 males and 14 females) were regularised, correcting discrepancies in previous records.
- v) Furthermore, 405 personnel (304 males and 101 females) were redesignated from technical teachers to assistant instructors, reflecting changes to the TVET structure. This overperformance was a direct result of the restructuring of the technical teacher category.
- vi) The ESC handled 41 disciplinary cases (29 males and 12 females), with 18 individuals recommended for dismissal due to issues such as abandonment of duties, particularly among science teachers. Other cases involved financial misconduct.
- vii) The rollout of the e-recruitment system was completed, facilitating the hiring process for various education positions. This included Head teachers, Deputy Head teachers, and Senior Education Assistants under KCCA, as well as head teachers and deputy head teachers for the UgIFT Programme and assistant lecturers and senior lecturers at Bukalasa Agricultural College. To enhance efficiency, stakeholders and applicants received training and support during the recruitment process. In total, 4,330 personnel were recruited, comprising 874 under KCCA, 3,437 under UgIFT, and 19 under Bukalasa Agricultural College.
- viii) The construction of the ESC headquarters stalled due to a lack of an infrastructure code. However, the process of acquiring one was underway. Obtaining the necessary clearances from relevant bodies took longer than expected; they have now been secured.
- ix) In support of staff living with HIV, the ESC provided quarterly supplementary support of USh. 1.2 million to each affected staff member. Additionally, the ESC established a committee on environmental initiatives and successfully inducted its members. However, other planned environmental actions were not implemented as initially intended.

e) Accreditation and Quality Assurance: The National Council for Higher Education (NCHE), established under the Universities and Other Tertiary Institutions Act, 2001 (as amended), serves as the regulatory authority for higher education in Uganda. Its core mandate is to ensure that universities and other tertiary institutions meet established accreditation standards and provide high-quality, relevant education aligned with national development priorities and international academic benchmarks.

NCHE planned several key outputs for FY 2024/25, focused on accreditation, quality assurance, compliance monitoring, and capacity building within the higher education sector. The planned outputs and performance details are summarised in Table 4.7.

By 31st December 2024, NCHE's overall performance was fair, with 58.1% of the planned targets achieved. Specific outputs under Standards, Recognition, and Qualifications Services performed exceptionally well, achieving 99% of targets. The Quality Assurance and Accreditation outputs performed at 88%, with programme accreditation and leadership training exceeding the targets. However, foreign qualification equivalence slightly missed the target, although it is expected to meet them by the end of the financial year.

The performance in Compliance Monitoring of Higher Education Institutions (HEIs) fell short of the target, with only 55 out of 90 institutions assessed. This shortfall was primarily due to inadequate transport resources for field activities. NCHE operates with a fleet of six vehicles to oversee over 265 institutions. However, three of these vehicles were old and were due for disposal, leaving NCHE with only three vehicles for field operations. Additionally, staffing levels are insufficient to meet the demands of the mandate, with only 44.8% of the approved positions filled, well below the Government's minimum requirement of 65%. The establishment of the MoUs also lagged, with only one of two agreements signed.

In terms of Research and Innovation, the progress was poor, with a 0% performance. The Capacity Building and Institutional Development initiatives performed marginally at 46%, with most key activities still in progress. The planned staff sensitisation workshops on HIV/AIDS and environmental conservation education were not conducted. These activities were to be implemented in Quarter Three.

Table 4.7: Performance of key planned outputs under the NCHE by 31st December 2024

Outputs	Targets	Actual Performance	Performance Status
Qua	ality Assurance	and Accreditation	
Verification for STEM	20 STEM	Verified 20 HEIs offering STEM	Target achieved
facilities for STEM	facilities	programs	
programmes undertaken			
Memorandum of	2 MoUs	Only one (1) MoU was signed between	Ongoing (50%
Understanding (MoUs)		NCHE and a professional body by the	completion)
established with		end of Quarter Two	
professional bodies			
Programmes accredited	300	A total of 305 programmes from HEIs	Target exceeded
	programmes	were accredited cumulatively	
Applications for licence	20	All 20 applications for licensure were	Target achieved
reviewed	applications	reviewed as planned	
Institutional managers	50	Trained 53 institutional managers and	Target exceeded
and owners trained	institutional	owners in strategic leadership	



Outputs	Targets	Actual Performance	Performance Status
strategic leadership	managers		
Dogwood	and owners	All 50 towarded agreement and	Tanaka diina d
Programme and institutional assessors	50	All 50 targeted programme and institutional assessors from higher	Target achieved
trained	programme and	education institutions were successfully	
lanea	institutional	trained	
	assessors	Tanioa	
Higher education	90 HEIs	NCHE monitored only 55 higher	Behind schedule (61%
institutions (HEIs) are		education institutions for compliance	completion)
monitored for			
compliance			
OTEN/OTE		cognition, and Qualifications Services	
STEM/STEI	100	A total of 100 STEM/STEI programmes	Target achieved
programmes accredited	STEM/STEI	from HEIs were successfully accredited	
Minimum standards for	programmes 6 minimum	Successfully achieved the development	Target achieved
courses of study	standards	of 6 minimum standards for courses of	raiget adilieved
developed	otaridardo	study as planned	
Minimum standards	3 minimum	Completed the review of the 3 minimum	Target achieved
reviewed	standards	standards for courses of study by the	
		end of Quarter Two	
Foreign qualifications	220 foreign	Equated a total of 219 foreign	Slightly below target
equated	qualifications	qualifications	(99% completion)
Local qualifications	60 local	Equated 60 local qualifications by the	Target achieved
equated	qualifications	end of Quarter Two, as planned	
	ICT	, Research, and Innovation	
State of Higher	One Survey	By the end of Quarter Two, NCHE was	Behind schedule
Education Survey	Report	conducting fieldwork and data collection	
Report published		for the State of Higher Education (SHE)	
Tracer Chiefe Depart	One Trees	Survey	Dahind ashadula
Tracer Study Report published	One Tracer Study Report	Data collection for the Tracer Study Survey was underway. NCHE training	Behind schedule
published	Study Neport	data collectors as part of the process	
Higher Education	2 Higher	Abstracts and papers were submitted,	In progress
Review Journal	Education	and peer reviews were conducted for	[2 3
published	Review	publication	
	Journals		
Higher Education	One	Stakeholders for the conference were	In progress
Conference organised	conference	identified and engaged	1
Annual Higher Education Exhibition	One	Engaged universities and head teachers	In progress
Education Exhibition organised	exhibition	from secondary schools in the Western Region	
Organiseu	Canacity Bu	ilding and Institutional Development	
Concept on funding the	One concept	Engaged stakeholders and developed	In progress
National PhD		the draft concept for the National PhD	F: - 9: 300
Programme developed		Programme	
Strategic partnership	1 strategic	Engagement between NCHE and key	In progress
established with key	partnership	stakeholders was ongoing	
stakeholders		T	B
End-users from HEIs	50- end-	Trained 25 IMIS end-users from HEIs	Behind schedule (50%
trained on the Integrated	users		completion)
Management			

Outputs Targets		Actual Performance	Performance Status	
Information System (IMIS)				
HEIs monitored for compliance with Open, Distance, and eLearning (ODeL) systems	23 HEIs	A total of 20 HEIs were monitored for adherence to Open Distance e-Learning standards	Slightly below target (87% completion)	

Source: Field Findings.

### Challenges

- 1. *Inadequate staffing levels*: NCHE has only 44.8% of its approved staffing structure filled, well below the Government minimum requirement of 65%, despite the institution's large mandate.
- 2. *Insufficient transport resources*: NCHE has a fleet of only six vehicles to oversee 265 institutions. However, three of these vehicles are over five years old and due for disposal, leaving only three vehicles for field operations.
- 3. Limitations of the UOTI Act (2001) (as amended): The current legal framework limits the full and timely implementation of NCHE's mandate, affecting the Council's operational efficiency.
- 4. *Inadequate and unstable funding*: NCHE faces challenges due to insufficient funding, which hinders the effective implementation of planned activities. Additionally, intermittent budget cuts have resulted in the non-implementation of critical activities.

### Recommendations

- i) Amend the Universities and Other Tertiary Institutions Act (2001) to address existing gaps and limitations that hinder the efficient and timely implementation of NCHE's mandate.
- ii) Enhance transport resources: NCHE should prioritise the procurement of additional vehicles within the available resources to ensure sufficient transport for field operations.

### f) Development and Review of the Curricula for Various Levels of Education

The National Curriculum Development Centre (NCDC) is responsible for the development and review of curricula for pre-primary, primary, secondary, and tertiary institutions in Uganda. Its core functions include curriculum research and evaluation, initiation and development of new curricula, conducting teacher refresher programmes, and supporting curriculum delivery across these education levels.

NCDC set several targets for the FY 2024/25, as outlined in Table 4.8, and by the end of December 2024, the Centre had achieved 48.2% of its key planned activities, reflecting poor performance.



The alignment of the A-level curriculum: NCDC aligned the A-Level curriculum with the competency-based Lower Secondary Curriculum (LSC) to eliminate content redundancy, outdated pedagogical approaches, and assessment inconsistencies. These included comprehensive content mapping, the removal of obsolete material, and the restructuring of 29 A-level subjects.

To facilitate early implementation, an abridged curriculum for Senior Five was rolled out, with instructional materials and teacher manuals made available online through the NCDC and UNEB portals. In the interim, teachers were engaged in virtual professional development sessions while awaiting the distribution of printed syllabus books. Physical training was scheduled to commence once supplementary funding was secured.

The outstanding tasks included finalising assessment frameworks, publishing instructional materials, and conducting comprehensive teacher training, all critical for the successful rollout. Lessons from the LSC implementation highlighted the importance of inclusive stakeholder engagement, particularly involving head teachers, ensuring wide training coverage, and adopting structured rollout programmes.

However, progress was constrained by delayed funding, which compelled NCDC to reallocate internal resources to sustain key activities. The resulting budget shortfalls led to the postponement of several planned interventions, negatively impacting the implementation timeline. A summary of the current implementation status is provided in Table 4.8.

Table 4.8: Key outputs and achievements of NCDC by 31st December 2024

Department	Outputs	Actual Achievements	Performance Status
Primary Education Curriculum	One Benchmark study on trends in the Primary Curriculum was conducted.	Conducted a benchmark study in Seychelles, a leading SDG implementer in Africa.	Achieved
	Scope and Sequence of the Reviewed Primary Curriculum (RPC) developed.	The output was not achieved.	Not achieved
	Curriculum Framework, Scope, and Sequence of the Primary Curriculum validated by stakeholders.	Validation exercise was conducted with stakeholders in Central (Masaka), Western (Canon Apolo TTI), Eastern (Iganga), and Northern (Gulu) regions; 50% completion.	Ongoing
	A total of 10 non-textbook materials (5 Flash cards, 5 video vignettes) developed to support the teaching of Kiswahili at the Primary level, with a special to rural schools.	Draft resource books and flash cards (10 non-textbook materials, i.e., 5 flash cards, 5 video vignettes) were developed and are ready for NCDC quality assurance processes.	Achieved
	2,000 Kiswahili Teachers trained on P.4 Kiswahili Curriculum.	A total of 415 teachers and 6 DEOs were trained in Kasese, Kabarole, and Fort Portal City.	Ongoing but below target
Secondary Education	130 A-Level set books for Local Language vetted.	Completed vetting of 130 A-level set books.	Achieved
Curriculum	Technical monitoring of 650	This was not achieved due to	Not achieved

Department	Outputs	Actual Achievements	Performance Status
	secondary schools.	funding constraints.	
	Stakeholder consultations conducted for Upper Secondary curriculum alignment.	This was not done.	Not achieved
	Alignment of A-Level curriculum to Lower Secondary Curriculum (LSC)	NCDC aligned 29 A-level syllabus documents to LSC; approved by ASB. The abridged curriculum was rolled out, with materials and manuals made available online through the NCDC website and the UNEB portal.	Achieved
	Quality assurance of Upper Secondary Curriculum documents	Completed quality assurance for curriculum documents; 29 A-level syllabus documents aligned to LSC, along with training manual, assessment modalities, and implementation guidelines.	Achieved
	School-based teacher support in 38 Western Uganda districts	Completed school-based teacher support for teachers and administrators in 38 districts.	Achieved
	100 instructional materials uploaded	A total of 5 instructional materials were uploaded to the NCDC website to improve access to instructional materials for the learners/schools in rural and hard-to-reach areas uploaded.	Below target
	Sample schemes of work and lesson plans for LSC finalised.	The sample schemes of work and lesson plans for LSC were finalised and awaiting ASB's comments.	Ongoing
	Set books for Literature and Local Languages evaluated	Completed evaluation set books with 82 teachers.	Achieved
	Digital content for training on the new Lower Secondary Curriculum has been developed	Refined project concept and roadmap, 1 year's scope and sequence and 6 storyboards ready for digitising.	Achieved
	A total of 10 reviewed community polytechnic courses were disseminated.	All 10 reviewed community polytechnic courses were disseminated to parents and youths in rural areas.	Achieved
	Curricula and assessment guidelines developed for Junior Certificate courses in Accounting, Business Management, Secretarial, and Leather Technology	The 4 draft curricula and assessment guidelines for Junior Certificate courses in technology to support skills acquisition among youths have been edited.	



Department	Outputs	Actual Achievements	Performance Status
Quality Assurance	Various educational materials were evaluated	The evaluations were completed, and the reports, along with the soft copies, were shared.	Achieved
	Materials from different departments were edited and proofread	The edited materials with suggested corrections were completed, and the reports along with the soft copies made available.	Achieved
Special Needs Education	Adaptation of Lower Secondary Curriculum for Geography and Mathematics for visually impaired learners	Adapted curriculum for visually impaired learners; draft copies available.	Achieved
	A total of 2,000 copies of Uganda Sign Language Syllabus for New Lower Secondary to 24 schools offering Sign Language printed and distributed	This was not achieved due to limited funding.	Not achieved
	Final editing and design of instructional materials for gifted and talented learners	Final editing was in progress; draft readers available.	Ongoing
	Presentation of readers, reading cards, instructional materials for learners who are gifted and talented in primary one to the Academic Steering Board (ASB)	Work in progress, Drafts available, in the report.	Ongoing
	Final editing of AEP Syllabus materials (Nutrition and Food Technology, Agriculture, and Kiswahili) done with ASB	Work in progress, drafts available, in the report.	Ongoing
Pedagogy & Innovations	CPDs on pedagogies for Upper Secondary and mapping teaching methods were conducted	The CPDs for 12 Secondary Specialists have been completed, and the training materials and reports are available.	Achieved
Research, Evaluation, and Consultancy Services	Phase 3 data collection on language assessment for medium of instruction in lower primary education	Data collection is ongoing, and the progress report is available.	Ongoing
ICT and Multimedia	Development of digital content for teacher support in competence-based LSC	Refined project concept; 6 storyboards ready for digitising.	Ongoing
Literature Bureau	Development of Facilitator's Guide to the Terminology Handbook.	The guide was completed and submitted for ASB review.	Achieved
	One training package for terminology developed	This was not achieved due to limited funding.	Not achieved
	One literary text for each of 10 Local Languages developed	This was not achieved due to limited funding.	Not achieved
Science, Technology, and	Production of chalkboard sets and laboratory equipment	Produced 100 burette racks, 81 compasses, 50 dividers, 27 protractors, and 80 set squares.	Achieved
Equipment	100 sets of building blocks, 100 sets	This was not achieved due to	Not achieved

Department	Outputs	Actual Achievements	Performance Status
Production	of letters, 50 sets of letter puzzles,100 motor toys, 15 sets of animal jigsaws, and 100 pieces of 3D models, 100 pieces produced for sale	limited funding.	
	2,000 glassware apparatus and 500 pieces of equipment for science teaching laboratories repaired	This was not achieved due to limited funding.	Not achieved
	70 laboratory technicians trained on the maintenance and use of scientific equipment.	This was not achieved due to limited funding.	Not achieved
	Laboratory equipment for selected schools was repaired	Repaired 350 assorted equipment and glassware for Kololo SS, St Joseph's Nagalama, and Mbogo schools.	Achieved
	In-service laboratory technicians and science teachers were trained	Trained 35 science teachers and 34 lab technicians on equipment use, maintenance, safety, and ICT integration; expenses detailed.	Achieved
HIV/AIDS Mainstreaming	Review of Workplace Policy on HIV/AIDS.	This was not done.	Not achieved
Climate Change Mitigation	Environment and climate content/activities are integrated in the 20 subjects of the Upper Secondary Syllabi and instructional materials	This was not done.	Not achieved

Source: Field Findings.

### Challenge

1. Resource constraints: NCDC faces challenges in securing adequate funding and resources for the full implementation of the revised curriculum. This affects the production of teaching materials, teacher training programmes.

# 4.3.5 Roll out Early Grade Reading and Early Grade Maths in all primary schools to enhance proficiency in literacy and numeracy

The Early Grade Reading (EGR) and Early Grade Maths (EGM) methodologies support the Thematic Curriculum by strengthening teachers' instructional skills and equipping learners with foundational literacy and numeracy for long-term academic success. MoES planned to train 130 teachers in four Local Governments (Buliisa, Amudat, Kween, and Tororo).

### **Performance**

Overall performance was fair, at 55%. While the number of teachers trained (130) matches the planned total, the geographical coverage goal (4 LGs) was not achieved, which significantly affected the overall objective of equitable national rollout.

By December 2024, training was successfully conducted in Buliisa District, reaching the full target of 130 teachers, including 65 head teachers and 70 Primary One teachers on the EGR methodology. However, due to resource constraints, implementation in Amudat, Kween, and Tororo did not proceed as planned. This highlights the need for improved resource mobilisation to ensure equitable rollout across all targeted districts.



### **Challenges**

- 1. Limited teacher capacity: A significant number of teachers lack the specialised pedagogical skills for effective early grade literacy and numeracy instruction, affecting learning outcomes at foundational levels.
- 2. *Inadequate learning materials*: Many schools face shortages of essential instructional resources, including textbooks, teacher guides, and materials in local languages, hindering consistent delivery of the EGR and EGM methodologies.

### Recommendation

Enhance teacher support systems: MoES should establish structured mentorship programs and peer learning networks to continuously build teacher capacity in early grade instruction.

4.3.6 Upgrade the Education Management Information System to include functions for tracking enrolment, dropout, retention, and uniquely identify learners, teachers, and institutions.

The Education Management Information System (EMIS) upgrade aims to enhance the tracking of enrolment, dropout, and retention, while enabling unique identification of learners, teachers, and institutions. The system provides timely, accurate data to support effective planning, budgeting, and monitoring.

MoES planned to implement the following EMIS-related activities in FY2024/25:

- i) Conduct public awareness campaigns on EMIS and its interventions;
- ii) Pay salaries for EMIS Support Officers to facilitate rollout of the redeveloped system;
- iii) Build capacity of EMIS users through targeted training; and
- iv) Procure ICT equipment to support EMIS implementation at Local Government levels and the Ministry headquarters.

### **Performance**

The overall performance of the EMIS intervention was good, with 76.6% of the planned outputs achieved by 31st December 2024. Key achievements included:

- 1. **Public awareness campaigns on EMIS conducted:** Awareness campaigns were conducted to over 9,000 heads of private institutions through sensitisation events held at four central locations: Wakisha Resource Centre, UMEA Primary School, Seeta, Entebbe Secondary School, and Nakasero Primary School.
- 2. Salaries for EMIS support officers paid: Salaries were paid for 52 EMIS Support Officers and 2 Database Analysts, all of whom were equipped with laptops and motorcycles to facilitate the rollout of the EMIS across Local Governments. Their deployment contributed to enhanced data quality, increased system utilisation, and more efficient resolution of technical issues at the school level.

- 3. **EMIS users trained:** EMIS training was conducted in 500 schools across Eastern and Western Uganda, focusing on data entry, reporting, and compliance. As a result, learner records in EMIS increased from 9.88 million (2022) to 13.29 million (2024), indicating improved data accuracy and institutional adoption.
- 4. **ICT equipment procured:** A total of 177 desktop computers were procured and distributed to education officers, especially in districts previously underserved. This enhanced EMIS accessibility and capacity at both decentralised and central levels.

### Challenges

- 1. *Inadequate ICT infrastructure*: Many schools and district offices, particularly in rural areas, lack essential ICT tools such as computers, reliable internet, and power supply. This limits timely data entry, system access, and real-time reporting, undermining the effectiveness of EMIS.
- 2. Capacity gaps among users: Head teachers and district officers often face challenges in using EMIS due to limited digital literacy and inadequate follow-up support, resulting in inconsistent and inaccurate data submissions.

### Recommendations

a) Strengthen user capacity and support: MoES should enhance continuous training and digital literacy programmes for EMIS users and increase the number of regional EMIS Support Officers to provide technical support and mentorship at the school level.

### 4.3.7 Provide early exposure to STEM/STEI to children

This intervention aims to introduce learners to STEM (Science, Technology, Engineering, and Mathematics) and STEI (Science, Technology, Engineering, and Innovation) at an early age to spark curiosity, strengthen problem-solving skills, and nurture a passion for innovation.

The planned outputs include: i) one National Science Fair in secondary schools facilitated; and ii) 334 sets of mini-laboratories procured to promote innovative pupil-led science projects in primary schools.

### Performance

The overall performance was fair, with 66% of planned outputs achieved. A key milestone was the successful procurement and delivery of 334 sets of mini-laboratory equipment to Ministry stores, intended to support pupil-led science projects in primary schools. However, the National Science Fair was postponed due to inadequate funding, with only 75% of the required budget secured.

Whilst progress in procurement, implementation challenges remain. Many teachers lack adequate training to use the science kits effectively, limiting their instructional value. Additionally, most schools do not have appropriate storage facilities, increasing the risk of equipment damage or loss.



#### Recommendations

- a) The MoES should provide regular teacher training focused on practical science teaching to maximise the use of the kits.
- b) The MoES and Local Governments should strengthen follow-up mechanisms and routine inspections to ensure proper utilisation, safeguard equipment, and enhance the impact of STEM learning in primary schools.

# 4.3.8 Provide the critical physical and virtual science infrastructure in all secondary schools and training institutions

This intervention aims to enhance science education by equipping secondary schools and training institutions with essential physical and virtual infrastructure. These initiatives seek to encourage innovation and prepare students for academic and career success in Science, Technology, Engineering, and Mathematics (STEM) fields.

Under MoES, implementation is through the Development of Secondary Education Project-Phase II, the OFID Funded Vocational Project Phase II, the UgIFT Programme, and the Uganda Secondary Education Expansion Project (USEEP). The implementation in the nine public universities is through the Support to Universities' Infrastructural Development and Retooling projects. The monitored universities included: Makerere University, Mbarara University of Science and Technology (MUST), Lira University, Busitema University, Muni University, Mountains of the Moon University, and Soroti University.

### **Performance**

Mixed performance was registered, with overall average physical progress at 58%. The major projects, such as USEEP and BTVET-II, lagged with 25–30% progress and financial absorption below 35%. This was mainly due to procurement delays, land issues, staffing gaps, and weak operational planning. The UgIFT Programme, however, achieved about 70% of the planned outputs. In public universities, performance was uneven; Makerere, Mbarara, and Busitema Universities posted over 70% completion, while Soroti, Gulu, Muni, and Mountains of the Moon lagged, at 30–50%. The performance of the different projects is highlighted below:

# a) The Uganda Secondary Education Expansion Project (USEEP)

This is a World Bank-funded initiative, supported by the International Development Association (IDA), with a total financing of USD 150 million. This amount includes a counterpart contribution of USD 21.6 million from GoU. The project became effective on 19th May 2022 and is scheduled for completion on 31st December 2025.

The project focuses on the construction, expansion, furnishing, and equipping of 177 schools in underserved areas across 96 districts. This includes 116 new secondary schools and 61 expansions of existing schools. The initiative targets both refugee-hosting communities in 13 districts<sup>4</sup> and non-refugee-hosting districts in 84 districts where access to public lower secondary schools is limited.

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<sup>&</sup>lt;sup>4</sup> The refugees in Uganda are hosted in 13 districts, i.e., Adjumani, Isingiro, Kampala, Kamwenge, Kikuube, Kiryandongo, Koboko, Kyegegwa, Lamwo, Madi-Okollo, Obongi, Terego and Yumbe.

### Planned Outputs for the 2024/25 Financial Year

- i) Commencement of construction for 60 new seed secondary schools and the expansion of 61 existing Government secondary schools.
- ii) Furnishing of the 60 newly constructed seed schools and 61 expanded schools with classrooms, laboratory equipment, and furniture.
- iii) Conducting environmental impact assessments to ensure compliance with environmental, health, and social safeguards.
- iv) Sensitisation of Clerks of Works to effectively oversee construction activities in line with established quality, environmental, and social safeguard standards.

## **Implementation Progress**

As of 31st December 2024, cumulative disbursements were at USD 15.90 million, representing only 11% of the total loan amount of USD 150 million. Total expenditure was USD 4.32 million (2.88% of the total loan amount), reflecting a notably low absorption rate. The overall physical progress was poor, at 18%, and the project was significantly behind schedule.

The slow project implementation and low absorption of funds were primarily due to delays in infrastructure works, particularly in land titling, verification, and validation processes, which hindered the timely execution of the project deliverables.

Further setbacks arose from gaps in project preparation, planning, and scheduling. The implementing agency (MoES) encountered difficulties in recruiting the Project Coordination Unit (PCU) staff, finalising structural designs, and initiating procurements.

As a result, the planned construction of 60 new schools and the expansion of 61 existing schools did not commence. However, by 31st December 2024, 148 land titles had been secured out of the 177 targeted sites (101 for new schools and 47 for expansions). The procurement for construction was prioritised for sites with secured titles, and contractors for eight new sites had been procured, awaiting site handover.

Additionally, the sensitisation of Clerks of Works to ensure adherence to construction and safeguard standards was not implemented as planned. With approximately 10 months remaining until project completion, time and cost overruns are inevitable.

### b) The Uganda Intergovernmental Fiscal Transfers (UgIFT) Programme

The programme is supported by the World Bank to implement the Inter-Governmental Fiscal Transfer-Reform Programme (IGFT-RP) and strengthen fiscal decentralisation. In FY 2024/25, the plan is to operationalise the 111 seed secondary schools under Phase II and to complete the 27 seed secondary schools under Phase III.



However, by 31st December 2024, this was not achieved due to the delayed completion of structures, primarily attributed to the limited capacity of some contractors. This underscores significant inefficiencies in the evaluation process of contractors.

The delays notwithstanding, construction was ongoing and progress varied across sites, with the majority at the roofing and finishing stages, while a few had stalled. The notable stalled projects included Mamba Seed Secondary School in Nebbi, and Muhula Seed Secondary School in Butaleja District, among others.

The construction of 27 schools under Phase III began, except in Kazo District, where works had not started.

The overall performance of the UgIFT programme was good, with significant progress in wage allocations, recruitment, as well as Non-Wage Recurrent (NWR) allocations. Additionally, the programmme expanded access to secondary education through the construction and equipping of secondary schools in previously underserved sub-counties.

### i) Wage allocations and recruitment

The Education Wage Grants have grown significantly under UgIFT:

- a) Primary Education Wage Grants increased from USh. 918.4 billion (FY 2017/18) to USh. 1.03 trillion (FY 2024/25) (+12.3%).
- b) Secondary Education Wage Grants rose from USh. 217.6 billion (FY 2017/18) to USh. 746.5 billion (FY 2024/25) (+243.1%), driven by the recruitment of education personnel.
- c) Total staff recruited: 5,269 (including 329 head teachers, 4,415 teachers, and 525 support staff).

However, the projection of 31 staff per school may not be realistic, as staffing needs vary based on school size and student enrolment.

### ii) NWR allocations

- a) NWR allocations have become more equitable and consistent under the formula-based approach.
- b) The sector NWR allocations budget exceeded the MTP target (USh. 663 billion vs. USh. 593 billion).
- c) Primary education NWR funding rose from USh. 67.8 billion (FY 2017/18) to USh. 298.7 billion (FY 2024/25) (+340.5%).
- d) Secondary education NWR funding increased from USh. 127.0 billion (FY 2017/18) to USh. 159.2 billion (FY 2024/25) (+25.4%).

### iii) Construction and enrolment progress

a) By 31st December 2024, 114 (all under Phase I) out of the 259 planned seed secondary schools were completed, equipped, and operational, with 68 already commissioned. Three schools – Bubentsye in Mbale, Mukoto in Namisindwa, and Kihanga in Ntungamo – were still under construction but nearing completion.

- b) Student enrolment in completed schools rose from 27,967 in 2022 to 62,670 by October 2024, with some schools, especially in Buyende and Pallisa, exceeding 1,000 students.
- c) Increased enrolment has led to overcrowding, high student-to-teacher ratios, and resource constraints, emphasising the need for expanded infrastructure and staffing.
- d) Some school, such as the Lodonga seed schools in Yumbe, repurposed some of the facilities such as the ICT and library building, and classrooms, dormitories (turned into boarding schools) without proper planning.
- e) ICT equipment, science kits, and reagents were procured and installed, but some schools, particularly in Eastern Uganda, faced theft due to inadequate security and lack of fencing.
- *Technical institutions:* Of the five beneficiary technical institutions under UgIFT, only Rwentanga Farm Institute was completed. Kumi Technical Institute and Tororo Cooperative College were at the contract award and evaluation stages, while construction was ongoing at Jinja School of Nursing and Midwifery and Jinja Medical Laboratory School.
- **Primary school infrastructure:** By 31st December 2024, infrastructure for a total of 28,981 primary school was completed, including 1,998 new classrooms, 643 renovated classrooms, 6,681 VIP latrines, and 19,414 three-seater desks. However, only 245 teachers' houses were completed, leaving a significant gap in staff accommodation, which affects teacher retention and performance, especially in remote areas.
- Compliance with Environmental and Social Safeguards (ESS) on project sites has been inadequately prioritised throughout the programme cycle. Key challenges include limited enforcement of safeguard measures and insufficient capacity among Local Governments to enforce the measures.

# Challenges

- 1. Lack of operation and maintenance plans, as there are no infrastructure and equipment maintenance strategies after the programme ends.
- 2. The lack of fencing has resulted in security lapses, leading to the loss of computers, especially in Eastern Uganda.
- 3. Slow staff recruitment, which is hindering the effective operationalisation of seed secondary schools.
- 4. Contract management challenges, including the low capacity of some contractors and project abandonment, pose a risk to the completion of 145 schools by June 2025.
- 5. Some schools lack electricity and water connections, affecting the operationalisation of the ICT and science laboratories.



6. The surge in enrolment, from 27,967 in 2022 to 62,670, has strained resources, exceeding the capacity of infrastructure and staff, potentially compromising the quality of education.

### Recommendations

- i) The MoES, in collaboration with the affected Local Governments, should prioritise the completion of construction projects by addressing contractor issues. This includes closely monitoring project timelines to prevent delays.
- ii) The MoES and MoFPED should prioritise funding for operations and maintenance (O&M).
- iii) MoES and the ESC should strengthen human resource planning to align recruitment with budgetary provisions to address staffing gaps as quickly as possible.
- iv) Monitoring mechanisms should be strengthened by MoES and MoFPED to ensure the timely completion of Phase II and III seed secondary schools and the operationalisation of all facilities.

# c) OPEC Fund for International Development (OFID)

Project 1432: The OPEC Fund for International Development (OFID) accommodates two projects: The Vocational Education (VE II) Project and the Business, Technical, and Vocational Education and Training (BTVET) Support Project – Phase II.

i) The Vocational Education (VE II) Project: The project is funded by the OPEC Fund for International Development (OFID) and GoU, at a total cost of USD16.710 million, with OFID contributing USD 14.300 million (85.6%) and GoU USD 2.410 million (14.4%). The project, initially set to close in December 2021, is now scheduled for completion by December 2025. It aims to construct facilities at eight technical institutions, including Basoga Nsadhu Memorial, Nawanyago, Sasiira, Buhimba, Lwengo, Kilak Corner, Ogolai, and Lokopio Hills.

The planned targets for FY 2024/25 include the continued construction of four technical institutions, i.e., Lokopio Hills, Kilak Corner, Ogolai, and Lwengo, aiming for an overall physical progress of 60%. Additionally, a total of 126 technical staff were to be trained in Skills Capacity Building across eight institutions, while 352 management staff trained in Institutional Management Capacity Building at the same institutions.

By the end of December 2024, construction at Kilak Corner and Ogolai Technical Institutes averaged 65% physical progress. At Lokopio Hills Technical Institute, works commenced in January 2025, with progress limited to only the multipurpose hall, block laying, the concrete practice (BCP) shelter, staff latrine, and girls' hostel. Delays in the review of architectural drawings impacted the implementation timeline.

Construction at Lwengo Technical Institute stalled at 55% due to the contractor's limited capacity, leading to contract termination and project delays. However, the completed institutions are fully operational, with four institutions – Basoga Nsadhu Memorial, Nawanyago, Sasiira, and Buhimba – having secured occupational permits.

Two training sessions were conducted for a total of 30 instructor trainees in the fields of Agriculture and Fashion and Design. Training of 176 persons in Institutional Management Capacity Building was not done.

The overall progress of the project was slow and behind schedule, with overall physical progress averaging only 70% by 31 December 2024. Delays in civil works, particularly at the Kilak Corner, Ogolai, and Lokopio Hills sites, significantly impacted the project's overall performance.

ii) The Business, Technical and Vocational Education and Training (BTVET) Support Project – Phase II is a USD 51.140 million initiative financed by the Islamic Development Bank (IsDB) and GoU. The IsDB contributes USD 45 million (88%), while GoU initially committed USD 6.140 million, later increased to USD 11.706 million to accommodate additional costs for a parking deck and VIP/facility management areas. The project was approved in February 2020 with an effective date of 1st July 2020, and was set to close on 1st March 2025.

The project aims to expand nine existing technical institutes, namely Kabale, Birembo, St. Kizito Kitovu, Lutunku, Nkoko, Nalwire, Moyo, Minakulu, and Moroto, by adding classrooms, workshops, laboratories, resource centres, administration blocks, multi-purpose halls, sickbays, dormitories, staff housing, and toilets, as well as providing equipment, furniture, and tools, along with necessary design and supervision services.

The planned targets for FY 2024/25 include: i) finalising the construction of the Ministry headquarters; ii) achieving 60% overall physical progress in the construction of the nine institutions; iii) supporting five PhD-level and 28 master's-level skills upgrading scholarships at relevant international institutions; and iv) developing and reviewing the Competency-Based Education and Training (CBET) Curriculum.

Construction of the new Skills Development Headquarters finalised: By 31st December 2024, the construction was slow, with physical progress at only 26%, compared to a time progress of 46%. The major challenge was the delayed release of the GoU counterpart funding. Of the required USh. 20.13 billion, only USh. 5.241 billion had been disbursed, leaving an outstanding balance of USh. 14.889 billion. The payment delays hinder the contractor's ability to maintain steady progress and may impact the timely completion of the project if not addressed promptly.

Expansion of nine technical Institutes: Construction at the nine institutions, namely Kabale, Nkoko, Nalwire, Birembo St. Kizito-Kitovu, Lutunku, Moyo, Minakulu, and Moroto Technical Institutes, averaged 26% physical progress. The quality of work across the sites was satisfactory, with adequate supervision, as evidenced by monthly site reports detailing progress.

*Skills upgrading and development:* All 32 selected scholars began their studies across 13 institutions in India, Kenya, Tanzania, and Uganda. Of these, 40% are female (01 PhD and 12 master's candidates), and 60% are male (04 PhD and 15 master's candidates). All scholars progressed to the second academic year of their studies.

The CBET Curriculum development and review: The contract was awarded to M/S Mamza Consulting Ltd (Uganda) and M/S Impetus Consulting and Skills Development (South Africa) through a restricted bidding process, with a consultancy contract valued at USD



386,055. By the end of December 2024, the consultants had initiated DACUM<sup>5</sup> workshops for Agricultural Mechanisation and Electronics and Telecommunications.

The overall performance of the BTVET-II Support Project is poor, averaging 22.84%. The project is behind schedule.

# g) Construction/ rehabilitation of physical infrastructure in Local Governments

The construction and rehabilitation of infrastructure in Local Governments faced procurement delays in most of the sampled districts, where contractors were still being procured, except in Yumbe and Koboko, with their projects already reaching the roofing and painting stages, respectively.

Despite the above efforts, schools in the monitored districts continue to face significant infrastructure challenges. This is particularly evident in Yumbe, Koboko, and Bukedea Districts, where high pupil-to-classroom ratios highlight the urgent need for additional facilities. The influx of refugees in Yumbe and Koboko further strained existing infrastructure, thus worsening overcrowding.

# h) Construction projects under KCCA

In the FY 2023/2024, KCCA was allocated USh. 2.22 billion for school infrastructure construction and improvement projects. The planned activities for FY 2024/25 include:

- i) Purchase of 2.163 acres of land for Bukasa Primary School in Makindye Division;
- ii) Completion of Phase III of a 9-classroom block at Nakivubo Primary School;
- iii) Completion of Phase III of a 6-classroom block at Mpererwe Primary School;
- iv) Renovation of classrooms at Kyambogo College School;
- v) Implementation of Phase VI of asbestos removal and expansion of 24 classrooms and laboratory blocks at Kololo Secondary School, including laboratory upgrades;
- vi) Renovation of a classroom and library at Munyonyo Primary School;
- vii) Phase I of the reconstruction of Kasubi Family Primary School; and
- viii) Renovation of waterborne toilets at Nakasero Primary School.

The physical progress of the planned projects was at 36%. Two projects were fully completed: the renovation of the classroom and library at Munyonyo Primary School; and the 4-classroom block at Nakivubo Primary School, which was awaiting furniture. Six projects were ongoing, with progress between 5% and 20%. Procurement was underway for land acquisition at Bukasa Primary School, asbestos removal at Kololo Secondary School, and Phase III – classroom construction at Nakivubo and Mpererwe Primary Schools. The reconstruction of Kasubi Family Primary School was pending formal structural plans (Table 4.9).

<sup>&</sup>lt;sup>5</sup> DACUM stands for Developing a Curriculum. It is a method used in curriculum development that involves subject matter experts in identifying the tasks, skills, and knowledge required for a particular occupation or training area.

Table 4.9: Performance of School Infrastructure Projects (FY 2023/2024) in KCCA as of 31st December 2024

Project Description	Location	Proposed Funding (USh.)	Source of Funding	Status of Implementation	Completion Status
First instalment for the purchase of land for Bukasa P/S.	Makindye Division	1,000,000,000	GoU	The land valuation was secured, and a formal offer was obtained. Procurement was initiated and is currently ongoing.	20%
Phase III– construction of a 9- classroom block at Nakivubo P/S	Central Division	310,000,000	GoU	Procurement was ongoing with a draft contract forwarded to the Legal Department for clearance.	10%
Phase III – construction of a 6-classroom block at Mpererwe P/S	Kawempe Division	240,000,000	GoU	Procurement was underway with a draft contract forwarded to the Legal Department for clearance.	10%
Renovation of a classroom and library at Munyonyo P/S	Makindye Division	64,500,000	GoU	This was completed, works in defects liability period (DLP).	100%
Phase 6-removal of asbestos and expansion at Kololo SS	Central Division	167,000,000	GoU	Procurement was ongoing, and the draft contract was forwarded to the Legal Department for clearance.	10%
Renovate waterborne toilets at Nakasero Primary School	Central Division	70,000,000	GoU	The procurement request was initiated, but the submission of BOQs for the toilet renovation was still pending.	5%
Removal of asbestos from Kyambogo College School	Nakawa	300,000,000	GoU	Procurement was ongoing, and the draft contract was forwarded to the Legal Department for clearance.	10%
Phase II Construction of a 4- classroom block at Nakivubo P/S	Central Division	400,000,000	Japanese Embassy	The construction was completed, and commissioning is pending the arrival of desks.	100%
Reconstruction of Kasubi Family Primary School – Phase 1	Lubaga	800,000,000	Roofings Uganda Ltd	Commencement awaits formal submission of plans for approval.	0%

Source: Author's Compilation from Field Findings.



# i) Construction of facilities in public universities

**Soroti University**: Construction of Phase II of the Anatomy Laboratory under the National Enterprise Corporation (NEC) progressed at 23%, falling behind the planned time progress of 41.6%.

The delay was primarily attributed to the absence of the development project code for two consecutive financial years. Consequently, development funds were inappropriately allocated under the retooling project, contrary to the guidelines of the Development Committee.



**Anatomy Block at Soroti University** 

Makerere University: The projects were generally on track. The Main Administration Block and renovation of Lumumba Hall were completed, with the latter now occupied by female students from Mary Stuart Hall. The School of Public Health, Phase I was also 100% completed and Phase II averaged 66.2% for its components. Physical progress on the renovation works at Mary Stuart Hall had progressed to 40%, while civil works for the Graduate Studies building was at 10%.

The construction at the School of Gender and Women Studies stalled at 70% due to outstanding payments to the contractor and the renovation of CCE Hall did not commence due to inadequate funds. The completion of the office block and lecture room theatres at the MaRCCI Project under the college of Agriculture and Environmental Sciences at Kabanyolo averaged 55% work progress.

*Gulu University*: The construction of the Business and Development Centre progressed to 33%, with the concrete frames for both the ground and first floors completed.





Left: Ongoing construction of the Business and Development Centre. Right: Foundation works of the Senate Building at Gulu University.

The Senate Building was at 9.3% physical progress, with foundation works fully completed.

Uganda Management Institute: The planned commencement of the construction of a multipurpose building at UMI Kampala and a classroom block at the UMI Mbale branch (Phase I) did not take off as the process of procuring contractors was ongoing.

Kabale University: The completion of the Science Block progressed to 80% pending construction of a ramp and landscaping, while the Engineering Block Phase I was completed. The ground and first floor concrete frames had been cast.



Ground and first floor concrete frame of Engineering Block at Kabale University

*Kyambogo University*: The contract for the removal of asbestos sheets and re-roofing iron sheets, renovation works for departmental offices were still in the procurement process.

**Mbarara University:** The Faculty of Computing and Informatics (FCI) Phase II at the Kihumuro campus by the UPDF Engineering Brigade was completed and handed over to the university in January 2025. It awaits equipping. However, Interim Payment Certificates (IPCs) totalling USh. 5.3 billion remained unpaid.





Left: Completed Computing and Informatics Block at Mbarara University; Right: Ongoing construction of the Administration Block structure at Lira University.

*Lira University*; The construction of the administration block, progressed to 95% physical progress. Other development activities undertaken, included: the acquisition of a Certificate of Title, preparation of a Master Plan, and completion of a geotechnical survey for 344 acres of land in Amolatar and Kole Districts. Routine maintenance of access roads was also conducted.

*Muni University*: The construction of the Mechanical Workshop progressed to 30%, while the Health Science Laboratory progressed to 67%, and the Administration Block Annex was at 58% completion. However, the delayed completion of these projects was largely attributed to intermittent development releases and the initiation of additional projects despite limited resource envelope before completing ongoing projects, which further stretched the university's implementation capacity.



**Busitema University**: The civil works for the Phase V, five-level Lecture and Laboratory Block at Mbale campus were at 88% progress. The pending works include the installation of a suspended ceiling (revised from the traditional design), completion of external plastering, fitting of windows and doors, and electrical installations. Cash flow constraints on the part of the contractor slowed progress, prompting a formal request for an extension of time.

**Mountains of the Moon:** The construction of the Faculty of Agriculture and Environmental Science Complex block Phase I stalled at 44% physical progress, due to insufficient funding. An additional USh. 7.764 billion is required to complete this phase. While efforts are ongoing to secure the necessary funds, the university also plans to initiate preliminary works to kick-start Phase II (Table 4.10).

Table 4.10: Performance of selected development projects in universities by 31st December 2024

University	Scope of Work	Project Cost (USh. billion	Payments (USh billion)	Contractor	Progress (%)	Remarks
Mountains of the Moon	Construction of the Faculty of Agriculture and Environmental Science Complex Block Phase I	15.492	1.059	M/S Ambitious Construction Co. Ltd	44	Stalled but Certificates for construction and supervision works cleared.
MUST	Completion of 1 FCI Block (Phase 2) with ramp at Kihumuro campus	8.3	1.516	M/S NEC Works Ltd	100	Completed and handed over in January 2025.
Lira	Construction of Main Administration Block.	13.815	0.151	M/S NEC Works Ltd	95	Nearing completion.
	Master Plan & Geotechnical survey for 344 acres in Amolatar	0.081	-0.030	-	-	Ongoing in Alemere, not yet initiated in Agwingiri, and pending implementation in Kole District.
Makerere	Construction of Main Building	23.602	6.158	M/S Excel Construction Ltd.	100	Completed, equipped, and under 12-month defects liability period.
	Construction of School of Public Health Building	5.593	Nil	M/S ROKO Construction Ltd.	66	Progress behind schedule.
	Completion of MaRCCI Office & Classroom Block (Kabanyoro)	1.718	0.512	M/S Build Mast Engineering Ltd.	55	Slow progress of works due to retendering of works.
	Extension of the School of Women & Gender Studies Building	2.301	-	M/S CK Associates Ltd	70	Civil works stalled since Nov. 2024.
	Rehabilitation of Lumumba & Mary	10.541	7	M/S NEC Works Ltd	53	Lumumba Hall complete and occupied; Mary

University	Scope of Work	Project Cost (USh. billion)	Payments (USh billion)	Contractor	Progress (%)	Remarks
	Stuart Halls					Stuart renovations ongoing.
	Indoor Stadium Phase 3 construction	-	-	M/S CK Associates Ltd	50	External works and second fix plumbing completed; awaiting funds.
	Sports House & Cricket House renovation.	-	-	-	-	Assessment for renovation is ongoing.
Muni	Completion of Multipurpose Health Lab Building	8.4	0.486	M/S Kisinga Construction Co. Ltd.	46	Construction was ongoing.
	Construction of Admin Block – Annex	8	0.744	M/S Khalsa Development.	41	Construction was ongoing.
	Construction of the Mechanical Workshop			Desert Breeze Hotel	30%	
Soroti	Construction of Anatomy Lab Phase II	14.369	4.898	M/S NEC Construction & Eng. Ltd	23	The ground floor block masonry and second floor slab have been completed.

Source: Author's Compilation from Field Findings.

### Challenges

- 1. Poor project planning and prioritisation: Some universities, notably Muni University, initiated multiple infrastructure projects without aligning them to available resources and funding schedules. This fragmented planning overstretched institutional capacity, causing delays and inefficiencies across several projects.
- 2. *Inadequate funding*: Several projects across different universities stalled due to insufficient funding for development. At Makerere University, construction at the School of Gender and Women Studies stalled over unpaid contractor dues, while renovation of the CCE Hall did not commence. Similarly, projects at Soroti, Muni, and Mountains of the Moon Universities stalled, reflecting the broader impact of persistent budgetary constraints on implementation.

# 4.3.9 Promote STEM/STEI-focused strategic alliances between schools, training institutions, high-caliber scientists, and industry

This intervention was jointly implemented by MoES and public universities. Under MoES, planned outputs included: i) The Busoga and Bunyoro University Taskforces supported for eventual Government takeover of Bunyoro and Busoga Universities.

For public universities, planned outputs included: ii) research and innovation initiatives funded; iii) students enrolled and registered iv) articles published in peer-reviewed journals; v) student research supervised; and vi) graduate research workshops conducted. Other



planned outputs were: vii) graduation ceremonies held; viii) development and accreditation of new curricula; ix) climate change mitigation initiatives; xi) field exposure trips; xii) school practice sessions; xiii) community outreach activities; and xiv) research workshops and seminars.

### Performance

Fair performance was registered, with 65.7% of the planned activities achieved. Although institutional capacity varied across universities, most performed well against their individual planned activities. Makerere, Kyambogo, Mbarara, Gulu, Muni, Lira, and Soroti largely achieved their enrolment, curriculum, research, and outreach targets. Sustained investment in infrastructure, staffing, and research funding remains essential to consolidate and scale this progress nationally. Key performance highlights are presented below:

Government takeover of Bunyoro and Busoga Universities: The formal Government takeover of the two universities was not accomplished within half a year, but several activities were underway to facilitate the process. For Bunyoro University, the Taskforce established an office in Hoima to coordinate its establishment to finalise land acquisition. Additionally, the MoES' Construction Management Unit (CMU) was developing the building designs for the proposed institution. The Busoga Taskforce was supported in acquiring several parcels of land for the institution. The Jinja City Land Board also offered land to further support the university's establishment. A joint task force comprising MoES, and the Ministry of Public Service (MoPS) was constituted to finalise the university's staff establishment.

**Research and Innovation Funding (RIF) in public universities:** The total budget appropriated for RIF across the eight monitored public universities was USh. 32.71 billion. Makerere University accounted for the largest share, receiving 77%. By the end of December, total releases were at USh. 17.91 billion (54.7% of the total budget). Expenditure was USh. 14.41 billion, reflecting an absorption rate of 80.5% of released funds. Performance varied significantly across institutions (Table 4.11).

Table 4.11 Research and Innovation Funding in eight public universities as of 31st December 2024

Institution	Budget (USh.)	Release (USh.)	Release Rate (%)	Expenditure (USh.)	Absorption Rate (%)
Makerere University	25,244,559,430	13,077,022,430	51.8	11,025,602,428	84.3
Kyambogo University	1,062,923,620	492,297,424	46.3	248,285,734	50.4
Mbarara University	796,658,279	621,878,950	78.1	614,193,911	98.8
Muni University	1,267,718,500	754,803,239	59.5	439,606,941	58.2
Mountains of the Moon University	1,899,826,191	1,430,098,130	75.3	1,341,042,940	93.8
Lira University	529,000,000	262,500,000	49.6	17,900,377	6.8
Busitema University	1,722,004,470	1,084,443,719	63.	531,645,029	49.
Gulu University	187,762,101	187,762,100	100	187,762,100	100

Source: Field Findings.

The unequal allocation and inconsistent release of RIF weakens the drive towards building a balanced and inclusive national research system, which is critical for advancing Uganda's Tenfold Growth Strategy and driving progress in Agro-industrialisation, Tourism, Minerals, Science, Technology, and Innovation (ATMS).

### Challenges

- 1. Inadequate infrastructure (both physical buildings, laboratories, and equipment) to support high-impact research and innovations that address national development priorities.
- 2. Low uptake of research findings and translation into commercial products. Previous efforts have focused on increasing the research/innovation output with insufficient investment in translation.

#### Recommendations

- 1. The Government of Uganda should invest in specialised equipment to create central maker spaces.
- 2. Government and universities should provide dedicated funding to strengthen research translation and strengthen linkages and collaborations with the private sector.

Students enrolled, taught, and examined: A total of 98,827 students were enrolled and registered across the seven monitored public universities. Makerere University had the highest student population, accounting for approximately 38% of the total enrolment. Gender distribution remained relatively balanced in the universities that reported gender data, with female enrolment ranging between 36% and 45%. Soroti University recorded the lowest enrolment, with only 634 students taught and examined by mid-year.

Articles published in peer-reviewed journals: A total of 244 peer-reviewed articles were published by the seven universities. Overall, research publication was dominated by Makerere University, with 200(82%) peer-reviewed articles, reflecting its strong research capacity. In contrast, Soroti and Muni universities recorded the lowest research outputs, each publishing fewer than five articles, highlighting the need to strengthen research capacity and support in these emerging institutions.

Graduate research supervision: Graduate research supervision activities were robust at Makerere and Kyambogo Universities, with Makerere supervising over 140 viva defences and 7 PhD graduations, and Kyambogo recording 90 viva/PhD defences and 120 graduate supervisions. Gulu University had moderate performance with 73 PhD supervisions, while Lira and Muni demonstrated lower graduate engagement. Soroti University's output remained limited. This trend stresses the need to strengthen graduate mentorship structures in younger institutions to enhance research quality and productivity.

Graduations conducted: A total of 27,579 students graduated across the seven monitored public universities. Makerere University accounted for the largest share, with 49.5% of the total graduates, followed by Kyambogo University, with 42.5%, while Muni University contributed only 2.1% of the total. Gender distribution among graduates remained relatively balanced at Makerere and Kyambogo, although a broader trend of male dominance was observed across most institutions. Notably, female participation was stronger in the Humanities than in STEM fields. Soroti University recorded no graduation during the reporting period.



Curriculum development and accreditation: Curriculum development was strongest at Mbarara and Kyambogo Universities. Mbarara University reviewed and submitted eight programmes to NCHE, while Kyambogo University approved six new graduate programmes. Makerere and Muni reported modest curriculum reviews while Lira and Soroti showed minimal new programme development. Sustained investment in programme development and accreditation is crucial to maintaining relevance and competitiveness across all universities.

**Community outreach services:** A combined 62 community outreach activities were conducted by the universities, engaging students and faculty members in promoting education, health, and environmental sustainability in surrounding communities. Makerere University led outreach efforts, conducting 36 activities, while Soroti University registered only one outreach event, indicating varying levels of engagement across institutions.

Climate change mitigation: Climate change mitigation activities were led by Makerere University, which planted 20 hectares of trees and managed three wetlands, and Gulu University, which planted 9,000 eucalyptus trees and trained 125 community members. Muni University reported limited activities, while Lira, Soroti, MUST, and Kyambogo largely focused on basic maintenance. The lack of broad participation in environmental initiatives represents a missed opportunity to position universities as leaders in climate resilience and sustainable development (Table 12).

Table 4.12: Performance of selected outputs across public universities by 31st December 2025

Output Category	MUK	Muni	Lira	MUST	Gulu	Soroti	Kyambogo
Students Enrolled / Examined	27,000 enrolled; 25,772 in Sem. 1 (11,818F, 13,954M)	1,955 (986 M, 969 F) enrolled	2,300 registered (57% M, 43% F)	5,882 taught & examined (33.4%F)	3,194 lectured & examined	608 taught and examined	1,496 registered (2024/25)
Publications	155 peer- reviewed journal articles	1 publication	22 peer- reviewed articles	3 publications	25 peer- reviewed articles	No info	7 peer- reviewed articles
Graduate Research Supervision	50 master's vivas; 198 viva voces; 8 PhD defences	No information	No information	No information	48 PhD, 27 Masters, 32 Viva Voces	No info	90 viva voce & PhD defences
Graduation Conducted	13,662 (7,299 F, 6,363 M)	319 (200 M, 119 F)	581 (58.2% M, 41.8% F)	1,615 Graduated	No info	No info	11,721 (5,704M, 6,017 F)

Output Category	MUK	Muni	Lira	MUST	Gulu	Soroti	Kyambogo
Curriculum Development	6 academic programmes reviewed	2 curricula developed (BED-P, PhD- Ed Planning)	No information	No info	2 new programs started; 1 under development (70%)	No info	programmes developed, 1 approved, 7 reviewed
Climate Change Mitigation	20 hectares planted; 3 wetlands managed	Environmental training ongoing	1 wetland managed; 1 sensitisation drive	No information	9,000 eucalyptus trees planted; 125 trained	No info	No info
Field Exposure / Trips	5 clinical site- based trainings	Facilitated clinical & social skills fieldwork	No information	16 study trips	1 field excursion	3 academic field trips	3 academic field trips
Community Outreach	31 outreach activities	1 outreach at Ofura Secondary School	14 community outreach activities	15 field visits	1 outreach for MBcHB & BNS students	No info	Participated in the National Hotel and Tourism Expo in Kasese.

Source: Field Findings.

# 4.3.10 Develop a framework for talent identification in the Sports, Performing, and the Creative Arts

The MoES Physical Education and Sports (PES) Department and the National Council of Sports (NCS) were monitored. Planned outputs under NCS include: i) facilitation of key international games; and ii) procurement and distribution of assorted sports equipment to districts and grassroots levels.

The MoES planned outputs are: i) National and regional PES festivals conducted; ii) assorted ball, gymnastic equipment and materials, athletic implements and specialised machines provided to education institutions; iii) Operations of the NHATC-Teryet supported; iv) national EIs teams facilitated to participate in international competitions; v) National and regional education institutions sports competitions organised, coordinated and supervised; vi) District and Regional Sports Centres monitored, supported and supervised; vii) One National Secondary School Music, Dance and Drama Festival facilitated; and viii) One East African essay writing competition conducted at national level.

### Performance

Fair performance of 65.2% was registered, with key outputs such as the approval of the National Sports Policy and national and international competitions implemented. However, infrastructure gaps persist. Detailed performance is presented in Table 4.13.



Table 4.13: Performance of planned outputs under the intervention by 31st December 2024

Implementing Agency	Planned Output	Planned Activity/Target	Achievement by End of Q2
MoES (PES Department)	National and regional education institutions sports competitions	Organise/facilitate primary, secondary, health training institutions' games.	National Primary Ball Games & SNE U15 were held in Mukono; health training institutions games were held in Arua; TVET games in Kaberamaido (Aug. 2024); secondary ball games in Soroti (July 2024); FIEASA regionals in Bukedea (Aug. 2024).
	Monitoring & support supervision of Sports Centres.	Monitor and supervise Sports Centres.	Not implemented due to inadequate funding.
	Physical and sports activities facilitated	i) Facilitate national education institution teams for international competitions.      ii) Conduct bi-weekly	A total of 6 teams participated internationally. These represented Uganda in Bahrain (Gymnasia) and FIEASA (Bukedea).  Weekly fitness programmes and bi-
		fitness training and bi- annual assessments.	annual assessments are conducted.
	Assorted balls procured and distributed	Procure and distribute 5,000 balls to institutions.	Not implemented due to resource constraints.
National Council of Sports (NCS)	International games facilitated	Support 5 critical international games	2 major games supported – Paris 2024 Olympics & Paralympics; Uganda won 24 medals (6 gold, 8 silver, 10 bronze).
	Assorted sports equipment procured/distributed	Procure 100 assorted sports equipment for the grass roots.	100 items procured (50 footballs, 50 netballs); pending distribution.

Source: Field Findings.

# Challenge

Limited access to sports equipment and facilities: Despite efforts to distribute sports equipment, many schools, particularly in rural areas, continue to face shortages of quality gear and lack adequate sports infrastructure, restricting student participation and performance.

### Recommendation

MoES and Local Governments should prioritise building, upgrading, and maintaining sports facilities at district and school levels, and ensure equitable distribution of quality equipment to enhance access and participation across all regions.

# 4.3.11 Establish regional sports-focused schools/sports academies to support early talent identification and development, and the training of requisite human resources for the sports sub-sector

The MoES Physical Education and Sports (PES) Department, the National Council of Sports (NCS) were monitored and planned outputs under the NCS, include: i) critical international games facilitated; ii) assorted sports equipment procured and distributed to districts/grassroots levels.

The MoES planned outputs were: (i) National and Regional PES Festivals conducted; (ii) 125 serving teachers of PE oriented on Competency-Based Curriculum (CBC); iii) assorted balls, gymnastic equipment and materials, athletic implements and specialised machines provided to 500 educational institutions; and (iv) 15 Districts and Regional Sports Centres monitored and supervised.

### **Performance**

Fair performance of 67% was registered, with four out of six planned outputs achieved. While Phase I of NHATC Teryet was completed and commissioned in December 2024, the absence of nearby washrooms, within a 1-km radius from the pitch, continues to undermine its functionality. Detailed performance is presented below:

- (i) National and Regional PES Festivals conducted: The National and Regional PES Festivals were not conducted due to inadequate funding. However, Uganda hosted the Primary Schools FEASSA qualifiers in Mukono for the under-15 category, and the secondary schools qualifiers in Bukedea, where Uganda emerged first. Two national championships for health training institutions were held in Arua, while championships for technical and vocational education institutions took place in Kaberamaido. Championships for universities were not funded.
- (ii) Serving teachers of PE oriented on CBC: Orientation of the targeted 125 teachers of PE on CBC was not done due to inadequate funds.
- (iii) Assorted balls, sports equipment and materials, athletic implements and specialised machines provided: The planned procurement of 5,000 assorted balls, gymnastic equipment, athletic implements, and specialised machines for 500 educational institutions was not done due to inadequate funding.
- (iv) National and regional sports competitions organised, coordinated, and supervised. MoES supervised and coordinated four National Educational Championships. However, the planned monitoring and supervision of 15 District and Regional Sports Centres was not conducted due to funding constraints.

# **Challenges:**

1. Funding for the training of primary school teachers in early talent identification and development remains inadequate. Similarly, sports activities intended to nurture talent at primary, regional, and national levels are poorly funded, limiting opportunities to identify and develop gifted learners, particularly in rural and remote areas.



2. Although there are over 30,000 students in the current Senior Four (S.4) cohort, their teachers have not been properly retooled on the revised Physical Education (PE) curriculum and its assessment modalities, undermining the effective delivery of PE and early talent development.

### Recommendation

- 1. Intensify retooling of in-service Physical Education (PE) teachers: MoES should scale up targeted retooling programmes for current PE teachers to strengthen their capacity in delivering the Competency-Based Curriculum (CBC) and assessing early talent.
- 2. Implement comprehensive orientation on early talent identification across all education levels: MoES should develop and roll out a structured orientation programme for primary school teachers, secondary school teachers, and instructors in tertiary institutions to enhance early talent identification and nurturing from foundational to higher education levels.

4.3.12 Maintain existing facilities and construct appropriate and standardised recreation and sports infrastructure at national, regional, and Local Government and schools in line with the country's niche sports (i.e., football, netball, athletics, and boxing)

MoES, KCCA, and the National Council of Sports (NCS) were monitored, and planned outputs were: i) Completion and operationalisation of Phase I of the National High-Altitude Training Centre (NHATC); iii) Commencement of Phase II for the redevelopment of the KCCA Phillip Omondi Stadium; iv) Construction of Hoima Stadium; v) Redevelopment of Kakyeka Stadium in Mbarara City; vi) Construction of Akii-Bua Stadium in Lira City; and vii) Upgrading of training grounds at Kyambogo University.

#### Performance

Intervention performance was good, at 53.3%. The ongoing renovation and upgrade of Mandela National Stadium, Namboole, was on track, with 93% progress on the civil works, while Phase II redevelopment of the KCCA Philip Omondi Stadium commenced in February 2024, and construction of the pavilion was ongoing. Key highlights on the performance of the two different ones are presented below:

Supported operations of NHTAC-Teryet: Operational support was provided through the payment of salaries and other running costs. The NHATC was subsequently completed and handed over to MoES on 28 February 2025. However, the absence of washroom facilities near the pitch, with the nearest located approximately 1 km away, continues to affect the facility's functionality and convenience.

The construction of Hoima City Stadium: The construction of the 20,342-seat capacity Hoima City Stadium, one of the key facilities for Uganda's preparation to co-host the Africa





Left-right: Exterior and interior views of the ongoing construction work at Hoima Stadium, Hoima City.

Cup of Nations (AFCON) in 2027, commenced on 1st July 2024. The project is being executed by M/s Summa Turizm Yatırımcılığı Anonim Şirketi at a contract sum of USD 130 million, with a planned duration of 18 months and a completion date of 31st December 2025. As of 31st December 2024, six months into the project (33% of the total duration), physical progress was 20%, and cumulative payments is USD 50,154,125 (USh. 146.97 billion). This indicates a lag of 13% compared to the target for that period. At the current pace, the project is at risk of missing its completion deadline, potentially affecting Uganda's readiness for AFCON 2027.

Upgrading of training grounds at Kyambogo University: The upgrading of the training grounds at Kyambogo University, part of the national infrastructure preparations for AFCON 2027, registered an overall physical progress of 27%. By 31st December 2024, civil works on the changing rooms were ongoing, while pitch development had advanced to the chipping stage. The project aims to enhance sports infrastructure to meet the Confederation of African Football (CAF) standards and provide modern facilities for training and warm-up sessions for the continental tournament.

Redevelopment of the KCCA Phillip Omondi Stadium – Phase 2: The project is being undertaken by M/s Sarjan Construction Limited at a contract sum of USh. 10.3 billion over an initial period of eight months. The Phillip Omondi Stadium, the traditional home of KCCA Football Club, is among the facilities designated to serve as training grounds for the Africa Cup of Nations (AFCON) 2027, which Uganda will co-host. By 31st December 2024, physical progress was at 65%, against 98% time progress, indicating significant implementation delays. This was attributed to the late commencement of core contract activities; delayed sourcing and approval of couplers and quotations for grid C columns; prolonged decision-making, pending designs for external works; and adverse weather conditions.



# 4.3.13 Leverage public-private partnerships (PPPs) for funding of sports and recreation programmes

The National Council of Sports supports a diverse range of sports disciplines, organised and regulated through 51 National Sports Federations, Associations, and Clubs (NFAs). These NFAs are legally incorporated and registered under various frameworks, including the National Sports Act, 2023, the Companies Act, 2010, and other applicable laws and regulations.

### Performance

Overall performance was fair, with only 29 NFAS supported out of the planned 51, reflecting 56.9% achievement. Although the budget was fully released, only USh. 13.13 billion (26.2% absorption) was expended by mid-year (Table 4.14).

Table 4.14: Funding of Sports Federations, Associations, and Clubs by 31st December, 2024

Federation/Association(s)	Funding Category (USh.)	Number of Federations
Federation of Uganda Football Associations (FUFA)	8.9 billion	1
Uganda Rugby Union (URU)	1.7 billion	1
Uganda Athletics Federation (UAF)	540 million	1
Federation of Motorsport Uganda (FMU), Netball Normalisation Committee	200-300	2
	million	
Uganda Boxing Federation (UBA)	135 million	1
Uganda Chess Federation (UCF), Uganda Golf Union (UGU), Uganda Handball	51 million	9
Federation (UHF), Professional Athletes Union (PAU), Uganda Squash Rackets		
Association, Uganda Swimming Federation, Uganda Table Tennis Association,		
Uganda Tennis Association		
Uganda Zurkhaneh Sports Association, Uganda Archery Federation, Uganda	2 million	10
Canoe Kayak Federation, Uganda Dragon Boat Federation, Uganda Sports		
Climbing Federation, Kabaddi Federation of Uganda, American Football Federation		
of Uganda, Uganda DanceSport Federation (UDSF), Uganda Dodgeball		
Federation (UDF), Uganda Lacrosse Federation (ULF)		
Federation of Uganda Basketball Associations (FUBA)	370.9	1
	million	
Uganda Paralympic Committee (UPC), Uganda Cricket Association (UCA)	191.6	2
, , ,	million	
Uganda Darts Federation	8.1 million	1

Source: Field Findings.

The funding distribution among NFAs was highly skewed, with FUFA alone receiving 67.79% of the total allocation. When combined with URU (13.08%) and UAF (4.12%), the top three federations absorbed 85% of the total budget. This reflects inequitable prioritisation of Uganda's sports disciplines. FUBA, FMU, and the Netball Normalisation Committee received moderate funding, ranging between 2.2% and 2.8%, while UPC, UCA, and UBF had just 1% each.

In contrast, 21 out of the 29 supported federations received less than 0.5% of the total budget. This group includes 10 federations that were allocated only 0.02%, and 11 others that received between 0.06% and 0.39%. These low allocations suggest limited support for most sports disciplines. Many federations with emerging potential or strategic relevance are underfunded, irrespective of their actual performance or development needs.

# Challenges

- 1. Weak accountability and financial management by the NFAs. According to NCS, many federations delay preparing financial reports and submit incomplete accountability reports, undermining transparency and public trust. This contravenes Section 45(2) of the Public Finance Management Act, 2015, and the National Council of Sports Act (Cap. 48), which require proper use and accounting of public funds.
- 2. Inadequate monitoring by NCS weakens funding effectiveness due to internal constraints such as limited staffing, lack of a tracking system, and irregular supervision. This results in weak follow-up on fund utilisation, poor enforcement of reporting, and limited data to guide future allocations.

#### Recommendations

- i) The NCS should enforce timely and complete financial reporting in line with the Public Finance Management Act, while providing targeted training to federations on financial management and accountability standards.
- ii) The NCS should enhance its monitoring function over Sports Federations and Associations (NFAs) to ensure effective fund utilisation and compliance with standards.

# 4.4 Sub-programme Challenges

- 1. The continued low absorption of funds, particularly for externally financed projects, has hindered the delivery of key education infrastructure. Projects such as USEEP and OFID recorded low absorption rates below 35% and physical progress between 25–30%, largely due to delayed procurements, land acquisition, and poor planning.
- 2. Institutional and capacity constraints: Agencies such as NCHE and public universities suffer from staffing shortfalls (NCHE at 44.8% of its approved structure), limited logistics, and unstable funding, all of which undermine effective quality assurance.

# 4.5 Sub-programme Conclusion

The overall performance of the Education, Sports, and Skills Development Sub-programme was fair, with an average achievement of 58.3% across all interventions by mid-FY 2024/25. Out of 12 interventions assessed, only one achieved very good performance, with 95%, while another was rated good, with 76.6%. The remaining 10 interventions were rated fair.

The absence of consistently high-performing interventions reflects persistent inefficiencies across the sub-programme. Key constraints included the delayed implementation of infrastructure projects. In addition, institutional capacity gaps in agencies such as NCHE, NCS and the NCDC constrained the delivery of education and sports services.

# 4.6 Sub-programme Recommendations

1. Fast-track delivery of capital projects: MoES should strengthen procurement and land acquisition processes and enforce construction timelines, with priority given to delayed high-impact projects like USEEP and OFID.



2. Strengthen capacity of implementing institutions to meet project readiness standards: MoES and MoFPED (Project Analysis and Public Investment Department) should strengthen the technical and operational capacity of project implementing institutions in order to comply with project readiness requirements. This includes support to meet public investment quality standards.

### CHAPTER 5: LABOUR AND EMPLOYMENT SERVICES SUB-PROGRAMME

### 5.1 Introduction

The Labour and Employment Services Sub-programme contributes to the programme objective 3 of NDP III, which seeks to develop a knowledgeable, skilled, and ethical labour force, with emphasis on science, technology, Technical and Vocational Education and Training (TVET), and sports.

The sub-programme's expected outcomes include: promoting decent and productive employment, enhancing labour standards, and improving working conditions across sector institutions. The key performance indicators include: increasing the proportion of the labour force engaged in decent employment from 34.5% to 55%, and improving the ratio of science and technology graduates to arts graduates from 2:5 to 3:5.

It is anchored in 11 interventions (Annex 2), implemented through MGLSD, MoES, LGs, public universities, State House, the Uganda Manufacturers Association (UMA), the Private Sector Foundation Uganda (PSFU), and the Uganda Business and Technical Examinations Board (UBTEB). Complementary institutions include the National Information Technology Authority-Uganda (NITA-U), the National Planning Authority (NPA), and MoFPED.

# **5.2 Sub-programme Financial Performance**

The sub-programme budget for FY 2024/25 is USh. 398.59 billion, of which USh. 155.51 billion (39%) was released by 31st December 2024. However, only USh. 44.43 billion (28.6% of the releases) was spent, largely due to the poor absorption of external funds, which registered an expenditure rate of only 4.5% (Table 5.1).

Table 5.1: Labour and Employment Services Sub-Programme financial performance as at 31st December 2024

Budget Category	Approved Budget (USh.)	Released	Spent (USh.)	
Budget Category		(USh.)		
Wage Recurrent	107,898,977,063	50,309,651,338	25,047,418,978	
Non-Wage	85,350,575,242	50,205,084,201	16,906,847,225	
GoU Dev't	-	-	-	
Ext Fin. Dev't	205,337,592,375	54,997,007,594	2,478,774,958	
GoU Total	193,249,552,305	100,514,735,539	41,954,266,203	
Total GoU+Ext Fin (MTEF)	398,587,144,680	155,511,743,133	44,433,041,161	

Source: Programme-Based Budgeting System, IFMS.

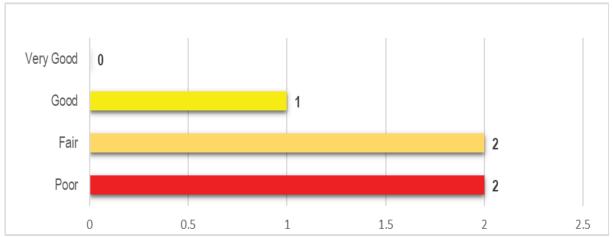
The Wage Recurrent category accounted for 27.1% of the total budget, Non-Wage Recurrent 21.4%, while External Financing had the biggest share of 51.5%. By mid-FY 2024/25, 46.6% of the wage budget, 58.8% of the non-wage budget, and 26.8% of the external financing budget had been released. However, absorption rates remained low across all categories, with wage at 49.8%, non-wage at 33.7%, and external financing at just 4.5%, largely due to delayed procurement, rigid donor disbursement conditions, and limited institutional readiness.



# 5.3 Sub-Programme Physical Performance

Overall, sub-programme performance was fair, averaging 52.4% physical achievement. Only one intervention achieved a good rating (71%), which is attributed to UBTEB's strong delivery in assessments and infrastructure. Two interventions recorded fair performance, while another two were rated poor, mainly due to procurement delays and poor release of funds (Figure 5.1).

Figure 5.1: Performance of interventions in the Labour and Employment Services Subprogramme by 31st December 2024 (number)



Source: Author's Compilation.

A summary of the sampled interventions' performance is presented in Table 5.2.

Table 5.2: A summary of the sampled interventions' performance is presented in Table 5.2.

S/No	Intervention	Performance rating	Remarks
1	Establish a functional labour market.		Performance was fair, averaging 60.3%.
2	Roll out the modularised TVET curricula for all formal TVET programmes to attain a flexible, demand-driven TVET system in Uganda.		Fair performance, averaging 53.3%. MoES had poor performance, averaging 37.5%.
3	Provide incentives to increase enrolment in skills-scarce TVET programmes to reverse the currently inverted skills triangle.		Performance was poor, averaging 48.4%. This was largely due to delays in the implementation of key construction projects.
4	Implement an incentive structure for the recruitment, training, and retention of the best brains in the teaching profession across the entire education system.		The overall performance was poor, at 48.5%. The decent and productive employment component registered the lowest achievement, at 27.3%, largely due to the limited implementation of planned activities.
5	Accelerate the acquisition of urgently needed skills in key growth areas.		Good performance, with 71% of planned outputs achieved.

Source: Author's Compilation.

The physical performance of the sampled interventions is detailed hereafter:

### 5.3.1 Establish a functional labour market

The intervention is largely implemented through MGLSD, MoES, and UBTEB in partnership with LGs, NPA, UBOS, UIA, State House, UMA, PSFU, and public universities to address the challenges of low productivity. MGLSD was monitored, and the planned outputs included: i) a labour market information system established; ii) a minimum wage advisory board, a medical arbitration board, and a labour advisory board in place; and iii) industrial peace and harmony created.

### Performance

The overall physical performance was fair (60.3%) across the intervention. Industrial peace and harmony recorded the highest performance, at 77.4%, in spite of receiving limited funding, while decent and productive employment achieved 61.9%. In contrast, the performance of the labour market information system was at 41.9%, largely due to low budget releases. A detailed breakdown is provided below:

a) Labour Market Information System (LMIS) established: The planned activities included: i) developing a pre-departure training curriculum for skilled and semi-skilled migrant workers; ii) finalising and disseminating a counselling and guidance framework for school-to-work transition; iii) developing and disseminating an internship framework; and iv) disseminating guidelines for external recruitment agencies to stakeholders.

By 31st December 2024, a draft was created for both the counselling and guidance framework and the internship framework. However, the pre-departure training curriculum for migrant workers and the guidelines for external recruitment agencies had not yet been developed. This delay was attributed to insufficient funding, which hindered the timely completion of these components.

In addition, Section 19 of the Employment Act, 2006 mandates employers to submit written returns and statistics on employee numbers, remuneration rates, and other conditions of service, either periodically or upon request. However, this legal requirement has not been effectively implemented. The lack of a centralised employer database, which is essential for compiling and reporting employment returns, has hindered the effective functioning of the LMIS.

Notably, there was a misalignment between the stated output, "LMIS established", and the actual activities undertaken, which primarily focused on policy and framework development rather than the creation of a functional system. This highlights a broader challenge of inconsistent output definitions and shifting intervention priorities by MDAs across reporting periods, making it difficult to track progress and assess the effectiveness of specific interventions.

b) Minimum Wage Advisory Board, Medical Arbitration Board, Labour Advisory Board in place: The annual plan is to have: i) 150 disputes of assessment of permanent incapacities between workers and employers disposed of at the Medical Arbitration Board



(MAB); ii) 553 labour complaints and disputes registered and settled; iii) a backlog of 140 cases disposed of; iv) capacity of 50 Labour Officers built on conciliation, mediation and arbitration of labour complaints and disputes settlement; v) a Labour Advisory Board operationalised and a study on the cases of accidents and injuries in the world of work conducted. Below are the findings:

MAB was established to address disputes over disability assessments between employers and workers, as per Section 13(1) of the Workers' Compensation Act (CAP 225) stipulates. By 31st December 2024, MAB had conducted two meetings, resolving 80 disputes related to permanent incapacity assessments. Despite this, the Board faced a backlog of over 100 unresolved cases, some dating back five years. This delay was largely due to insufficient funding, with the Board receiving only USh. 100 million for the fiscal year, which is far below the required USh. 4.0 billion.

The Labour Advisory Board, established under Section 21(1) of the Employment Act, 2006, serves to advise the Minister on matters related to the Act and broader employment and industrial relations issues. By 31st December 2024, the Board had conducted two quarterly meetings, consistent with Section 22 of the Employment Act, which focused on performance reviews and budgetary matters.

c) Industrial peace and harmony established. MGLSD planned to: i) provide technical support and supervision for labour complaints and dispute resolution in 50 Local Governments; ii) conduct capacity building for 50 internal private recruitment agencies on effective job matching in Kampala and Wakiso; iii) inspect 80 internal private recruitment agencies for compliance with employment standards in Kampala, Wakiso, Mukono, Tororo, Fort Portal, Mbarara, and Mpigi, and conduct capacity building for 13 internal private recruitment agencies.

In addition, iv) inspect 200 external recruitment agencies for compliance with safe labour migration standards; v) inspect 50 external recruitment agencies inspected for compliance with safe labour; vi) 60 pre-departure training institutions for accreditation and training of migrant workers; vii) conduct capacity building for 200 external recruitment agencies on ethical recruitment of migrant workers; viii) strengthen coordination of the National Employment Council (NEC), and produce the annual Labour Market Bulletin.

By the 31st December 2024, the Ministry had made significant strides in promoting industrial peace and harmony. A total of 447 labour complaints were filed, with 101 cases (22.5%) successfully resolved through mediation and conciliation efforts. Additionally, 31 unresolved cases were escalated to the Industrial Court for adjudication. To enhance the effectiveness of dispute resolution mechanisms, the Ministry provided technical supervisory support across 10 Local Governments, including Ngora, Pallisa, Bukedea, and others.

Furthermore, 25 Labour Officers were trained in conciliation, mediation, and arbitration; three collective bargaining agreements were signed between unions and employers, reviewed and registered; 64 public and private workers' compensation claims were computed and submitted to MDAs and employers for payment. However, some planned targets were not met due to inadequate releases.

### Challenges

- 1. Inadequate funding for critical labour governance structures: Statutory bodies such as MAB and the Labour Advisory Board operated under severe funding constraints. For instance, MAB received only USh. 100 million out of the required USh. 4.0 billion, limiting its capacity to address a growing backlog of disability assessment disputes, some dating back five years.
- 2. Weak enforcement of employment reporting requirements: Section 19 of the Employment Act, 2006, is not being effectively enforced. Most employers fail to submit the required statistics on employee conditions and remuneration due to the absence of a centralised employer database, which continues to impede the functionality of the Labour Market Information System (LMIS).
- 3. Low case resolution rates and persistent backlogs: Only 22.5% of labour complaints filed were resolved through mediation and conciliation, and over 100 cases remain unresolved at MAB. This reflects weak capacity in dispute resolution mechanisms and delayed access to justice for affected workers.

#### Recommendation

i) MGLSD should operationalise a centralised employer database to enforce Section 19 of the Employment Act and strengthen the LMIS, as well as increase funding to statutory labour bodies to enhance dispute resolution and address case backlogs.

# 5.3.2 Roll out the modularised TVET curricula for all formal TVET programmes to attain a flexible, demand-driven TVET system in Uganda.

The intervention was implemented by MoES under the TVET Operations and Management Department (TVET O&M), and the Uganda Business and Technical Examinations Board (UBTEB). A breakdown of planned outputs and their implementation status is presented in Table 5.3.

#### **Performance**

The overall performance of the intervention was fair (53.3%) across the two implementing institutions. MoES recorded poor performance of 36.4%, with only 4 out of 11 planned outputs partially or fully implemented by mid-FY 2024/25. Most critical activities, such as TVET-O&M data collection, stakeholder consultations, public awareness drives, sponsorships for special groups, and curriculum dissemination, were not undertaken, significantly impacting results.

However, UBTEB achieved good performance of 75%. UBTEB rolled out 10 modularised programmes (out of 30), decentralised assessments in four regional centres. Additional accomplishments included obtaining ISO 9001:2015 certification, updating assessment guidelines to integrate climate change content, and initiating a tracer study on TVET graduates. Details of performance are presented in Table 5.3 below.



Table 5.3: Implementation status of planned outputs by MoES and UBTEB as at 31st December 2024

Institution	Planned Output	Implementation Status
MoES	Public awareness and sensitisation on TVET	Not conducted.
	programmes and institutions.	
	Sponsorships and related costs paid for 80 special	Sponsorships not paid; no
	groups' trainees, including 10 SNE students and girls	implementation.
	Decentralised admissions are conducted at 5 regional	Preparations commenced, but were not
	centres for UPPET and UPOLET TVET students.	completed.
	TVET-OM data collection and survey conducted.	Not conducted.
	TVET Council preparatory activities facilitated.	Not facilitated.
	72 TVET institutions monitored and support	Achieved 29% of target: 21 institutions
	supervised.	monitored (19 Government, 2 private).
	Consultative meetings and conferences on TVET	Not conducted.
	Policy Operating Guidelines and Standards held.	
	Public awareness drives on modular programmes	Not conducted.
	conducted.	
	Modularised curricula printed and disseminated;	Not implemented, and the curricula not
	requirements inspected and enforced.	printed/disseminated; requirements not
	TV/CT appreting presedures and standards developed	enforced.
	TVET operating procedures and standards developed and disseminated; TVET MIS upgraded; TVET Bill	Implemented.
	benchmarking studies conducted.	
	142 public and 60 private institutions support	50 public institutions supported; 60
	supervised.	private institutions inspected.
UBTEB	30 modularised TVET programmes rolled out.	10 programs rolled out; decentralised
00110	30 modulandou 1 v = 1 programmos rondu dut.	assessments ongoing; staff retooling
		planned for Q3.
	Ensure BRMS compliance by schools and training	ISO certification acquired; assessment
	institutions.	guidelines updated with climate
		content; 2 reports and sensitisation
		done.
	1 tracer study report on TVET graduates produced.	Report in progress, not yet completed.

Source: Field Findings.

# 5.3.3: Provide incentives to increase enrolment in skills-scarce TVET programmes to reverse the currently inverted skills triangle

The intervention is largely implemented by the Department of Health Education and Training under MoES. It aims to expand access to quality training for health professionals and improve institutional capacity for health workforce development.

The key planned outputs included assessment of students under UAHEB and UNMEB; monitoring and support supervision of Health Education and Training (HET) institutions; organisation of both national and international skills competitions; the development of the National Education and Training for Health Policy; and the revision of five diploma curricula.

Under Project 1803, infrastructure development targeted construction works at Jinja Medical Laboratory School, Rt. Hon. Wapakhabulo Memorial College, Hoima School of Nursing and Midwifery, the Public Nurses College, Kyambogo, and Mbale School of Hygiene, along with monitoring of civil works. Details of performance are presented in Table 5.4.

#### **Performance**

The overall performance was poor (48.5%) across the planned outputs. This was largely due to delays in the implementation of key construction projects. On average, physical progress across the five construction sites was at only 17%, with only one project (the girls' hostel at Hoima School of Nursing and Midwifery) fully completed, while others, such as Jinja Medical Laboratory School, progressed to 35%, and the rest either had not started or remained at contractual stages.

Assessment activities also underperformed, with an average achievement of 53.3%. UAHEB assessed 22,000 out of 44,000 targeted students (50%), while UNMEB assessed 59,903 out of 105,806 students (56.6%). However, notable progress was recorded in a few areas. The Annual Health Education Training and Health Care Conference was successfully held. Mentors and clinical preceptors for 20 Health Training Institutions (HTIs) were facilitated as planned, and preliminary activities for curriculum review were initiated.

Table 5.4: Implementation status of planned outputs under Health Education and Training

Planned Output	Achievement
A total of 44,000 students under UAHEB assessed.	UAHEB assessed 22,000 students, indicating 50% performance against the target.
A total of 105,806 students under UNMEB assessed.	UNMEB assessed 59,903 students, achieving approximately 56.6% of the target.
Monitor, support and supervise 85 HET institutions.	Only 25 out of 85 institutions were monitored; 3 repurposed PTCs were also visited.
Organise 1 National and 1 International Skills Competition.	Not implemented; both events were not conducted.
Develop and approve the National Education and Training for Health Policy.	Not developed or submitted to Cabinet by mid-year.
Hold Annual Health Education Training and Health Care Conference.	Successfully held as planned.
Facilitate mentors and clinical preceptors for 20 HTIs.	Mentors and clinical preceptors were facilitated for the 20 institutions.
Revise curricula for 5 health diploma programmes.	Only preliminary activities were conducted; full revision is pending.
Construction at Jinja Medical Laboratory School is completed.	Progress reached 35%; the first-floor suspended slab was cast.
Construction at Rt. Hon Wapakhabulo Memorial College completed.	No physical progress; contract pending signature by PS/ES.
Construction of girls' hostel at Hoima SNM completed.	Fully completed as planned.
Construction of staff quarters at Public Nurses College, Kyambogo completed.	Not completed; no further progress reported.
Construction of the administrative block at Mbale School of Hygiene commenced.	Construction did not start by mid-year.
Civil works monitored and supervised.	Not implemented; no monitoring or supervision took place.

Source: Field Findings.



### Challenge

Procurement and contract approval delays: Several construction projects were stalled due to prolonged procurement processes and delayed contract signings, like in the case of Rt. Hon. Wapakhabulo Memorial College, where the contract awaited approval by the Permanent Secretary.

#### Recommendation

Fast-track procurement and contract approval processes: MoES should streamline procurement workflows and ensure timely contract approvals to avoid delays in construction project implementation.

# 5.3.4 Implement an incentive structure for the recruitment, training, and retention of the best brains in the teaching profession across the entire education system

The intervention implemented by MoES and MGLSD aims to produce an appropriate, knowledgeable, skilled, and ethical labour force (with strong emphasis on science and technology, TVET, and sports). MGLSD was monitored, and its key planned outputs were to enhance decent and productive employment, promote green jobs and a fair labour market, and support the growth and productivity of women's enterprises.

#### **Performance**

Overall performance was poor, at 48.4%. The Decent and Productive Employment component had the lowest achievement, at 27.3%, due to limited implementation of inspections, capacity building, and compliance monitoring. The GROW Project also underperformed at 38%, mainly focusing on preparatory activities such as staff recruitment and manual development, delaying substantive implementation. The performance of planned outputs is detailed below as follows:

#### a) Decent and productive employment increased

MGLSD plans to: i) conduct capacity building for 50 labour market information-generating institutions; ii) mentor 100 job seekers on marketable skills for enhanced employability; iii) conduct capacity building for 50 Labour Officers on the use of the digital job matching tool; iv) conduct capacity building for 50 internal private recruitment agencies on effective job matching in Kampala and Wakiso; v) inspect 80 internal private recruitment agencies for compliance with employment standards in Kampala, Wakiso, Mukono, Tororo, Fort Portal, Mbarara and Mpigi; and vi) inspect 200 External Recruitment Agencies for compliance with safe labour migration standards.

Furthermore, vii) inspect 60 pre-departure training institutions on compliance for accreditation and training of migrant workers; viii) conduct capacity building of 200 internal private recruitment agencies on ethical recruitment of migrant workers; ix) strengthen coordination of the National Employment Council (NEC); x) produce the annual Labour Market Bulletin; xi) inspect 200 external and internal private recruitment agencies on adherence to labour standards conducted across the country and conduct 120 labour productivity assessments/surveys in all sectors of the economy.

By 31st December 2024, 180 Labour Officers (76 females and 104 males) had been trained in using the National Labour Inspection Checklist, National Guidelines for Labour Inspection, and the Code of Conduct for Labour Inspectors. A total of 169 workplaces were inspected and investigated to ensure compliance with labour laws and standards in 33 districts<sup>6</sup>. Two quarterly engagements for the National Taskforce on Labour Productivity were conducted.

### b) Green jobs and a fair labour market promoted

The annual plan is to: i) provide business toolkits and equipment to 150 *jua kali* groups; ii) provide business development services to 552 *jua kali* beneficiary groups; iii) provide technical support supervision in 100 Local Governments to enhance the effective delivery of the SENTE programme; iv) conduct four TV and 120 radio talk shows in 60 Local Governments; v) provide monitoring and technical support supervision to 5 graduate volunteers in five workplaces; vi) conduct engagements on the National Taskforce on Labour Productivity; vii) conduct capacity building for 200 public/private sector participants on green practices; viii) monitor and provide technical support to 552 *jua kali* groups on enterprise implementation in 90 beneficiary districts; and ix) review the draft *jua kali* catalogue based on the Buy Uganda Build Uganda (BUBU) policy.

In addition; viii) provide technical support in 100 Local Governments to enhance the effective delivery of the green jobs programme; ix) conduct green skills needs assessment in the manufacturing and construction in 60 Local Governments; x) carry out awareness raising campaigns and sensitisation workshops on green practices in 100 Local Governments; xi) conduct 144 labour inspections to ensure compliance with labour laws and standards in all sectors of the economy; and xii) conduct technical support supervision on the elimination of child labour in 72 Local Governments.

By 31st December 2024, 27 jua kali business toolkits and equipment sets had been procured, and a needs assessment was completed for 45 jua kali groups. Additionally, 257 jua kali groups across 56 beneficiary districts received technical support and supervision related to enterprise implementation. However, despite being listed as beneficiaries, the districts of Masaka, Mbarara, Kamuli, Kabale, Namutumba, and Mbale reported that they had neither received any form of support supervision nor been provided with jua kali business toolkits and equipment. This discrepancy highlights potential gaps in the distribution and oversight mechanisms of the program.

Additionally, green skills needs assessments were conducted in 40 Local Governments, and technical support supervision was provided in the Albertine and Rwenzori sub-regions to enhance the effective delivery of the Green Jobs Programme in 30 districts.

# c) Growth and productivity opportunities for women enterprises enhanced through the Generating Growth Opportunities and Productivity for Women Enterprises (GROW) Project

The initiative aims to support over 60,000 women-owned enterprises, including 3,000 refugee-owned businesses. It also targets 280,000 women entrepreneurs and employees, 42,000 refugees, 14,000 host community members, and 1.6 million indirect beneficiaries. In addition, the project plans to support investments in infrastructure and facilities that address

<sup>&</sup>lt;sup>6</sup> Soroti, Mbale, Tororo, Mayuge, Jinja, Bugiri, Busia, Mbarara, Hoima, Fort Portal, Kanungu, Isingiro, Mukono, Buikwe, Wakiso, KCCA, Lyantonde, Mpigi, Gomba, Kassanda, Kiryandongo, Kyankwanzi, Luwero, Arua, Gulu, Lira, Kitgum, Alebtong, Amuru, Nwoya, Oyam, Madi-Okollo, Zombo



the constraints women face in expanding and growing their MSMEs, including common-user facilities and childcare services.

The project is implemented through four components: i) Support for Women's Empowerment and Enterprise Development Services; ii) Access to Finance for Women Entrepreneurs; iii) Enabling Infrastructure and Facilities for Women Enterprise Growth and Transition; and iv) Programme Management, Evidence Generation, and Policy Innovation.

By December 2024, the overall project performance was poor, showing only 38% progress and lagging behind its scheduled timeline. The project initially focused on preparatory activities, including developing project manuals and recruiting staff, which were prerequisites for initiating significant disbursements and expenditures. The detailed component performance is outlined below:

#### i) Women Empowerment and Enterprise Development Services

This component focuses on providing enterprise development services to women through a combination of technical skills, life skills, and digital training, alongside business advisory services. It also strengthens women's networks via platforms facilitating market linkages and value chain development, aiming to address and change the harmful social norms hindering women's participation in business activities.

As of December 2024, a total of 105 district-level platforms were successfully established and reinforced in collaboration with the Uganda Women Entrepreneurs Association Limited (UWEAL). These platforms engaged 22,305 women in various Women's Empowerment Programme (WEP) activities, and the WEP handbook was developed and widely distributed.

The sensitisation and awareness campaigns aimed at educating Members of Parliament, district and city leaders, and women entrepreneurs were successfully carried out across 12 sub-regions. These campaigns primarily focused on the GROW Project's implementation strategies, the available products and services for women entrepreneurs, and the processes for accessing them.

The campaigns reached 13,227 beneficiaries, with more than 90% of them being women entrepreneurs. Districts such as Kyenjojo, Mubende, Jinja, Mbarara, and Masaka had trained district officials and focal persons. However, districts like Kabarole and Kamuli had not yet received training during the assessment.

The initiative trained 5,117 women in Business Development Services (BDS) and tradespecific skills, out of a target of 8,060 women, indicating a need for expanded outreach. The training covered many skills, including tourism experiences, tailoring, garment production, fashion and design, arts and crafts, hairdressing, cosmetology and skin care, catering, soap and detergent making, and energy-saving cooking devices. Participants also gained exposure to packaging, marketing opportunities, and other business development aspects.

In addition to these technical skills, women were introduced to or further developed their abilities in savings, lending, cooperative associations (SLAs), digital marketing, financial literacy, record-keeping, climate adaptation, and innovative technologies. To further enhance learning, Makerere University Business School (MUBS) developed a core curriculum, which

was translated into nine major languages, including Swahili, Arabic and French, ensuring accessibility to a wider audience.

Additionally, 26 enterprises were selected to serve as host institutions for the Women's Apprenticeship and Work Placement Programme, providing valuable hands-on experience and strengthening the connection between training and practical business operations. MoES partnered to develop an apprenticeship curriculum, and a management firm was identified to oversee work placements.

#### ii) Access to Finance for Women Entrepreneurs

This component aims to address financial barriers faced by women-led businesses by providing grants and loans to facilitate their growth from micro to small and medium-sized enterprises. It includes two main initiatives:

- i) Business expansion grants ranging from USD 5,000 to USD 30,000 for women looking to enter male-dominated sectors like technology or construction, or expand into social enterprises or climate change-related ventures.
- ii) The Grow Financing Facility (GFF) supports women entrepreneurs, including refugees and those in refugee-hosting districts (RHDs), to access loans from financial institutions to scale their businesses and enhance productivity.

The GFF, with a budget of USD 70 million (USh. 260 billion), focuses on overcoming capital access challenges and helps women entrepreneurs in sectors such as agriculture, manufacturing, tourism, construction, and services.

#### \* Features of the GROW loan

i) A GROW loan is accessed under three funding levels, as presented in Table 5.5 below:

Table 5.5: Proposed funding levels

Beneficiary	Loan Level	Targeted Beneficiaries
Level 1	4-20 million	17,000
Level 2	20+ to 40 million	10,500
Level 3	40+ to 200 million	1,250

Source: GROW Project Progress Report, 2024.

- ii) Any woman entrepreneur, including leaders with an eligible business, can apply for the GROW loan.
- iii) Affordable interest rate between 10% and 10.5% per annum for a period not exceeding 24 months.
- iv) No loan fees, except for the statutory requirements, such as the Credit Reference Bureau, Environmental Impact Assessment (EIA) by NEMA, insurance of the collaterals and some process fees, such as collateral valuation.

Women who repay the instalments consistently for half of the loan period receive a grant as a bonus and will have their loan values reduced by 5%.



The GROW loan and the participating banks were launched on 28th August 2024, with the banks including Equity Bank, Centenary Bank, Post Bank, Finance Trust Bank, DFCU Bank, and Stanbic Bank. These Participating Financial Institutions (PFIs) demonstrated having specialised products for women entrepreneurs that will ensure as many women as possible can access GROW loans. Additionally, the project was in the final stages of selecting microfinance institutions (SACCOs and MFIs) under cohort 2 to enhance the disbursement of credit facilities to women entrepreneurs.

By November 2024, a total of USh. 39.79 billion had been released to five PFIs, and USh. 36.7 billion was disbursed to 1,883 beneficiaries (Table 5.6).

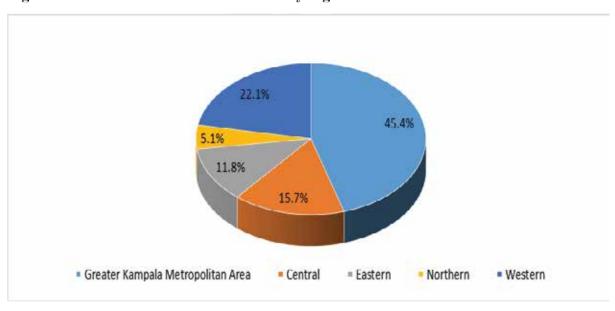
Table 5.6: Number of loans and amount disbursed by each PFI as at 30th November 2024

No.	PFI	Contract Amount (Ugshs	Amount disbursed to PFIs to date	Amount of GROW loans disbursed by PFIs	No. of Beneficiaries
1	Centenary Bank	22,500,000,000	12,000,000,000	12,000,000,000	728
2	DFCU Bank	22,500,000,000	7,998,000,000	4,904,400,000	109
3	Equity Bank	8,550,000,000	1,800,000,000	1,800,000,000	111
4	Finance Trust	22,500,000,000	12,000,000,000	11,996,943,450	567
5	Post Bank	22,500,000,000	6,000,000,000	6,000,000,000	368
	Total	98,550,000,000	39,798,000,000	36,701,343,450	1,883

Source: GROW Report, December 2024.

The distribution of loans across regions revealed significant disparities, with Western and Central Uganda receiving more loans than the Northern and Eastern Regions. This uneven distribution highlights the need for more vigorous enforcement of equitable loan allocation across all 19 sub-regions. Figure 5.2 illustrates these disparities in loan disbursement.

Figure 5.5: Distribution of GROW loans by region



Source: GROW Report, December 2024.

#### c) Enabling Infrastructure and Facilities

This component focuses on facilitating investments in infrastructure and facilities that address the specific challenges women face in expanding and growing their MSMEs. It aims to improve access to essential economic and social infrastructure by providing common-user facilities and childcare services. These initiatives are designed to support women entrepreneurs in overcoming barriers to growth and development.

By 31st December 2024, three locations – Kampala, Kololo, and Lweza – had been identified for the establishment of a multipurpose enterprise centre to set up dedicated spaces for women's entrepreneurship training and production.

Additionally, three common-user production facilities (CUPFs) were identified to support women entrepreneurs with shared resources. These facilities aim to reduce the financial burden of individual investments in equipment by providing access to shared production spaces. The selected CUPFs are the Makerere University Food Technology Centre, Rwentanga Farm Institute, and the Kawanda Agricultural Research Laboratory. These centres are expected to enable women entrepreneurs to access necessary infrastructure without the prohibitive costs of private ownership. Furthermore, the infrastructure grants manual was finalised to support childcare, sanitation, and digital facilities. Two studies on childcare affordability and workplace integration were launched in November 2024.

#### d) Programme Management and Policy Innovation

This component focuses on governance, monitoring, and policy innovation to sustain the GROW Project. The key achievements included: Operationalisation of Project Steering and Technical Committees; deployment of focal point persons across 146 districts; the launch of the Management Information System (MIS); and the initiation of two policy studies, i.e., the impact of taxation on women entrepreneurs and the integration of mental health support for women in business.

#### 5.3.5 Accelerate the acquisition of urgently needed skills in key growth areas

This intervention was largely implemented by UBTEB, with a strong focus on strengthening skills assessment and institutional accreditation.

#### Performance

The overall performance was good, with 71% of planned outputs achieved. Key milestones included the assessment of 179,338 candidates against a target of 184,000, the deployment of 7,587 examination managers, inspection of 5,591 real-life projects across 498 examination centres, online assessment of 35 modules, issuance of over 69,000 certificates and transcripts, training of 600 academic registrars on EIMS advancements, and extensive industrial training monitoring.

Additionally, the construction of the five-storey UBTEB Assessment Centre at Kyambogo reached 85% physical progress by mid-year, despite 96% of the project time having elapsed. However, several planned activities were not implemented or were only partially achieved. Table 5.7 below presents a summary of the performance breakdown:

Table 5.7: Summary of planned outputs and implementation status

Planned Output	Achievement	Status
Incorporate 14 institutions into the agricultural extension system.	Not mentioned.	Not implemented.
Review real-life projects assessment guidelines with climate change content.	Guidelines reviewed	Fully implemented.
Produce an EIA report for agricultural real-life projects.	ESIA for UBTEB Centre approved.	Partially implemented.
Reports on agricultural value addition in 14 TVET institutions.	Not mentioned.	Not implemented.
Conduct gender mainstreaming sensitisation for UBTEB staff.	Not mentioned.	Not implemented.
Register and support 200 SNE students during assessments.	173 students supported.	Partially implemented.
Inspect 1,000 real-life projects in TVET institutions.	5,591 projects inspected.	Fully implemented.
Monitor 15,000 industrial training candidates.	15,000 monitored.	Fully implemented.
Implement industry MOUs through TVET assessment groups.	MOUs implemented.	Fully implemented.
Assess 73,600 female and 110,400 male candidates.	179,338 candidates assessed.	Fully implemented.
Deploy 8,000 professionals to manage examinations.	7,587 deployed.	Fully implemented.
Establish and operationalise the RPL framework.	Framework developed, not operationalised.	Partially implemented.
Assess 35 modularised TVET programmes online.	35 modules assessed.	Fully implemented.
Issue 60,000 certificates and transcripts.	47,947 transcripts & 21,888 certificates issued.	Fully implemented.
Train 400 academic registrars on EIMS upgrades.	600 trained.	Fully implemented.
Hold regional examination feedback workshops.	4 workshops held.	Fully implemented.
Upgrade EIMS and update the TVET qualifications database.	EIMS upgraded; database update not reported.	Partially implemented.
Inspect 120 TVET providers for accreditation.	120 inspected.	Fully implemented.
Grade and award national examinations.	Marking and grading completed.	Fully implemented.
Update geo-referencing for 180 examination centres.	180 centres geo-referenced.	Fully implemented.

Source: Field Findings.

# **5.4 Sub-programme Challenges**

- 1. Uneven regional distribution of GROW loans: The GROW loan disbursements were disproportionately concentrated in Central and Western Uganda, largely due to limited outreach and the relatively low presence of women-led enterprises in Northern and Eastern regions. This imbalance undermined equitable access to financial support across all targeted areas.
- 2. Delays in procurement and contract approval processes: This significantly hindered the timely execution of infrastructure projects under Project 1803, with only one out of five targeted health training institutions completed by mid-year.
- 3. *Inadequate funding for statutory bodies*: Labour governance structures like MAB operated under constrained budgets, limiting their ability to clear case backlogs.

# 5.5 Sub-programme Conclusion

The sub-programme registered fair performance, with an average physical achievement of 52.4%, indicating moderate but insufficient progress in delivering planned outputs. The intervention on accelerating the acquisition of urgently needed skills, implemented by UBTEB, performed well, at 71%, largely due to strong delivery in assessments and infrastructure development. However, two interventions (the rollout of modularised TVET curricula and the establishment of a functional labour market), registered fair performance. Two others, i.e., providing incentives for enrolment in skills-scarce TVET programmes and recruitment and retention of the best brains, were rated poor, mainly due to procurement delays, poor fund releases, and low absorption rates.

## 5.6 Sub-programme Recommendations

- i. Strengthen regional outreach and enterprise development in underserved areas: MGLSD should collaborate with Local Governments and women's associations to intensify sensitisation, enterprise training, and financial inclusion campaigns in Northern and Eastern Uganda. This will enhance the presence of women-led enterprises and improve equitable access to GROW financing.
- ii. Fast-track procurement and contract approvals for infrastructure projects: The MoES should streamline procurement timelines, enforce delivery milestones, and ensure timely project execution under Project 1803.



#### **CHAPTER 6: GENDER AND SOCIAL PROTECTION SUB-PROGRAMME**

#### 6.1 Introduction

The Gender and Social Protection Sub-programme aims to: i) promote rights, gender equality, equity, and women's participation and empowerment in the development process; ii) enhance the resilience and productive capacity of vulnerable individuals to foster inclusive growth; and iii) address imbalances and ensure equal opportunities for all, aligning with the National Development Plan III's objective IV, which focuses on "enhancing the productivity and social wellbeing of the population". The expected outcomes include: a) increased coverage of social protection; and b) a reduction in key forms of inequality.

This sub-programme encompasses five interventions carried out by various implementing agencies, including the Ministry of Gender, Labour and Social Development (MGLSD), the Equal Opportunities Commission (EOC), and Local Governments (LGs). The interventions (Annex 1). Four of the five interventions were monitored, namely: i) expanding care and support services for vulnerable groups and disaster-prone communities; ii) promoting women's economic empowerment and leadership through entrepreneurship programs and business centres; iii) enhancing livelihood support and labor market programs for green growth; iii) supporting gender-responsive budgeting; and vi) implementing the Uganda Gender Policy Action Plan.

#### 6.2 Financial Performance

The revised budget for FY 2024/25 for the Gender and Social Protection Sub-programme is USh. 146.348 billion, of which USh. 78.639 billion (53.7%) was released and USh. 73.887 billion (94%) was expended by 31st December 2024. The sub-programme demonstrated commendable efficiency in utilising released funds across most outputs (Table 6.1). However, low-budget releases, especially in key areas like women's participation, may hinder timely outcomes.

Table 6.1: Financial performance of the Gender and Social Protection Sub-Programme by budget output as at 31st December 2024

Outputs	Revised Budget	Release	Spent	% Budget Released	% Release Spent
			in Billions	3	
000039: Policies, regulations and standards	1.304	0.646	0.511	49.5	79.10
320141: Empowerment and protection	139.056	74.924	71.166	53.9	94.98
320142: Enhanced women's participation in development	0.260	0.070	0.066	26.9	94.29
320145: Response tog ender-based violence	0.065	0.027	0.026	41.5	96.30
320146: Support to special interest groups	1.652	1.115	0.918	67.5	82.33
320147: Transfer to Statutory Councils	4.011	1.858	1.200	46.3	64.59
Total	146.348	78.64	73.887	53.7	93.96

Source: MGLSD Q2 Performance Report, FY 2024/25.

An analysis of budget performance by output indicates that most of the funding was directed towards empowerment and protection, constituting 53.9% of its allocation and

accounting for 95% of total programme releases. The high release and spending under this output indicate a prioritisation of cash transfers and livelihood grants, mainly targeting vulnerable groups and special interest categories. However, while this reflects Government commitment to broad-based economic inclusion, it also highlights a critical imbalance in intra-programme resource distribution.

In contrast, the response to gender-based violence (GBV), a key area amid rising GBV cases, received only USh. 0.027 billion, representing 0.04% of total programme resources. Despite a high absorption rate of 96.3%, the severe underfunding of GBV response interventions reveals a significant misalignment between policy commitments and fiscal prioritisation. This underinvestment risk undermines national efforts to address GBV, especially in light of growing service demand and shelter inadequacies.

### 6.3 Physical Performance

The overall performance of the Gender and Social Protection Sub-programme was fair (58.6%). The performance of interventions was uneven, with notable disparities between policy-level progress and grassroots implementation. While support for gender equality and equity-responsive budgeting in all sectors and LGs showed good performance, community-based interventions lagged. For instance, expanding care and social protection for vulnerable groups performed poorly (39.6%) due to delayed disbursements, and livelihood support initiatives recorded only fair success (66.1%). Figure 6.1 and Table 6.2 below summarise the performance of the selected interventions, and Annex 6.1 details the performance of the monitored interventions.



Figure 6.1: Performance of interventions in the Gender and Social Protection Subprogramme by 31st December 2024 (number)

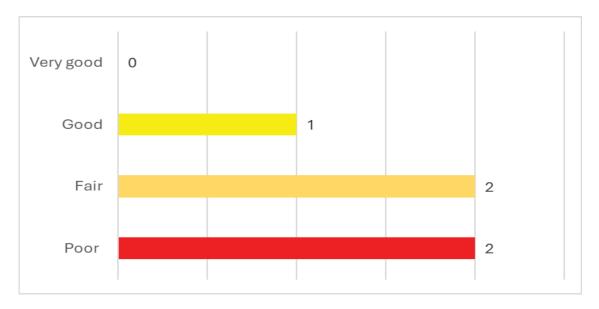


Table 6.2: Performance of selected Gender and Social Protection Sub-programme interventions by 31st December 2024

Intervention	Color code	Remark
Expand the scope and coverage of care, support, and social		Poor performance at 39.6%. Disbursements to
protection services for the most vulnerable groups and		vulnerable groups were delayed.
disaster-prone communities		
Expand livelihood support, public works, and labour market		Fair performance (66.1%). Performance gaps were
programs to promote green and resilient growth.		noted in the resettlement of street children and the
		funding of women and youth enterprises.
Promote women's economic empowerment, leadership,		Fair performance (58%).
and decision-making participation through investment in		
entrepreneurship programs and business centres.		
Support gender equality and equity-responsive budgeting		Good performance (76.8%).
in all sectors and LGs.		
Implement the Uganda Gender Policy Action Plan.		Intervention was not implemented; the review process
		for the Uganda Gender Policy was halted, and guidance
		from the President is awaited.

Source: Author's Compilation.

# 6.3.1 Expand the scope and coverage of care, support, and social protection services for the most vulnerable groups and disaster-prone communities

The intervention focuses on empowering orphans and vulnerable children (OVC), persons with disabilities (PWDs), older persons, youth, gender-based violence (GBV) survivors, and drug addicts through social care programmes. The planned outputs for FY 2024/25 are: i) senior citizens' grant expanded to all aged above 75 years; ii) adult disability benefits provided; iii) policy and legal framework on social protection strengthened or developed; and v) 16 newly elected/appointed members of the National Council for Older Persons inducted on the mandate of the National Council.

#### Performance

Overall intervention performance was poor. Critical gaps included underperformance in supporting targeted older persons and PWDs due to late disbursements, infrastructure challenges in rehabilitation centres, and incomplete staff facilitation disbursements due to unmet certification. However, moderate progress was noted in enrolling new Social Assistance Grant for Empowerment (SAGE) beneficiaries and in successful vocational training for youth with disabilities. All planned outputs were assessed, and detailed output performance is as follows:

## i) Senior citizens' grant expanded to all aged above 75 years

The SAGE targets individuals aged 80 and above, primarily aiming to reduce their vulnerability by supplementing existing coping mechanisms. Implemented by the Ministry of Gender, Labour and Social Development (MGLSD) under the Expanded Social Protection (ESP) Programme, this intervention aims to support 307,988 eligible beneficiaries.

By 31st December 2024, a total of USh. 23,870,215,350 had been disbursed to this target group, covering entitlements for Q4 of FY 2023/24 and Q1 of FY 2024/25. The rollover of Q4 payments into the current reporting period was necessitated by the lack of operational funds in FY 2023/24, reflecting ongoing liquidity constraints in the programme's fiscal management. Regarding staff facilitation, 10,976 out of 13,271 planned District Local Government (DLG) personnel received allowances amounting to USh. 570,513,000.

The remaining 2,295, mainly Community Development Officers (CDOs), were unpaid due to failure to meet certification requirements. This exclusion has negatively affected staff motivation, limiting the effectiveness of beneficiary mobilisation and weakening programme implementation at the community level.

In addition, the ESP successfully verified, registered, and enrolled 22,385 new beneficiaries during the reporting period. The beneficiaries reported using the funds primarily to meet basic needs, including purchasing soap, sugar, and paraffin; acquiring domestic animals like goats and poultry; hiring gardeners; and buying scholastic materials such as books and pencils for their grandchildren.

#### ii) Adult disability benefits provided

In FY 2024/25, the Ministry plans to assist 2,072 groups of PWDs via the National Special Grant, targeting 31,080 individuals. It will also strengthen the Disability Management Information System (DMIS) at the local level. Additionally, funding will support 500 groups of older persons through the Special Enterprise Grant for Older Persons (SEGOP), benefitting an estimated 4,800, and enhance the SEGOP Management Information System (SEGOPMIS). Six vocational rehabilitation centres will receive support with food and non-food items to facilitate employability-focused training for 500 PWDs.



By December 31, 2024, financing was extended to 360 PWD enterprise groups under the National Special Grant, benefitting 1,829 PWDS (903 males and 926 females) across 52 LGs, indicating a significant shortfall against the initial national target. Similarly, under SEGOP, 145 older persons' groups were supported, reaching 770 individuals (403 males and 367 females) in 37 LGs, which also falls short of the planned outreach.

To address persistent data collection and monitoring inefficiencies, the Ministry implemented nationwide refresher training for all programme focal persons on using the Social Empowerment and Group Outreach Programme Management Information System (SEGOPMIS). This intervention aimed to enhance the precision and timeliness of beneficiary data submissions, thereby improving the overall effectiveness of programme monitoring and reporting.

In addition, six specialised vocational rehabilitation centres in Ocoko, Mpumudde, Lweza, Kireka, Ruti, and the Jinja Sheltered Workshop were equipped with essential supplies to facilitate skills training for youth with disabilities. As a result, 476 out of the targeted 500 beneficiaries (235 males and 241 females) completed the training, achieving a commendable performance rate of 95.2% in skills acquisition for improved employability. Despite these operational gains, the physical infrastructure of these centres remains critically inadequate. The facilities for instruction and accommodation have deteriorated significantly over the past ten years, with no substantial improvements made, undermining the quality and sustainability of the vocational training programmes.





Left-right: Instructors' accommodation facilities- Ruti Rehabilitation Centre in Mbarara District; Dormitory with asbestos iron sheets at Mpumudde Vocational Centre, Jinja.

iii) Policy and legal framework on social protection strengthened/developed The plan is to have Draft Guidelines for the Management of Homes of Persons with Disabilities developed. The Guidelines on Employment Quotas for Persons with Disabilities in workplaces have been developed; the National Social Protection Strategy developed. National Equal Opportunities Policy finalised, National Action Plan on Business and Human Rights disseminated in 20 LGs, National Social Capital Growth Strategy finalised, and Social Impact Assessment and Accountability Bill finalised.

By 31st December 2024, most of the guidelines above remained under development, with stakeholder consultations ongoing to ensure inclusivity and consensus. Notably, the Financing Strategy was successfully integrated into the National Social Protection Strategy, marking a critical step towards ensuring the sustainability and resource alignment of social protection interventions.

# iv) 16 Newly elected/appointed members of the National Council for Older Persons inducted on the mandate of the National Council

To enhance inclusion, mobilisation activities were planned to encourage older persons' participation in Government programmes, complemented by civic education sessions across the four regions focusing on electoral processes and rights awareness. However, full implementation of these outputs was constrained by 31st December 2024.

Key activities, particularly those related to mobilisation and civic engagement, were not executed as planned due to delays in appointing Technical Officers under the National Secretariat for Special Interest Group Councils. This staffing gap hindered operational capacity and slowed progress in realising the Council's engagement objectives.

# 6.3.2 Expand livelihood support, public works, and labour market programmes to promote green and resilient growth

The planned outputs for FY 2024/25 are:

- i. Implementation of social care programmes.
- ii. Strengthening of the Youth Livelihood Programme (YLP).
- iii. Stakeholder engagement for equity and social inclusion with implementers in 32 Local Governments.
- iv. Capacity building and assessments on the Human Rights-Based Approach to programming conducted in six Local Governments across regions, focusing on social equity and rights inclusion.
- v. Social equity and rights inclusion inspections conducted in 42 Local Governments in the sub-regions of Karamoja, Lango, West Nile, Acholi, Central, Teso and Bukedi.
- vi. Capacity building of stakeholders on business and human rights in 25 Local Governments.
- vii. Capacity building of stakeholders in the Albertine Region on social risk management in infrastructural projects.

#### Performance

The performance of the intervention was rated as fair, at 66.1%. The key achievements included: child rehabilitation; training in entrepreneurial skills; and engaging stakeholders on social equity and rights-based programming issues. Nevertheless, the performance gaps were noted in the resettlement of street children and funding of women and youth enterprises. This was primarily due to delays in fund disbursements and insufficient compliance from Local Government authorities with accountabilities and the submission of beneficiary groups. All the planned outputs were assessed, and detailed performance is given below:

### i. Social care programmes implemented

The output targets the protection, rehabilitation, and empowerment of vulnerable children and youth through a multifaceted approach. The planned activities for FY 2024/25 include the rescue, rehabilitation, and resettlement of 500 street children and the rehabilitation of 1,500 children in conflict with the law, as well as those abandoned in remand homes.



In addition, the provision of entrepreneurial and life skills training to 300 youth through skills centres and Youth Truck outreach initiatives is planned, along with stakeholder engagement sessions on equity and social inclusion to be held in eight LGs.

Furthermore, capacity building on the Human Rights-Based Approach (HRBA) to programming is set to take place in six regions. Psychosocial support, formal education, and non-formal life skills are planned for 62 children at the Naguru Reception Centre (NRC) and 250 juveniles serving sentences at Kampiringisa National Rehabilitation Centre (KNRC).

As of 30th December 2024, notable progress had been made across several dimensions; however, many targets remained partially achieved due to limited funding. In terms of direct child and youth interventions, only 98 of the targeted 500 street children were rescued, rehabilitated, and resettled. Technical support supervision for youth and child protection programmes was undertaken in 40 Local Governments. Furthermore, food and non-food items were distributed to 2,336 children (2,252 boys and 84 girls), surpassing the initial target of 1,500. These included children in conflict with the law, abandoned children in reception centres, and those in rehabilitation institutions. Box 6.1 presents a case study on food security in remand homes.

#### Box 6.1: Case Study: Improving Food Security in Juvenile Remand Homes in Uganda

In recent years, juvenile remand homes in Uganda have struggled with food supply issues, mainly due to budget constraints and inefficient procurement practices, resulting in considerable debts for these facilities.

In response, the MGLSD implemented a decentralised procurement system, enabling remand homes to procure food directly from local suppliers. This change enhanced procurement efficiency and led to notable cost savings. For instance, the price of posho, a staple food item, fell from USh. 5,800 to USh. 3,000 per kilogram under this new system.

To ensure long-term sustainability, the Budget Monitoring Unit recommended that the Ministry explore agricultural self-sufficiency by using available institutional land for food production. This strategy aimed to lessen dependency on external suppliers, reduce supply interruptions, and align with national budget cost-containment measures.

Nevertheless, challenges persist. A significant example is the Kampiringisa National Rehabilitation Centre, where about 100 acres of land previously used for food production were transferred to an investor following a presidential order. Previous allocations to different entities have already decreased the land available for internal use. Consequently, the Centre now confronts a severe food shortfall, requiring 6,000 kilograms of maize yet receiving only 1,500 kilograms from the Ministry.

### Source: Field Findings.

Lastly, 132 of the targeted 300 youth received entrepreneurial and life skills training through outreach in Mukono, Kobulin, and Mobuku, covering 44% of the goal. They were equipped with skills such as farming and craftsmanship to encourage self-reliance. However, vocational training faced constraints from insufficient funding for materials and a lack of qualified instructors, undermining effectiveness.

Efforts to build capacity among stakeholders in the Albertine region on social risk mitigation did not start due to a lack of funds.

The Ministry of Gender, Labour and Social Development (MGLSD) made significant strides in implementing social care programmes. However, challenges remained, such as ineffective enforcement of current legal frameworks, poor infrastructure, and lack of funding. To improve the impact and sustainability of support programmes for vulnerable populations, it is crucial to address these issues by strengthening enforcement, enhancing resource allocation, and promoting active community involvement.

## ii. Strengthening of the Youth Livelihood Programme

The FY 2024/25 implementation plan for the Uganda Women Entrepreneurship Programme (UWEP) and the Youth Livelihood Programme (YLP) aims to fund 1,500 women-owned and 1,086 youth enterprises nationwide, provide institutional support to Local Governments to enhance delivery, and provide technical supervision and beneficiary verification in 177 Local Governments to ensure compliance. The programme also prioritises documentation, communication, and advocacy to boost visibility and stakeholder engagement, as well as value addition training for women beneficiaries.

As of 31st December 2024, progress towards these targets indicated that only 364 businesses owned by women and 292 youth enterprises had obtained funding, with some funds arriving as late as February 2025. For instance, in Kamuli DLG, beneficiary groups were submitted in December 2024, yet no funds were released by February 2025, while in Namutumba, funds had been received in February 2025.

Furthermore, value addition training was conducted for 795 women from 60 women's groups and 497 youth from 40 youth groups across selected Local Governments, including Ntungamo, Ibanda DLG, Jinja DLG, Ntungamo MC, Rubirizi DLG, Kasese MC, and Lyantonde DLG. The underperformance against planned targets was primarily attributed to delays by Local Governments in submitting beneficiary files to MGLSD, which affected the timely processing and disbursement of funds.

# iii. Stakeholder engagement for equity and social inclusion with implementers in 32 Local Governments

Sessions were conducted in four selected Local Governments out of eight planned for the first half of the FY. These included Kassanda District, Gulu District, Gulu City, and Terego District in the West Nile Region, specifically within the subcounties of Omugo, Ayiivu, and Terego Town Council. These engagements strengthened collaboration with implementers at the local level and enhanced the integration of inclusive approaches within service delivery frameworks.

iv) Capacity building and assessments on the Human Rights-Based Approach to programming conducted in six (6) Local Governments across regions, focusing on social equity and rights inclusion



Sessions were conducted in two districts of Masaka and Lwengo, targeting key local actors. A total of 25 participants were mentored. The intervention aimed to enhance stakeholders' capacity to integrate human rights principles such as participation, accountability, non-discrimination, and equality into development planning and service delivery at the district level.

# v) Social equity and rights inclusion inspections conducted in 42 LGs in the sub-region of Karamoja, Lango, West Nile, Acholi, Central, Teso and Bukedi

Inspections were conducted in seven Local Governments of Tororo, Bukedea and Kumi in the Eastern Region; and Luwero, Wakiso, Mukono and Buikwe in the Central Region. Mentorship of 79 district officials (49 male and 30 female) was undertaken.

# vi) Capacity building of stakeholders on business and human rights conducted in 25 LGS

Seventy-two district stakeholders (48 male and 24 female) from six Local Governments were trained on social risk management in infrastructural projects. The Local Governments included Hoima, Kikuube, Buliisa, Kagadi, Kibaale and Masindi in the Albertine region.

# 6.3.3 Promote women's economic empowerment, leadership and participation in decision-making through investment in entrepreneurship programmes, business centres

The planned outputs are:

- a) Women's participation in development, capacity building on gender and equity budgeting conducted in 40 Local Governments with capacity gaps;
- b) Inspection of 21 GBV shelters on compliance with the set minimum standards conducted;
- c) 16 Days of Activism Campaign against Violence Against Women/Girls conducted; and
- d) Mobilisation of women nationwide to participate in and uptake Government programmes, including UWEP, PDM, among others, conducted.

#### Performance

The intervention performance was fair (58%). Women's empowerment was advanced through large-scale entrepreneurial training, gender-responsive budgeting, and strengthened institutional oversight, while enhancing GBV response efforts through shelter inspections and data capacity building. However, persistent challenges such as underfunded infrastructure and heavy reliance on external support highlight the need for sustainable domestic financing and stronger institutional frameworks. All the planned outputs were assessed, and below are the findings:

#### a) Women's participation in development processes increased

The period under review saw significant advancements in women's participation in

national development. A total of 1,800 women entrepreneurs from 30 Local Governments (LGs) were trained in enterprise development and execution, leading to enhanced economic participation and self-sufficiency. Likewise, 1,000 teenage mothers underwent specialised entrepreneurial training, leading them to better livelihood opportunities.

Institutional oversight was maintained through routine monitoring and support supervision of National Women Council (NWC) interventions, generating reports to inform policy and programme adjustments. Governance mechanisms were further strengthened by convening four statutory National Executive Council meetings under the NWC Act. Additionally, 30 district technical officers (18 males, 12 females) from Omoro, Gulu, and Otuke received training in Gender and Equity Budgeting (GEB), which reinforced the mainstreaming of gender-responsive planning and budgeting at the local Government level.

# b) Inspection of GBV shelters

To strengthen the GBV prevention and response framework, targeted inspections were conducted at five GBV shelters out of an annual target of 21 in the districts of Mbarara, Masaka, Kalangala, Amudat, and Terego. The exercise assessed the shelters' adherence to established minimum service delivery standards. Preliminary findings highlighted several service delivery gaps, including inadequate infrastructure and weak case follow-up mechanisms due to limited funding and occasional poor cooperation from the police. The commonly reported GBV cases across the shelters included land and property disputes, child neglect, and general domestic violence, underscoring the persistent structural and cultural challenges that survivors face.

Shelter management in Mbarara and Kamuli districts emphasised the importance of integrating GBV survivors into ongoing women's economic empowerment initiatives to support their social and economic reintegration.

One shelter coordinator in Mbarara noted:
"Many survivors leave with nowhere to go and no means
of survival. Linking them to skills training and incomegenerating programmes could transform their recovery
into long-term resilience."

These insights not only inform immediate shelter improvement priorities but also highlight the need for a holistic, multi-sectoral approach to survivor support that connects emergency response with sustainable empowerment.

The concurrently targeted capacity-building sessions were conducted for GBV focal point persons in Mayuge, Luuka, and Kamuli Districts. These trainings focused on enhancing technical competencies in utilising and managing the National Gender-Based Violence



Database (NGBVD), thereby improving the quality, accuracy, and timeliness of GBV data for informed planning and policy responses.

Despite the GBV efforts, approximately 80% of GBV interventions depended on external/private actors/funding, creating long-term sustainability and operational stability challenges. To address these concerns, MGLSD should prioritise the development of a domestic financing framework to reduce dependence on external funding sources and ensure continued support for GBV services.

#### c) 16 Days of Activism Campaign against Violence Against Women/Girls conducted

The national launch of the 16 Days of Activism Against Gender-Based Violence took place on 25th November 2024, at Hotel Africana, raising awareness and advocacy. Technical support and supervision for Gender and Equity Budgeting(GEB) implementation were provided in Kayunga, Wakiso, and Mukono, mentoring 30 district officials (18 males, 12 females). To address identified capacity gaps, GEB training was expanded to 40 Local Governments, training 60 district officials (38 males, 22 females) from six Local Governments in Northern and Western Uganda on gender-responsive budgeting practices. However, the training programme for women entrepreneurs is still pending staff recruitment for the National Secretariat for Special Interest Groups.

# 6.3.4 Support gender equality and equity-responsive budgeting in all sectors and LGs

The planned outputs for FY 2024/25 are: i) Gender and Equity Compliance Assessment Report for FY 2025/2026 for the National Budget Estimates and 20 programmes produced and three gender and equity specialised audits in selected programmes of Human Capital Development, Regional Development, and Private Sector Development conducted.

#### Performance

The intervention performance was good (76.8%). To promote inclusive development and accountability, gender and equity compliance assessments were conducted across national programmes for FY 2024/25 as planned during the first half of the FY. The Equal Opportunities Commission (EOC) assessed all 18 Programme Budget Framework Papers (PBFPs), with 16 meeting the minimum compliance requirements. Two programmes, Agro-Industrialisation and Sustainable Urbanisation and Housing, did not submit their PBFPS for assessment, affecting overall compliance rates. The national average compliance level was 59%, reflecting persistent gaps in mainstreaming gender and equity considerations across sectors.

One validation meeting reviewed three specialised gender and equity audits in the Human Capital Development, Regional Development, and Private Sector Development Programmes. The audit, alongside the Human Joint Tracking exercise on climate change commitment implementation by Local Governments and MDAs, revealed systemic inequalities and sectoral disparities.

The notable findings included pronounced regional imbalances in poverty prevalence, with the Acholi and Karamoja sub-regions ranking lowest. In addition, there was rising youth unemployment, limited inclusion of PWDs in socio-economic and political spaces, and the persistence of extreme poverty. Furthermore, inadequate coverage and financing of social protection systems emerged as a key constraint to equitable development.

## 6.4 Overall Challenges

- i.) Delayed funding: This undermined programme implementation.
- ii.) Dilapidated infrastructure and capacity gaps: The sub-programme's infrastructure is severely lacking, particularly in rehabilitation centres and GBV shelters. Many centres have not been upgraded in over a decade, resulting in degraded facilities that hinder service quality. Additionally, the shortage of qualified instructors and unfilled technical positions in the National Secretariat for Special Interest Groups has undermined programme delivery.
- iii.)Low Local Government compliance and data limitations: Local Governments frequently failed to submit required accountability documents and beneficiary files on time, stalling fund disbursement and service rollout. Moreover, limited technical capacity in data management systems affected the precision and timeliness of reporting, thereby compromising planning and monitoring.

#### 6.5 Conclusion

The overall performance of the Gender and Social Protection Sub-programme's was fair, scoring 58.6%. It achieved significant progress in empowering women, enhancing social protection mechanisms, and increasing stakeholder involvement. The high absorption rates for released funds demonstrated effective operation; however, the sub-programme did not completely achieve its planned outputs because of funding deficits, inadequate infrastructure, staffing shortages, and compliance challenges at the local level.

#### 6.6 Recommendations

- i.) Strengthen domestic financing mechanisms: MGLSD should develop a domestic financing framework to reduce overreliance on external funding, particularly for critical areas like GBV response and women's enterprise support.
- ii.) Upgrade infrastructure and fill capacity gaps: MGLSD should prioritise investment in the physical rehabilitation of social care institutions and the recruitment of essential technical staff, especially at the local level.
- iii.) Enhance Local Government compliance and data systems: MGLSD should strengthen the enforcement of reporting deadlines and accountability standards at the Local Government level and invest in digital infrastructure to improve the accuracy, timeliness, and utility of programme data for planning and evaluation.



# CHAPTER 7: POPULATION HEALTH, SAFETY AND MANAGEMENT SUB-PROGRAMME

#### 7.1 Introduction

The Population Health, Safety and Management Sub-programme contributes to objective four of the third National Development Plan (NDP III), which is to "improve population health, safety and management in Uganda". The sub-programme's 16 interventions (Annex 1) reprioritised during the mid-term review of the NDP III are implemented under various Votes, including: Ministry of Health (MoH), National Referral Hospitals, Regional Referral Hospitals (RRHs), Local Governments (LGs), Ministry of Water and Environment (MWE), National Planning Authority (NPA), Ministry of Education and Sports (MoES), Uganda Bureau of Statistics (UBOS), and Ministry of Gender, Labour and Social Development (MGLSD).

#### **Sub-programme Key Result Areas**

According to the NDP III Results Framework (Table 7.1), the following were expected to be attained in FY 2024/25.

Table 7.1: Population Health and Safety Key Result Areas FY 2024/25

Indicators	FY 2024/25
Life expectancy at birth (years)	70
Infant mortality rate/1,000	34
Maternal mortality rate/100,000	211
Neonatal mortality rate (per 1,000)	19
Total fertility rate	4.5
Under-5 mortality ratio/1,000	30
Population growth rate (percent)	2.5
Increased access to safe water supply (rural)	85
Increased access to safe water supply (urban)	100
Sanitation coverage (improved toilet)	45
Hygiene (hand washing)	50
Health insurance	25

Source: NDP III 2020/21 - 2024/25.

Semi-annual monitoring focused on 10 out of the 16 interventions, and summary performance is presented in Table 7.4.

- i) Reduce the burden of communicable diseases with a focus on high-burden diseases (malaria, HIV/AIDS, TB, neglected tropical diseases, and hepatitis), epidemic-prone diseases emphasising the Primary Health Care Approach.
- ii) Improve the functionality of the health system to deliver quality and affordable preventive, promotive, curative, and palliative health care services.
- iii) Reduce the burden of the HIV epidemic and its impact on the social development of communities, using the multi-sectoral approach.

- iv) Prevent and control non-communicable diseases (NCDs) with a specific focus on cancer, cardiovascular diseases, and trauma.
- v) Improve maternal, adolescent and child health services at all levels of care.
- vi) Increase access to sexual reproductive health and rights with a special focus on family planning services.
- vii) Increase financial risk protection for health with emphasis on implementing the National Health Insurance Scheme.
- viii) Increase access to inclusive safe water, sanitation, and hygiene with emphasis on increasing coverage of improved toilet facilities and hand-washing practices.
- ix) Improving Occupational Safety and Health (OSH) management.

#### 7.2 Financial Performance

Primary Health Care, followed by Public Health Services, dominated the allocations under the mid-term Population Health, Safety, and Management Sub-programme (Table 7.2). The largest shares were attributed to investments under the Uganda Intergovernmental Fiscal Transfers (UgIFT) Programme, enhanced salaries for health workers under Primary Health Care (PHC), investments under the Global Fund for Malaria, HIV/AIDS and TB, the Global Alliance for Vaccine Initiative (GAVI) and the Uganda COVID-19 Response and Emergency Preparedness Project (UCREPP), targeting public health interventions.

Regarding fund utilisation, District Natural Resources performed poorly, followed by Public Health Services at 18% and 50% fund absorption, respectively. The poor performance was attributed to the low absorption of external financing due to unpreparedness to implement planned works, and procurement delays. The sub-sub-programmes that performed best in fund absorption were Primary Health Care and the Directorate of Water Development, which utilised all the released funds by 31st December 2024.

Table 7.2: Performance of sub-sub-programmes in the Population Health, Safety and Management Sub-programme for FY 2024/25 as at 31st December 2024

Sub Sub-programme	Total Budget	Total Release	Total	%	%
	USh.	USh.	Expenditure USh.	Release	Spent
Primary Health Care	1,277,376,463,452	1,277,376,463,452	1,277,376,463,452	100	100
Public Health Services	1,132,324,454,010	301,401,477,914	149,669,651,877	27	50
Pharmaceutical and Medical Supplies	721,037,806,311	483,584,815,982	415,448,917,839	67	86
Directorate of Water Development	526,257,249,647	128,134,659,360	128,134,659,360	24	100
Regional Referral Hospital Services	296,562,220,315	154,736,697,489	134,349,890,895	52	87
Heart Services	147,492,018,685	25,530,071,413	22,413,930,523	17	88
District Natural Resources	136,096,873,706	34,339,339,041	6,257,364,230	25	18
Cancer Services	129,921,833,914	47,118,891,633	45,662,917,524	36	97
National Referral Hospital Services	119,206,368,636	55,043,161,280	47,916,742,219	46	87
Curative Services	97,626,160,605	48,813,080,302	47,365,467,537	50	97
Strategy, Policy and Development	87,822,484,919	27,552,460,226	16,332,630,548	31	59
Mulago Specialised	31,090,143,366	17,716,487,567	12,341,584,335	57	70



Sub Sub-programme	Total Budget USh.	Total Release USh.	Total Expenditure USh.	% Release	% Spent
Women and Neonatal Hospital Services					
Safe Blood Provision	29,066,819,587	15,035,122,674	11,445,747,842	52	76
Support Services	21,904,442,510	9,503,955,769	7,632,871,535	43	80
Provision of Specialised Mental Health Services	21,229,326,041	10,782,649,429	8,166,113,185	51	76
National HIV&AIDS Response Coordination	16,793,453,455	10,962,133,029	7,762,168,024	65	71
Community Health Management	15,452,708,460	8,357,467,116	7,117,804,633	54	85
Human Resource Management for Health	11,216,628,385	5,578,314,194	4,113,928,164	50	74
Development Planning	7,596,130,600	3,470,606,296	3,424,702,915	46	99
Virus Research	7,212,257,304	3,608,732,380	2,963,563,490	50	82
Technical Vocational Education and Training	7,002,211,760	2,801,071,886	2,138,190,865	40	76
Policy, Planning, and Support Services	5,036,122,000	1,533,673,336	1,217,539,351	30	79
Health Governance and Regulation	4,180,067,044	1,966,959,077	1,717,305,730	47	87
Labour and Employment Services	2,450,000,000	1,113,750,039	890,057,288	45	80
Population Advocacy, Family Health, and Communication	2,181,278,223	550,501,750	491,291,959	25	89
General Administration and Support Services	143,680,000	63,816,183	45,131,628	44	71
Grand Total	4,854,279,202,935	2,676,676,358,817	2,362,396,636,948	55	88

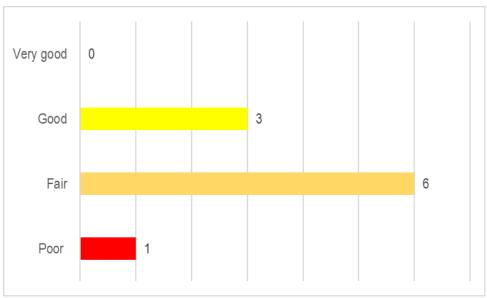
Source: Approved Estimates of Revenue and Expenditure Vol.1 & IFMS.

#### 7.3 Physical Performance

The overall performance of the Population Health Safety and Management Sub-programme was fair, achieving 60% of the targets set (Annex 6). The sub-programme recorded better in service provision anchored under the recurrent expenditure compared to the development component of the budget. This was attributed to constrained resource flows for the development budget. Consequently, the majority of entities concluded the planned procurements by 31st December 2024.

In terms of intervention performance, the majority (six) recorded fair performance, followed by the good-performing interventions. The poor performing intervention was "to increase financial risk protection for health with emphasis on implementing the national health insurance scheme" (Figure 7.1 and Table 7.4). The detailed performance by intervention and outputs is presented hereafter:

Figure 7.1: Performance of interventions in the Population Health, Safety and Management Sub-programme by 31st December 2024 (number)



Source: Field Findings.

Table 7.4: Summary performance of interventions in the Population Health, Safety and Management Sub-programme as of 31st December 2024

Intervention	Colour code	Remark
Reduce the burden of communicable diseases with a focus on high-burden diseases (malaria, HIV/AIDS, TB, neglected tropical diseases, and hepatitis), epidemic-prone diseases, emphasising the Primary Health Care Approach.		Achieved 74% of the targets.
Improve the functionality of the health system to deliver quality and affordable preventive, promotive, curative, and palliative health care services.		Achieved 58% of the targets.
Reduce the burden of the HIV epidemic and its impact on the social development of communities, using a multi-sectoral approach.		Achieved 60% of the targets.
Prevent and control non-communicable diseases (NCDs) with a specific focus on cancer, cardiovascular diseases, and trauma.		Achieved 65% of the target.
Improve maternal, adolescent, and child health services at all levels of care.		Achieved 74% of the targets.
Increase access to sexual reproductive health and rights with a special focus on family planning services.		Achieved 77% of the targets.
Promote health research, innovation, and technology uptake.		55% of the set targets.
Increase financial risk protection for health with emphasis on implementing the national health insurance scheme.		Achieved 35% of the targets.
Increase access to inclusive safe water, sanitation, and hygiene with emphasis on increasing coverage of improved toilet facilities and hand washing practices.		Achieved 52% of the targets.
Improving Occupational Safety and Health (OSH) management.		Achieved 57% of the targets.

Source: Field Findings



### 7.3.1 Improve Maternal, Adolescent, and Child Health Services at all levels of care

The intervention aims to improve Maternal and Child Health (MCH) services in Uganda. The key outcome targets in the NDPIII are: to reduce the infant mortality rate (IMR) from 41 to 34; under-five mortality rate (U5MR) from 62.2 to 30; neonatal mortality rate (per 1,000) from 27 to 13; and maternal mortality rate (MMR) from 311 to 211 by 2025. The intervention was implemented by the following votes: MoH, NRHs, RRHS, MGLSD, UBOS, and Local Governments. The planned outputs for FY 2024/25 were broadly two: adolescent health policy developed and disseminated; and the RMNCAH Sharpened Plan funded.

Under the adolescent health policy, it was planned to hold three monthly National Adolescent and School Technical Working Group meetings for coordinating and streamlining adolescent and school health services; conduct quarterly integrated Adolescent and Youth-Friendly Health Services outreach drives in 20 high-burdened districts; mentor health service providers from 10 tertiary institutions in the provision of Adolescent and Youth-Friendly Responsive services.

Under the RMNCAH Sharpened Plan funded, the following was planned: Child Health Survival (CHS) strategy and Paediatric Death Audit (PDA) guidelines finalised and disseminated; on-site mentorship and support supervision of health workers in the provision of Integrated Management of Newborn and Childhood Illnesses (IMNCI) services conducted in eight (8) health regions; quarterly technical support supervision and on-site mentorship of health workers in the provision of kangaroo mother care conducted in eight (8) health regions. Others are outpatient and inpatient services provided at Kawempe NRH. Relatedly, specialised inpatients attended to admissions, referrals, surgeries, and deliveries at Mulago Specialised Maternal and Neonatal Hospital constitutes this output.

#### **Performance**

The overall performance of the intervention was good, with 74% attainment of outputs. Institutional maternal mortality declined from 82% at the end of June 2024 to 64.6% in December 2024. The improvement in institutional mortality was mainly attributed to mothers accessing health care on time and from qualified personnel at a health facility. About 68.2% of the mothers delivered at a health facility; Kampala recorded the highest proportion (97.7%) of mothers delivering at a health facility, while the lowest (47.9%) was recorded in the South-Central Region. The institutional under-five fatality rate slightly declined from 1.3% at the end of June 2024 to 1.1% at the end of December 2024. The detailed performance by output is subsequently presented.

**RMNCAH Sharpened Plan funded:** The Child Health Survival Strategy was presented to the Senior Management Committee for approval, while the paediatric death audit guidelines were presented to the Maternal Child Health Technical Working Group for approval. On-site mentorship and support supervision of health workers in the provision of IMNCI services was conducted in three health regions.

Kawempe NRH medical services performed fairly in the provision of both inpatient and outpatient services plus diagnostics, achieving 59% of the set targets. Eighty-two percent of the planned outpatients' targets were achieved, while gynaecology emergency admissions were at 59%. Paediatric admissions were achieved at 65%, while neonatal intensive care unit admissions were achieved at 52%, among others. However, there was a drop in admissions to the gynaecological ward, and there was an increase in early neonatal deaths by 1%.

Mulago Specialised Maternal and Neonatal Hospital performed poorly at 48% achievement for inpatient targets and 45% for outpatient targets. This was attributed to inadequate staffing, with staff in post at 40.3%.

Adolescent Health Policy developed and disseminated: Five monthly National Adolescent and School Health Technical Working Group meetings for coordinating and streamlining adolescent and school health services were held. Technical support supervision and on-site mentorship of health workers in the provision of kangaroo mother care was conducted in four health regions of Acholi, Lango, Ankole, and Kigezi. This resulted in strengthened competency among health workers and enhanced maternal and neonatal outcomes. Thirty health service providers from four universities (Muni, Gulu, Kabale, Mountains of the Moon, and Mbarara) were mentored in the provision of adolescent- and youth-friendly responsive services.

Reproductive, maternal, child, and adolescent health services were strengthened with support from the Uganda COVID-19 Response Emergency Preparedness Project. Technical support supervision was conducted with targeted mentorships in the Kayunga, Greater Masaka, and Kampala Metropolitan Regions, reaching approximately 1,500 health workers. Additional technical support supervision was conducted in the regions of Lango, Bunyoro, Greater Masaka, and Teso, where 363 health workers (medical officers, midwives, nurses, and anaesthetic officers) were supported in Infection Prevention and Control (IPC), Antenatal Care (ANC), Emergency Obstetric Care (EMOC), new-born care, and anaesthesia.

The key challenge was inadequate staff at the referral hospitals, which makes service provision difficult and might result in bad outcomes. At Kawempe NRH, the nurse-to-patient ratio is 1:10–15, versus the recommended 1:1–2 in the NICU. The levels of staff specialisation do not match the expected specialised services. Mulago Specialised Maternal and Neonatal Hospital is only 40% staffed. It is recommended that MoH and MoFPED should consider funding for the recruitment of staffing for specialised services offered in the facilities of Kawempe NRH and Mulago Specialised Women and Neonatal Hospital.

7.3.2 Reduce the burden of communicable diseases with a focus on high-burden diseases (malaria, HIV/AIDS, TB, neglected tropical diseases, and hepatitis), epidemic-prone diseases, emphasising Primary Health Care Approach

The intervention aims at the reduction of mortality due to malaria, HIV/AIDS, tuberculosis, and other communicable diseases. The intervention is mainly executed through the HIV, Malaria, and Tuberculosis Programmes anchored in MoH. The outputs of the interventions are undertaken through various departments that address neglected tropical diseases (NTDs) and hepatitis, epidemic-prone diseases, and malnutrition.

The planned outputs for FY 2024/25 were broadly as follows: reduced morbidity and mortality due to HIV/AIDS, TB, malaria, and other communicable diseases; full immunisation of the target population; timely detection and control of epidemics; and control of NTDs.

#### **Performance**

The performance of the intervention was good, at 74% of the targets achieved. Communicable diseases such as malaria, HIV/AIDS, TB, NTDs, and hepatitis were controlled, and epidemic-prone diseases were effectively responded to during the first half of FY 2024/25. Specifically, the Government responded and contained the Ebola outbreak during the period under review. Surveillance and implementation of the Community Health



Extension Workers (CHEW) Strategy were still in the pilot phase with notable good results. Immunisation coverage was good, with some antigens recording more than 100% achievement. The details of performance per output are presented hereafter:

# a) Reduced morbidity and mortality due to HIV/AIDS, TB, malaria, and other communicable diseases

The output achieved 57% of its targets. Overall, there was an increase in malaria total deaths at the national level of 35% that was attributed to the outbreak of malaria in the country. Over 90% of TB cases were treated successfully, and over 97% of the people living with HIV/AIDS received ART services. Detailed performance by sub-output plans and achievement is highlighted hereafter:

### Malaria response interventions undertaken

Under this, the programme planned to conduct community dialogues, integrated management of malaria, conduct malaria mortality and clinical audits, and conduct indoor residual spraying (IRS).

As of 31st December 2024, the sub-output had achieved 35% of the annual targets set. Overall, there was a reduction in the number of malaria total deaths at the national level by 43% compared to the same period in FY 2023/24. Except for the Teso and Kigezi subregions<sup>7</sup>, all other regions recorded a decline in malaria-diagnosed deaths during the period under review compared with the same period last year. This was attributed to interventions such as indoor residual spraying in the malaria endemic districts, sleeping under the net campaigns, and other preventive programmes. In addition, seeking timely treatment from qualified personnel in health facilities also helped in averting malaria deaths over the period under review. In terms of malaria management, 95% of confirmed malaria cases received first-line antimalarial treatment as per national treatment guidelines.

MoH conducted support supervision in the Mid-North and West Nile Districts, where indoor residual spraying was being undertaken. In addition, 1,454 personnel were trained in IRS spraying in the implementing districts. MoH introduced new larviciding to Kibuku and Pallisa Districts, and evaluated previous larviciding activity and assessed the impact, effectiveness, and efficiency of larviciding concerning malaria control using active larvicide. A total of 422 (23%) health workers in both the public and private sectors were trained in the integrated management of malaria.

In terms of prevention, MoH conducted IRS in the 13 districts of West Nile and the Mid-North. A total of 917,436 houses (96% of the targeted 953,050 houses) were sprayed, protecting 2,752,308 people from malaria. This resulted in a reduction in malaria cases in the West Nile sub-region from 73,782 cases in July 2024 to 46,476 cases in December 2024. Compared with the same period last year, the cases reduced from 136,751 in December 2023 to 46,476 in December 2024, signalling that the intervention worked in reducing malaria cases.

#### TB response interventions undertaken

The planned interventions under the programme were: targeted regions in Central, Western, and Eastern districts trained in TB guidelines and management; integrated WASH and community action to stop TB interventions supported in 10 LGs; 94,000 of all forms of TB

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<sup>&</sup>lt;sup>7</sup> Kigezi saw an increase in malaria deaths from 16 deaths to 20 deaths while in Teso the deaths increased from 113 to 128.

cases notified; 95% of the contacts of TB patients started on treatment preventive therapy; and 95% of the notified TB cases treated successfully.

By 31st December 2024, over 95% of TB cases were treated successfully, and over 95% of the contacts of TB patients were started on preventive therapy treatment. A total of 142 health workers from the four border districts of Amuru, Kyotera, Busia, and Tororo were trained in TB management. They oriented district leadership and CAST TB plus focal persons in the districts of Ntoroko, Kyenjojo, Kagadi, Kibaale, Busia, Namayingo, Tororo, and Bunyangabu on integrated WASH-CAST TB plus. In addition, MoH and partners oriented TB focal persons in the districts of Kyenjojo, Kagadi, Kibale, Busia, Namayingo, and Tororo on CAST TB plus implementation.

### **HIV** response interventions undertaken

The planned interventions under the programme were 50% of staff tested and 100% who tested positive enrolled on treatment, 95% of Anti-Retroviral Treatment (ART) clients with viral suppression, 95% of PLHIV enrolled on ART, and 20 districts with high new HIV infections supervised and monitored for prevention of new infections.

As of 31st December 2024, a total of five districts with high new HIV infections were supervised and monitored, and 97% of people living with HIV/AIDS were enrolled on ART. The good performance was attributed to the recovery of lost clients who were re-enrolled. Eight regions were supervised under the HIV programme, and 20% of staff were tested for HIV.

#### b) Target population fully immunised

The sub-sub-programmes that contributed to this output were the Global Alliance for Vaccine Initiative (GAVI) and Health Sector Development Plan Support and Pharmaceutical and Medical Supplies (Immunisation Supplies) under the National Medical Stores (NMS). The analysis focused on the immunisation coverage by 31st December 2024.

As of 31st December 2024, MoH supported the procurement of all eight (8) of the GoU cofinanced vaccines during the period under review. All the Local Governments were supplied with adequate vaccines and enrolled on the Electronic Logistics Management Information System (eLMIS). In terms of routine immunisation, the country registered very good performance as 90% of children less than one year were fully immunised by 31st December 2024. Two antigens, HPVI and HPV, achieved over 100% of the targets set, while pertussis DPT-3 achieved 100% (Table 7.5). The achievements made under routine immunisation were attributed to increased routine mobilisation of people through VHT, supporting both outreach and static immunisation clinics.

In terms of the functionality of the cold chain system, 90% of the facilities reported functional refrigerators, while vaccine stock availability was reported at 100%. This increased access and availability of immunisation services. In addition, 85% of the health facilities reported providing immunisation services. There was, however, poor coverage of the new vaccines; for instance, rotavirus third dose coverage was reported at 27% and yellow fever at 74%.



Table 7.5: Selected co-financed vaccine immunisation coverage by 31st December 2024

EPI Indicator/Vaccine	Coverage by 31st December 2024
DPT-HepB-Hib 3 coverage	101%
BCG coverage	88%
Fully immunised coverage < 1 year	90%
HPV1 coverage	197%
HPV2 coverage	130%
MR 1 coverage < 1 year	120%
MR 2 coverage < 1 year	132%
OPV 3 coverage	100%
PCV 3 coverage < 1 year	100%
Functional refrigerators	90%
Rotavirus 3	27%
Yellow Fever	74%

Source: MoH-UNEPI.

## c) Epidemics detected in a timely manner

Under the output, it was planned to timeously control epidemics and construct port health facilities, disseminate and train the 2 Public Health Emergencies (PHEs) policies, plans, and guidelines in 20 districts, and support supervisions and mentorships on IDSR, prevention, and control of Public Health Emergencies (PHEs) in 25 districts.

By 31st December 2024, MoH detected and responded to 67% of epidemics reported in a timely manner. Several epidemic diseases, such as anthrax, Crimean Congo haemorrhagic fever (CCHF), cholera, and food poisoning, were detected and controlled in several districts, including Adjumani, landslides in Kampala, and Zika virus in Arua City, among others.

Anthrax, floods, landslides, and the Mpox virus had the highest number of fatalities reported during the period under review. No fatalities were recorded under cholera and yellow fever virus; this points to the timely response of MoH and partners towards these epidemics (Table 7.6).

Table 7.6 Response to epidemic diseases by 31st December 2024

Epidemic	Number of districts affected	Number reported	Cases confirmed	Deaths	Duration (days)
Anthrax (human)	10	197	44	10	169
Cholera	1	7	2	0	35
Crimean Congo haemorrhagic fever (CCHF)	6	18	5	1	74
Floods	9	10125	0	31	25
Food poisoning	7	148	27	7	188
Landslide	1	328	328	35	32
Measles	25	445	109	6	156
Yellow fever virus	10	78	22	0	106

Epidemic	Number of districts affected	Number reported	Cases confirmed	Deaths	Duration (days)	
Monkeypox virus (MPox)	93	0	4342	31	ongoing	
Rabies	6	39	0	4		64

Source: MoH

No port health facility was established during the period under review. The epidemic response was further strengthened by the Uganda COVID-19 Response and Preparedness Project. MoH, with support from UCREPP, undertook the construction of the laboratory at Fort Portal and Lira Regional Referral Hospitals. The works at Fort Portal were at 90%, while at Lira they were completed and handed over. The works at Fort Portal had site constraints that necessitated design reviews to increase the floor area by 200 square metres and construct a retaining wall. This attracted a cost variation of 66.3% above the allowable variation, necessitating an addendum to the contract.

The project also supported various infrastructure developments at different health facilities. For instance, at Kisoro General Hospital, construction of the isolation unit, theatre, and OPD was ongoing at 70%, 95%, and 80% progress, respectively. At Kyangwali HCIV in Kikuube, the HDU was at 70% completion, OPD at 65%, and the general ward was at 60% completion, while construction of the ICU at Arua was 880% and Kabale 65%, while one at Hoima had been completed awaiting furnishing.

The project supported upgrading temporary health centres in refugee settlements into permanent, fully functional facilities, and their progress varied, averaging at 95% physical progress. Civil works at I Diwa HC III, Luriuu HC III, and Belle HC III had been completed while civil works at Koro, Luzira Bolomii, Igarama, Kikururu, and Uriama ranged between 90% and 95% physical progress.









Clockwise: ICU at Arua RRH; maternity ward at Koro HC III; call and dispatch at Mbale RRH; and maternity ward at Agije HCII.

Developed, disseminated, and trained the 2 Public Health Emergencies (PHEs) policies, plans, and guidelines in 20 districts. MoH developed and updated the National Cholera Technical Guidelines, the National Action Plan for Health Security II (NAPHS II 2024/25–2028/29), Early After-action Reviews (EAR) guidelines, the REOC Mpox Operational Plan, and a SIMEX toolkit for Marburg. MoH also disseminated CBS guidelines to 11 districts of Namisindwa, Kyotera, Alebtong, Amolatar, Apac, Dokolo, Kole, Kwania, Lira City, Lira District, Otuke, and Oyam. Twelve weekly bulletins were published and shared with all surveillance stakeholders based on the thresholds and alerts for timely action.

Support supervisions and mentorships on IDSR, prevention, and control of PHEs in 25 districts. Support supervision and mentorship conducted in 15 Local Governments for weekly surveillance reporting and mTrac use. These included Apac, Arua City, Buikwe, Buliisa, Hoima, Kampala, Kisoro, Mukono, Nakasongola, Namayingo, Sheema, Rubanda, Rukungiri, Rwampara, and Wakiso Districts. Support supervision for District One Health Teams (DOHTs) was conducted in six high-risk districts of Amudat, Kaberamaido, Soroti, Ntungamo, Kazo, and Ntoroko. Four districts were supported to prevent and control zoonotic diseases; these were Buhweju, Bushenyi, Kasese, and Kanungu.

### d) Neglected tropical diseases (NTDs) controlled

Under the output, MoH planned to provide technical support supervision on MDA, NTD management, and HSS interventions conducted; mass drug administration (MDA) and TT surgeries conducted in 24 district Local Governments.

By 31st December 2024, MoH, with support from partners, conducted health facility assessments for hydroceles and lymphedema management in nine districts<sup>8</sup> in the Teso subregion. They conducted support supervision of trachoma surgeries in Kaliro District, Obongi District, Terego District, Arua City, Adjumani Refugee Settlement, Rhino Camp Refugee Settlement, and Madi-Okollo District. In addition, MoH conducted an annual Trachoma Trichiasis (TT) Surgeon's Feedback Meeting with 45 ophthalmic clinical officers/trachoma surgeons and neglected tropical diseases focal persons.

Mass Drug Administration (MDA) and TT surgeries conducted in 24 district Local Governments. Under technical support supervision on mass drug administration (MDA), NTD management, and HSS interventions, MoH conducted schistosomiasis MDA supervision in two endemic districts and carried out trachoma MDA in Moroto and Nabilatuk Districts. Furthermore, MoH conducted Human African Trypanosomiasis (HAT) surveillance in 53 health facilities in the West Nile Region and community active surveillance in Yumbe and Maracha Districts. They also conducted MDA for onchocerciasis treatment with ivermectin in Kitgum, Moyo, and Amuru, benefitting 584,858 people.

### Challenges

- i) Inadequate local prioritisation of epidemic response and NTDs. Most of the interventions are funded by development partners, which poses sustainability risks, especially if development partners choose to pull out.
- ii) Persistent cost and time overruns across projects: These attributed to poor planning, leading to design variations, as in the case under UCREPP civil works.

#### Recommendations:

- i) There is a need for MoFPED and MoH to scale up Government funding towards activities for the management of epidemics and neglected tropical diseases to avoid shocks in the event that external support is withdrawn, and ensure sustainability.
- ii) The MoH should strengthen holistic planning for infrastructure development. This should include topological and geotechnical investigations before the commencement of works to avoid unnecessary variations that delay project implementation.

7.3.3 Prevent and control non-communicable diseases (NCDs) with a specific focus on cancer, cardiovascular diseases, and trauma

The intervention contributed to four outcome indicators in NDP III, namely: To reduce NCD rates with cancer by 1.5; to reduce NCD rates with hypertension by 3/1,000; to reduce NCD rates with diabetes by 2.3; and to reduce alcohol abuse by 5.4. This intervention is implemented by the Uganda Cancer Institute (UCI), the Uganda Heart Institute (UHI), and

<sup>8</sup> Soroti, Kalaki, Kaberamaido, Kapelebyong, Bukedea, Kumi, Ngora, Serere Katakwi districts and Soroti city



Naguru National Referral Hospital for responses to cancer, cardiovascular diseases, and trauma, respectively.

During FY 2024/25, the planned outputs included: i) Regional satellite dialysis units established in selected regional hospitals; ii) Centre of Excellence (heart, cancer) established, including Centres of Excellence in Biomedical Sciences, and radiotherapy bunkers requirements delivered; iii) Auxiliary building requirements met; iv) Medical equipment maintained; v) Regional Oncology Centres established in Mbarara and Arua; vi) Cancer services provided; vii) Centres of Excellence in heart established through the provision of heart services and infrastructure; viii) Centres of excellence established through equipping the UHI; ix) Health research and innovation promoted; x) Super-specialised human resources trained and recruited; and xi) Naguru National Referral Hospital transformed into a National Hospital Referral for trauma.

#### Performance

The performance of the intervention for preventing and controlling NCDs with a specific focus on cancer, cardiovascular diseases, and trauma was fair (65%). The services provision performed better than the development component, which was affected by delayed procurements, including the recruitment of human resources. Most (90%) of the development outputs remained incomplete due to procurement delays, coupled with late receipt of funds.

The major works at Naguru, the Uganda Heart Institute, and the Uganda Cancer Institute remained at a slow pace. Financing from the Chinese Government for upgrading Naguru into the National Trauma Centre had not yet been secured. *Detailed performance is presented hereafter*.

Centres for Cancer, Cardiovascular Diseases and Trauma equipped through the retooling projects: Two (2) portable ultrasound scans, 4 reporting workstation monitors, 2 pick-up trucks and 1 ambulance, assorted theatre equipment were procured (2 instrument racks, 1 autoclave tabletop, 1 operating table, 4 instrument trolley, 2 nasal pharyngeal scope, 4 operating loops, 2 laryngoscope set) for the Uganda Cancer Institute.

Most (98%) of the planned procurements under the retooling budget were incomplete by 31st December 2024.

Centre of Excellence (heart, cancer) established, including Centres of Excellence in Biomedical Sciences. The African Development Bank (ADB)-funded UCI Project achieved 90% of its multi-year targets. However, the overall project remained incomplete, awaiting finalisation of the project restructuring and additional financing modalities to complete the pending works and other auxiliary works.

The contractor, however, completed the work intended to prepare level two for the installation of the MRI. The procurement of the MRI equipment was ongoing following the Solicitor General's (SG) approval. The approval for the procurement of laboratory furniture was still pending. Some ICT equipment that had been delivered remained in storage, awaiting completion of works, to start installation and commissioning.



Gate structure and ancillary structure at Gulu Regional Cancer Centre

Radiotherapy bunkers requirements delivered: All equipment was delivered, installed, and commissioned. These comprised linear accelerators (2), brachy-therapy machines (2), and a CT simulator, among others. All radiotherapy bunkers were fully equipped and functional.

Auxiliary building requirements met: The installation of equipment for conventional Nuclear Medicine, such as Single Photon Emission Computerized Tomography (SPECT-CT) scan, Hot Labs, Treatment Holding Unit, was substantially complete.

Housing for PET-CT, cyclotron: The detailed designs of the following were completed: Cold Kit Production Unit, Treatment Holding Unit, including the Building Engineering File – Specifications and Scope of Turnkey Work, Presidential Suites, interventional radiology housing, and endoscopy housing. Other related activities for the establishment of the new Positron Emission Tomography (PET) Centre, also known as the Molecular Therapy Centre, for advanced cancer diagnosis and treatment, were at different stages of completion.

Relocation of the water tanks that are currently serving Mulago National Referral Hospital was estimated at 20%, with the construction of the new tank house estimated at 45%. It is worth noting that the establishment of the PET Centre requires USD 100 million, of which only USD 20 million has been committed from GoU. It is, therefore, critical that other funding modalities, including concessional financing, should be pursued to ensure that the envisaged project objectives, including the reduction of travel abroad in the quest for highend cancer treatment, are achieved. This has additional benefits such as contribution to Uganda's revenue and Gross Domestic Product (GDP).

**Medical equipment maintained**: This was achieved, including the maintenance and repair of the brachytherapy machine at Upper Radiology, oxygen concentrator, suction machine, autoclave, CT scan machine, and digital X-ray, among others.

Regional Oncology Centres were established in Mbale, Mbarara, Arua, and Gulu: Only the Regional Cancer Centre in Gulu was operational, while the rest remained at the preparatory activities phase. The functionality of the Regional Cancer Centre in Gulu contributed to reduced congestion at the Uganda Cancer Institute headquarters. In as much as the Gulu regional centre was offering services to the patients, the service provision was suboptimal due to some faulty diagnostic equipment, such as the CT scan and its ancillary uninterrupted power supply (UPS).

Despite the provision of services, the newly established Regional Cancer Centre has some ongoing civil works. Construction of the wall fence was substantially completed, while the gate structure installation works, including the ancillary gate house, were still ongoing.

Cancer services provided: At the Uganda Cancer Institute headquarters in Kampala, a total of 2,834 treatment sessions were conducted on the LINAC, exceeding the annual target of



2,500. A total of 583 new patients were attended to, surpassing the annual target of 500 by 31st December 2024. Additionally, 509 on-treatment patients were reviewed, exceeding the targeted number of 500. Other service areas where the targets were surpassed included: 545 patients in the Haematology Clinic; 1,873 patients in the Breast and Lung Clinic; 1,225 patients in the Prostate and Sarcomas Clinic; 262 in the Kaposi Sarcoma Clinic; 623 patients in the ENT Clinic; and 2,829 patients in the General Clinic.

At the Gulu Regional Cancer Centre, a total of 201 outpatients were attended to, while 526 out of the targeted 3,108 were managed. However, the regional centre's performance is suboptimal, as some services, such as radiotherapy treatment, are not yet available. Other satellite centres, like Arua, Mbarara, Mbale, and Jinja, offered some services, including basic screening.

Centres of Excellence established through equipping the UHI: By 31st December 2024, no equipment had been procured and installed in the period under review. This was attributed to late and inadequate releases of funds under the retooling budget. In quarter one, no funds were released while those that were released in quarter two were inadequate to undertake procurement of the planned equipment. It was, however, noted that the institute installed the catheterisation equipment procured using funds for FY 2023/24.

Health research and innovation promoted: This output was achieved at 65% of the half-year targets, with 10 research proposals being developed by UHI staff. Nine research publications for research done in collaboration with external partners were completed. Nine disease registers have been developed. Adult cardiology now has a disease register for the congenital heart failure registry, the Truncus Arteriosus children's attendance UHI registry, and the perioperative research registry. No research proposals under GoU funding were approved and facilitated due to the high costs involved. There is no research agenda due to the absence of funds for research and development.

Super-specialised human resources trained and recruited: The institute did not receive additional wages to recruit new staff; however, current staff were redesignated and promoted as follows: Twenty-six staff were appointed to new positions on promotion, 80 staff appointed on transfer to new positions, while seven staff were redesignated according to the new structure. However, there continue to be issues of variation in salaries between the recruits and the old staff who have been doing the same work but were appointed under different service regimes.

Only 28% (392) positions are filled, leaving out 1092 vacancies. This constrains service delivery as staff in critical care work for 12-hour shifts instead of 8 hours, and this compromises the quality of services provided due to staff burnout. A total of 113 staff were confirmed in their new positions after completing their probation. In terms of training, 17 staff were supported for long-term training and 19 staff for fellowship at UHI. A total of 298 students, both national and international, completed their cardiovascular and relevant medical personnel training at UHI.

Cardiovascular services at UHI enhanced; a national cardiovascular disease prevention programme undertaken: This was achieved at 89% of the half-year targets. Eight out of 10 television<sup>9</sup> talk shows on cardiovascular diseases were conducted, and 17 out of 20 radio talk

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<sup>&</sup>lt;sup>9</sup> TV and radio talk shows on cardiovascular disease were conducted on UBC TV, NTV, and Star TV.

shows<sup>10</sup> were conducted, while UHI carried out eight support supervision visits in eight regional referral hospitals. UHI also participated in six health camps. Five newspaper publications on cardiovascular disease were carried out.

Number of support supervision visits to RRHs carried out, and visits to schools, training institutions, and workplaces conducted: Support supervision was done at 100% at different RRHs, including Mbarara, Mbale, Gulu, Mubende, Lira, and Hoima RRHs. Schools and institutes visited include the Mulago School of the Deaf in Kampala, Pioneer P/S in Soroti, Hoima Public P/S in Hoima, Mary's P/S, Mubende, and the Nursing Department at Mbarara University. Lira was missing because the visits were conducted during school holidays.

Health camps participated in by UHI: These were carried out at Lira, Hoima, Mbale, and Gulu RRHs. The other health camps included Lyantonde and Namulonge Community Health Camps (CHP), supported by the Rotary Club. Health camps were also conducted in Kiwenda, Gayaza, Kasangati, Mukono, Kisaasi, and Ssemuto (CHPs) in celebration of the President's 80th birthday.

Functionality of the electronic medical and patient records system: The system has been installed at 56%. This indicated that the current system cannot be rolled out to other departments in its current state due to several challenges. Additionally, only 18/32 modules were usable. The HMIS is obsolete. The Consultant recommended a system upgrade which will include the following: technical upgrades, vendor support, user training, and documentation.

Cardiovascular services at UHI, and outpatient services enhanced: The institute attended to 14,339 OPD attendances, scoring a 57% achievement on the annual target and a 115% on the half-year target. Twenty-six percent of those visits were by new patients, which has been attributed to the growing awareness of the public about heart disease, while 74% were reattendances. Eighty-three percent of the clients were adults, while 17% were children.

**Inpatient services:** Three hundred seventeen (317) out of 500 HDU admissions were attended to because no procedures were done during installation of the new catheterisation lab, which was decommissioned on 24th September 2024 and completed on 14th November 2024, and this affected HDU outputs. Adult open-heart surgeries and paediatric closed-heart surgeries were done at 84%, and paediatric open-heart surgeries and adult closed surgeries were done at 100%.

Construct state-of-the-art UHI headquarters: The civil works contract was signed on 9th December 2024, and works were scheduled to commence on 6th January 2025. NWSC extended water supply to the site from the Naguru Hill reservoir and laid the pipe work for water supply up to the site, awaiting connection to the Muyenga Tank Hill source. To expand regional access, land has been provided at Mbarara, Hoima, Gulu, Jinja and Lira Regions for rollout.

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<sup>&</sup>lt;sup>10</sup> Radio talk shows were conducted on UBC Radio, Prime Radio and Radio Maria.



Naguru National Referral Hospital transformed into a National Hospital Referral for Trauma: This was not achieved. The preparatory processes remained at the initial stages without clear timelines for transforming this hospital into a National Trauma Centre with support from China. There was no evidence of any financial commitment from GoU towards the transformation process.

The hospital, however, served 31,491 outpatients, 5,226 inpatients, 6,725 ANC clients, 2,207 family planning clients, and 1,003 Adolescent and Reproductive Health Services clients, and 2,007 trauma and emergency services were provided. Furthermore, the hospital conducted 39,398 laboratory tests, 1,251 X-rays, 682 blood transfusions, and 3,724 operations, thus achieving a 401.1% bed occupancy rate, with an average length of stay of 2 days. A total of 17,874 patients attended the specialised clinics.

The key challenge was inadequate funding: The budget was inadequate for key activities, for example, research, super-specialised training and outreach activities, especially the promotion and preventive actions for cardiovascular diseases. It is recommended that MoFPED prioritise funding for specialised services, especially for NCDs.

# 7.3.4 Improve the functionality of the health system to deliver quality and affordable preventive, promotive, curative, and palliative health care services

This intervention aims at improving the functionality of the health systems by removing bottlenecks to health service delivery through recruitment of health workers, procurement of medicines, construction of staff accommodation, increasing geographical coverage and equipping of health facilities, among others.

These were implemented by MoH, the Health Service Commission (HSC), the National Medical Stores (NMS), Uganda Investment Authority (UIA), Uganda Blood Transfusion Service (UBTS), National Referral Hospitals (NRHs), RRHs, LGs, professional councils, the Ministry of Public Service (MoPS), and the National Drug Authority (NDA), among others.

The planned outputs included: Essential medicines and health supplies procured, warehoused, and distributed; NMS retooled; Intensive Care Units (ICUs) at all Regional Referral Hospitals (RRHs) operationalised; hospitals and HCs rehabilitated/expanded; blood banks at selected Regional Referral Hospitals constructed; human resources for health recruited; the health workforce restructured; emergency medical services provided; blood transfusion services provided.

#### Performance

The performance of the intervention was fair, with 58% of the targets achieved. The fair performance was attributed to rolled-over projects, as the majority (90%) of the planned outputs for FY 2024/25 remained at initial stages of implementation. The details of the intervention performance by output are discussed hereafter.

**Medicines and health supplies:** The NMS procured, warehoused and distributed medicines and essential health supplies to the health facilities countrywide. Overall availability of essential medicines and health supplies, including 41 tracer medicines, was estimated at 56%. There was a marked improvement in delivery of medicines following a deliberate effort by

MoFPED to release the operational funds to NMS for distribution of the medicines to facilities in a timely manner.

Intensive Care Units (ICUs) and Neonatal Intensive Care Units (NICUs) at selected Regional Referral Hospitals (RRHs) renovated, constructed, or remodelled: The contracts were signed on 28th October 2022 for a period of 15 months. The contract sum for all the facilities is USD 6,933,050. The works at Arua and Kabale RRHs were contracted to M/s Haso Engineers Company Limited at a sum of USD 2,202,485 and USD 2,385,047, respectively, while M/s Excel Construction Limited undertook the works at Hoima RRH, at a contract sum of USD 2,385,047. The construction and remodelling of ICUs at Arua, Hoima, and Kabale Hospitals with support from the UCREPP Project was still ongoing but behind schedule as of 31st December 2024.

The physical progress varied at the three ICU sites: Kabale ICU was at 75%, against the target of 100%; Hoima ICU was at 65%, against the target of 100%; while Arua is at 70%, against the target of 100%.





L-R: ICU at Kabale Regional Referral Hospital (RRH); and the Neonatal Intensive Care Unit at Mbarara RRH under construction.

**National and Regional Referral Hospitals retooled to support service provision:** The majority (90%) of the facilities monitored were still under procurement for medical equipment, furniture, and ICT equipment. The detail of procurement is highlighted in Table 7.7. The performance of the hospitals is highlighted in Table 7.9.

Table 7.7: Performance of Retooling Project at selected NRHs and RRHs by 31st December 2024

Facilities	Total cost USh. (bn)	Planned Outputs	Status
Butabika NMRH	1.873	Supply and delivery of UPSs and printers.  Procurement of computers, supply, delivery, and delivery of two ACs, generator.	The digital X-ray, generator, ACs were delivered and installed. Other equipment was not yet delivered.
		Procurement of an ambulance and supply, delivery of a digital X-ray machine.	
Kiruddu NRH	1.377	Construction of a biomedical store.  Bills of Quantities and the requisitions about	Achieved except for medical equipment which was partially delivered.



Facilities	Total cost USh. (bn)	Planned Outputs	Status
	· · · · · ·	renovation of ward on Level 7.	
		Payment of retention for the ICU expansion and solar installation.	
		Procurement of medical equipment.	
Gulu RRH	0.108	Spare parts for assorted medical equipment, and extinguishers procured.	Procurement was at the award stage.
Lira RRH	0.108	Procurement of medical equipment.	Not achieved.
Mbale RRH	0.109	Procurement of physiotherapy lumbar traction heads and neurosurgery equipment	One piece of equipment for physiotherapy was pending delivery.
Mbarara RRH	0.108	Procurement of assorted medical equipment.	Under procurement.
Hoima	0.108	Procurement of assorted medical equipment and furniture.	The benches were delivered, equipment was pending.
Masaka RRH	0.108	Assorted medical equipment and furniture procured; minor renovation works for male and female medical surgical wards; minor renovations undertaken at patients kitchen, paediatric ward, oxygen plant, and hospital stores.	Equipment is still under procurement. The renovation works, however, were substantially complete.
Kabale RRH	0.108	Assorted medical equipment procured.	Equipment is still under procurement.

Source: Field Findings.





L-R: Newly installed digital X-ray machine at Butabika NMRH; and completed and fully functional oxygen plant installed at Fort Portal RRH.

**Blood banks at selected RRHs constructed and equipped:** The physical progress was at 99% for Hoima, Soroti and Arua. Equipping the facilities, however, averaged 75%. This intervention aimed to support the referral system and improve blood availability in the three regions. To support effective operationalisation of the facilities, MoFPED provided supplementary funding to the Uganda Blood Transfusion Service (UBTS) to recruit staff for the blood banks in FY 2024/25.





L-R: Soroti Blood Bank; Arua Blood Bank at substantial completion.





L-R: Hoima Blood bank; Selected blood donation equipment at Hoima Regional Blood Bank.

**Blood and blood products collected and issued:** UBTS collected 190,077 units (91%) of blood, against a target of 210,000 units of blood. UBTS issued 175,023 units of safe blood for the management of patients, against the target of 189,000; this fulfilled 68% of the blood orders from the transfusing health facilities. Blood availability was at 73% nationally during the period under review.

The main reasons for transfusions are due to severe malaria (28%), down from 35% as of June 2024; iron deficiency anaemia at 20%; sickle cell anaemia at 11%; obstetric at 9%; and cancers at 2%, among others. The UBTS efforts, however, were not satisfactory, as the stockout of blood and blood products persisted at 27% of the blood-transfusing facilities, leading to undesirable outcomes. Over-reliance on students affects blood availability, especially during holidays. UBTS undertook quarterly monitoring activities in all eight (8) regional blood banks. One hundred (100) staff were oriented and mentored in quality systems and the appropriate use of blood.

The blood collection activities were, among other reasons, affected by the long holidays and the festive season, which caused a drop in blood collection in December 2024. The advent of monkeypox, which discouraged people from gathering, and the rainy season, caused some blood collection sessions to be cancelled. In addition, the lack of incentives to blood donors, coupled with the cultural male circumcision in Bugisu and Sebei sub-regions, affected the blood supply in December 2024.

Human resources recruited to fill vacant posts: Under HSC, there were plans to recruit 842 health workers by 31st December 2024, but only recruited 679 (80%) for health institutions under the jurisdiction of the Commission and handled 96% of human resource decisions for health. The commission also carried out support supervision of 60 DLGs, six



cities, and one RRH. The support provided was on performance management, rewards and sanctions, management of study leave, and recruitment of health workers.

Technical support and guidance on recruitment were offered to eight DSCs, including Kamwenge, Kyenjojo, Pallisa, Busia, Rwampara, Wakiso, Lyantonde, and Namayingo. Kamwenge DLG was supported in the recruitment of an Assistant District Health Officer (ADHO).

**Health workforce restructured:** The process to restructure the health workforce was completed, and there is now a new structure for all levels of care from the decentralised level to the super-specialised health institutions. So far, the filled human resource staffing under the new structure is at 25% in 90% of RRHs. The implementation of the new structure will be fully implemented with the availability of the wage, especially for the cadres introduced in the new structure.

Community Health Workforce established: Under this, 2,894 were oriented against the target of 1,250 Community Health Workers (CHWs) on the electronic Community Health Information System (eCHIS). The system is to improve community health reporting by CHWs who were onboarded, in addition to serving as a job aid for the delivery of community health services. MoH also carried out rapid assessment and mentorship on Occupational Safety and Health (OSH) practices in seven RRHs of Jinja, Mbale, Soroti, Lira, Gulu, Arua, and Kayunga.

**Nationally coordinated ambulance services in place:** For the period under review, 250 road ambulance vehicles and 14 boat ambulances were allocated fuel to improve pre-hospital emergency care and referral services. The National Emergency Medical Services (EMS) teams responded to medical emergencies during national events, for example, Independence Day celebrations in Busia. MoH also procured an automatic power inverter and an upgrade of the OBD scan tool software for the in-house ambulance garage.

In addition, 255 road ambulance vehicles and 14 boat ambulances were serviced and maintained. All ambulances, both road and water, were disinfected and washed to improve the quality of care. This included the purchase of docking ropes for boat ambulances, car carrier services for ambulances, operational imprest for ambulances, purchasing tyres and batteries, and sirens, among others. The challenge remains with the absence of emergency care providers, such as paramedics, EMTs, dispatchers, emergency nurses, and emergency physicians, in hospitals and districts across the country. This poses a substantial barrier to the provision of efficient emergency medical services.

Emergency medical services' critical cadre recruited and trained: Capacity building was conducted for 21 emergency care providers in the Acholi sub-region, and these were trained in Basic Emergency Care (BEC). Fifteen were trained in advanced life support (ALS) and six in basic life support (BLS). The trainees included nurses, clinical officers, and medical officers from RRHs, GHs, and HC IVs. In addition, 60 emergency workers in the Lango sub-region from RRH, GHs, and HCIVs were trained in basic emergency care (BEC) and data management. One technical support supervision and mentorship visit was conducted to assess

the functionality and challenges of the ambulance system during response to emergency medical cases.

A laboratory quality management system is in place: The National Microbiology Reference Laboratory (NMRL) responded to the suspected cholera outbreak in three districts of Kiryandongo, Namayingo, and Nakivale Refugee Settlement. A total of 20 suspected cases were reported, and samples were collected and transported to NMRL for testing. None of the suspected cases were confirmed as cholera. In addition, the National Health Laboratories and Diagnostic Services (NHDLS) supported the management of the Mpox outbreak in the country. A total of 2,151 lab tests were performed, with the Central Emergency Response and Surveillance Laboratory (CERSL) performing the highest number of tests. The UVRI Lab performed 623 tests, and the Bwera Mobile Lab performed 225 tests. At least 23% of the samples tested returned with MPox-positive results. The system was operational.

Client satisfaction surveys undertaken: The development of the Client Satisfaction and Feedback Initiative (ROSAF) Implementation Guidelines (2024/25 FY) was completed and launched by MoH. The client satisfaction survey for the Busoga and Tooro sub-regions was conducted in six districts and two cities. Membership for hospital boards was reviewed and updated; this constituted all RRH boards apart from Moroto RRH. A client satisfaction survey was also conducted in selected facilities (HCs III and IV) of all districts in the Karamoja, Lango, West Nile, Ankole, Bunyoro, Tooro, and Buganda Regions.

**UgiFT facilities constructed (upgrade HCIIs to IIIs).** Out of the 373 facilities,316 (84%) were completed by 31st December 2024, while 57 (16%) were still under construction. The completed facilities that were in use yielded a couple of benefits, including:

- i). Reduced distance to health facilities.
- ii). Ability to deliver mothers and offer other primary health care services.
- iii). Increased access to adolescent-related services, including family planning.
- iv). Improved availability of health workers for the facilities that had staff accommodation.

Conversely, those under construction varied in performance. Construction of some facilities was ongoing or substantially complete, while others had stalled.



Substantially completed General maternity ward at Tombwe HCIII

In Bundibugyo District, construction of Buhanda HC III was ongoing, averaging at 65% physical progress, Mirambi at 95%, Tombwe at 96%, Bundi-Mulangya at 95%, Busunga at 95%, while Works at Kyondo HC III had stalled.



In Kabarole District, Kichwamba, Iruhuura, Kidubuli, Kiko HC IIIs were all substantially complete but not in use.

Several facilities remained underutilised mainly because the equipment was still under procurement, while others had stalled. For example, Nyabuswa HC III in Kabarole District was procuring a new contractor to complete the works. It should be noted that even the staff house at the same facility was completed by another contractor after the first one abandoned the site. The sites where the procurement of equipment was still ongoing included Kiko, Kidubuli, and Nyantabooma HCIII in Kabarole District.

Some health facilities lacked staff houses, especially those implemented during FY 2018/19, while others were completed and awaited commissioning. In some health facilities which had staff houses, there were cases where houses lacked the attendant VIP latrines even when there were no waterborne toilets, as was the case with Nyakitoli HC III in Kabarole District.

In addition, some facilities lacked any source of energy to support night service delivery. For instance, Kicwamba HC III in Kabarole District lacked an electricity connection and recorded several snags. These included poorly installed/broken sinks, and idle equipment.

# **Equipping of the health centres**

As part of the operationalisation of the health centres, the project planned to equip all the newly constructed health centres with cold chain equipment, as well as laboratory and maternity equipment, and to upgrade the Health Centre III drug kit. It is important to note, however, that for the FY 2018/19 facilities, equipment was not planned under the UgIFT Programme as it was supposed to be provided under the Uganda Reproductive, Maternal and Child Health Services Improvement Project (URMCHIP).

Of the 316 completed health centres, 316 (100%) reported having received assorted equipment, including cold chain equipment, maternity equipment, and laboratory equipment.

Although the delivery performance was good, it was observed that in some instances, equipment was delivered but not installed due to incomplete civil works. For instance. equipment for Kituule HC III and Nyabuswa HC III remained in Kabarole District store, awaiting completion of the civil works. In other instances, the equipment was delivered,



Delivery bed and other equipment at Busunga HC III, Bundibugyo District.

installed but not in use, awaiting commissioning.

There were also cases of substandard equipment, some of which were broken even before use, as was the case with Tombwe HC III in Bundibugyo District.





Some of the broken furniture delivered to Tombwe HC III, Bubandi S/C, Bubandi Parish.

# Staff for the 250 upgraded health centres recruited and attendant increase in non-wage completed

The project further planned to fund the recruitment of additional health workers for the least-staffed Local Governments, as well as the additional 10<sup>11</sup> staff required to upgrade a HC II to HC III and staff the transitioned 15 refugee-serving health centres with 19 health workers each. The allocations in the Medium-Term Plan are meant to cover the recruitment.

A total of USh. 30.9 billion was provided in FY 2024/25 to recruit staff for upgraded health facilities and USh. 5.9 billion to recruit staff for 20 transitioned health facilities in refugee-hosting districts. By 31st December 2024, the recruitment had not been completed, which will result in unspent wage as of 30th June 2025.

In addition, the GoU provided 15.7 billion in FY 2024/25 for PHC non-wage (including result-based financing and transitioned facilities) for upgraded and existing health facilities in FY 2024/25. A total of USh. 33.5 billion was provided in FY 2024/25 to National Medical Stores (NMS) for essential medicines and health supplies to new and existing health facilities. By 31st December 2024, the NMS was delivering the cycles for the upgraded HC III facilities. In addition, all the monitored health facilities were receiving the enhanced non-wage in line with the upgraded status of HC III.

# 7.3.5 Increase financial risk protection for health with emphasis on implementing the National Health Insurance Scheme

This involves interventions targeting the reduction of the burden of out-of-pocket health expenditure from the current 38%. The intervention is mainly implemented by the MoH.

#### Performance

By 31st December 2024, the performance of the intervention was poor at 39%. All the planned outputs did not point towards increasing financial risk protection for health. The MoH, however, hosted a dialogue on advocacy for the National Health Insurance Scheme (NHIS). The National Health Insurance Bill remained in draft form, with the MoH creating awareness with various stakeholders, especially Members of Parliament (MPs), to support the NHIs when it is laid before Parliament.

<sup>&</sup>lt;sup>11</sup> When the project started in 2017, MoH Guidelines required that a fully operational Health Centre III should have 19 staff, including a Senior Clinical Officer, a Clinical Officer, a Laboratory Assistant, a Laboratory Technician, a Nursing Officer, Health Information Assistants, Porters and Askaris. Health Centre IIs were expected to have 9 staff. The requirement has since changed to 55 staff for Health Centre IIIs.



# 7.3.6 Reduce the burden of the HIV epidemic and its impact on the sociodevelopment of communities, using the multi-sectoral approach

The intervention aims at reducing the burden of the HIV epidemic and its social and economic impact on the population. The overarching goal of the global AIDS response is to reduce the number of people newly infected to less than 200,000 by 2030. The Uganda Aids Commission (UAC) implemented the intervention. The planned outputs and achievements as of 31st December 2024 are presented hereafter.

#### Performance

The performance of the intervention was good, with 60% attainment of the set targets. For instance, there was an increase in patients starting Antiretroviral Therapy (ART) at 59,095, against a target of 50,000; the overall coverage of viral load testing amongst People Living with Human Immunodeficiency Virus (HIV) (PLHIVs) was at 96%, and the suppression rate was at 96%. The active patients achieving viral load suppression coverage were 2,400,987, against a target of three million patients active on ART in FY 2024/25. The details of the performance of the planned outputs are discussed hereafter:

Communities reached with HIV and AIDS prevention and control messages: Over 20,000 people were reached with HIV messages during the commemoration of Philly Lutaaya Memorial Day, Partnership Forum, and World AIDS Day. A total of 600 out of 1,000 leaders from the districts of Masaka, Kampala, Gulu, and Mukono were engaged in HIV prevention, and over 6,000 student leaders from Kyambogo, Makerere, and Gulu Universities, Uganda Christian University (UCU), Ndejje University, Ankole and Teso Regions were reached with HIV/AIDS messages. The agency developed and launched the HIV and AIDS Action Plan for the Cultural Institution and provided technical support to four cultural institutions of Lango, Busoga, Teso, and Bugwere on HIV mainstreaming and messaging.

MPs and technical staff engaged to undertake oversight and monitor the HIV response: The MPs conducted oversight visits in Fort Portal and Gulu City, which have high HIV prevalence rates, and the districts of Buyende and Buvuma to assess the HIV services for the key population.

HIV Coordination Guidelines published: The process of updating the Local Government HIV Coordination Guidelines was not completed by 31st December 2024. The delay was attributed to the failure to secure the lead facilitator to update the guidelines.

**Joint AIDS Review (JAR) Report meeting held:** The JAR meeting was held successfully, and the report was disseminated and discussed by a panel of experts during the National HIV and AIDS Scientific Symposium attended by over 400 participants.

**HIV prevention messages developed and disseminated:** Two sets of HIV messages were disseminated through 12 radio stations and five TV talk shows during the *Empuumo* Marathon in Mbarara and the 2024 festive season. On the other hand, 20 million people were reached with the Presidential Fast Track Initiative (PFTI) across the country.

Capacity building for Resident District Commissioners (RDCs) and Resident City Commissioners (RCCs): The agency completed training of RDCs, RCCs, and security officers of 15 districts in the Greater Masaka sub-region on HIV prevention and control messaging.

The annual HIV and AIDS Scientific Conference for 2024 was held: The UAC convened the National HIV Scientific Symposium, which was attended by over 400 participants, and over 30 scientific abstracts were presented.

On the other hand, UAC organised and provided HIV and AIDS counselling and testing services, food and non-food items for the teenage children in Naguru Remand Home in conjunction with Uganda Cares. The agency conducted oversight visits in Buvuma Island to assess access to health services and the availability of essential medicine supplies, including condoms.

Uganda Aids Commission retooled: The procurement of 15 computers, one heavy-duty printer, five heavy-duty filing cabinets, four CCTV cameras, and a detector mirror was ongoing. On the other hand, the National Disease Control Department in the Ministry of Health attained its semi-annual plan. By 31st December 2024, the department supported 36 health facilities and 360 health workers with human papillomavirus (HPV) testing and management competencies in 10 regions of the country. They trained 12 Aids Control Programme (ACP) staff and 80 regional staff (five staff per region) on the Human Immune Virus-Drug Resistant (HIV-DR) curriculum.

The Integrated Cast+ campaign was conducted in 104 districts, reaching 8,856 villages, 222,997 households, and 589,379 individuals. This involved the identification and linkage to care of 2,098 TB patients, 21,484 malaria patients, 238 newly diagnosed HIV patients, and 29 leprosy patients, respectively. Additionally, 60,223 children were reached, of whom 44% (26,579) were fully immunised during the campaign.

# 7.3.7 Increase access to sexual reproductive health and rights with a special focus on family planning services

The intervention is expected to increase access to sexual and reproductive health services and age-appropriate information among all age groups in Uganda.

The planned output was increased access to sexual and reproductive health services and age-appropriate information. This had other sub-outputs which included: on-site mentorship and support supervision of health workers in the provision of a method mix for family planning conducted in 8 health regions; on-site mentorship and technical support supervision of health service providers in the provision of comprehensive Emergency Obstetric Newborn Care (EmONC) services conducted in 15 health regions; and holding of 12 Monthly National Maternal and Child Health (MCH) Technical Working Group coordination meetings.

#### **Performance**

By 31st December 2024, the performance of the intervention was good, with 77% of set targets achieved. Access to family planning was largely dominated by short-term methods. The uptake of family planning immediately after postpartum remained low at 2.2% of the institutional deliveries. Regionally, West Nile had the lowest uptake, at 0.3%, and Lango had the highest uptake, at 5.2%.

Access to sexual and reproductive health services and age-appropriate information increased. By 31st December 2024, products worth USh. 7.85 billion were spent on reproductive health items, family planning, and safe delivery kits (Mama Kits) and distributed to all health facilities.



On-site mentorship and support supervision of health workers in the provision of a method mix for family planning conducted in eight health regions: On-site mentorship and technical support supervision of health workers in the provision of a method mix for family planning was conducted in four health regions.

On-site mentorship and technical support supervision of health service providers in the provision of comprehensive Emergency Obstetric Newborn Care (EmONC) services conducted in 15 health regions: On-site mentorship and technical support supervision of health service providers in the provision of comprehensive Emergency Obstetric Newborn Care (EmONC) services were conducted in six health regions of Acholi, Busoga, Bunyoro, Karamoja, Lango, and Teso.

Twelve monthly National Maternal and Child Health (MCH) Technical Working Group coordination meetings were held: Six monthly National Maternal and Child Health (MCH) technical working group coordination meetings were held.

School health service providers oriented in the prevention and control of Mpox in learning institutions across 17 administrative units, including divisions. With support from UNICEF, a total of 2,720 school health service providers from primary and secondary schools were oriented on Mpox prevention and control measures across the 17 administrative units. The orientation aimed to enhance the capacity of school health service providers to effectively prevent and control MPOX within learning institutions. The activity covered Kampala (4 divisions), Wakiso (8 divisions), Mukono, Namayingo, Kasese, Nakasongola, and Mayuge. This intervention contributed to the safe reopening and continued operation of schools amid the Mpox outbreak, ensuring that school environments are better prepared to manage potential cases and prevent further transmission.

# Challenges

- i.) *High teenage pregnancy*: Gaps remain that hinder the effective implementation of interventions aimed at reducing teenage pregnancies despite ongoing efforts to foster multisectoral collaboration.
- ii.) Stockouts of contraceptives and gaps in documentation tools, especially in the area of family planning via the Village Health Teams (VHTs). These constrain access to reproductive health commodities.
- iii.) Cut in USAID funding: USAID provides critical funding for various health care and reproductive health services. A reduction in funding could lead to decreased availability of reproductive health commodities and unintended pregnancies.

#### Recommendations

- i.) The MoH should establish a dedicated coordination mechanism within the Teenage Pregnancy Accountability Platform to track progress on interventions. In addition, the MoH should conduct regular joint review meetings at the national and district levels to assess performance, share best practices, and address implementation gaps.
- ii.) On stockouts, the MoH should introduce a community-level stock tracking system where VHTs report the monthly stock status to health facilities for timely replenishment. The VHTs should be provided with simplified, standardised reporting tools and conduct periodic refresher training on their use.

Parliament should increase funding allocations towards sexual and reproductive health interventions and compensate for the reduction in funding and mitigate the negative impacts of the reduced aid.

## 7.3.8 Promote health research, innovation, and technology uptake

The intervention aims to increase the uptake of health research, innovation, and technology among health institutions. The planned outputs were broadly grouped into: Health research and innovation promoted; and high-quality scientific and operational health research conducted.

The above outputs were implemented by various entities, including: The MoH, Uganda Virus Research Institute (UVRI), Uganda National Health Science Research Organisation (UNHRO), Uganda National Council for Science and Technology (UNCST), research and academic institutions, the Ministry of Health, Office of the President (PRESIDE). The semiannual monitoring for FY 2024/25 focused on outputs undertaken by UVRI.

#### **Performance**

The performance was good, with 55% of set targets achieved. The detailed performance by output is presented hereafter.

**Health research and innovation undertaken:** UVRI undertook the development of two COVID-19 vaccines – the COVID-19 inactivated vaccine and the adeno-vector COVID-19 vaccine. In-vitro antiviral therapeutic studies were also undertaken. (For detailed information on vaccine development, refer to the BMAU Semi-Annual Programme Report on Innovation, Technology Development and Transfer (ITDT) FY 2024/25.)

Virus isolation results reported within 14 days from receipt of stool specimens. Under laboratory surveillance, a total of 1580 Acute Flaccid Paralysis (AFP) stool samples were received, of which 1465 (92.7%) were from AFP cases, while 108 (6.8%) were from AFP contacts and 7 (0.4%) from the community. These samples were received from Burundi, South Sudan, Rwanda, Tanzania, and Uganda.

Surveillance for respiratory illness undertaken: Continued COVID-19 surveillance at 14 ILI (Influenza Like Illnesses) sites and 9 SARI (Severe Acute Respiratory Infections) sites in Kiswa, Kitebi, Nsambya, Entebbe, Tororo, Fort Portal, Mukono, Kibuli, Ludara, Kiryandongo, Koboko, Arua, and Mbarara hospitals. Other samples were also referred from different hospitals; 603 samples were from ILI and 201 were SARI. The results were 11 samples being positive for COVID-19, one positive for influenza A (H3), 16 cases of the A(H1N1) pandemic 2009, and 32 positives for influenza B (Victoria). RSV was detected in 12 cases in under-five children. In addition, UVRI conducted assessments for functional and broadly cross-reactive immune responses. Infected human specimens were tested for their ability to neutralise currently circulating global SARS-CoV-2 strains, generating essential data to inform and guide vaccine strain updates.

**Malaria surveillance undertaken**: Mosquito surveillance was conducted in Malaba, Tororo, Busia and Kapchorwa Towns for the malaria vector, *Anopheles stephensi*, to evaluate the potential transboundary mosquito migration from Kenya to Uganda.

Surveillance for viral disease outbreak undertaken: As of 31st December 2024, UVRI undertook surveillance for viral disease outbreaks with a keen eye on the anthrax outbreak. Seventy-five human samples were tested, and 25 samples turned out to be positive for anthrax, and these were from Amudat (1), Kanungu (3), Kiruhura (1), Kazo (12), Ibanda (1), and Ssembabule (7) Districts. More samples were received from South Sudan, but were negative.



COVID-19 and influenza surveillance among the public carried out: Two quarterly COVID-19 and influenza surveillance interventions were carried out in 14 ILI (Influenza-Like Illnesses) sites and 9 SARI (Severe Acute Respiratory Infection) sites, including Kiswa, Kawaala, Kitebi, Nsambya, Entebbe, Tororo, Fort Portal, Mukono, Kibuli, Ludara, Kiryandongo, Koboko, Arua, and Mbarara hospitals. Other samples were also referred from different hospitals. Of the 1,268 samples received, 937 were ILI samples and 328 were SARI samples.

Four laboratory surveillance interventions involving Acute Flaccid Paralysis (AFP), measles and rubella among children, female and male, carried out. Two laboratory surveillance interventions involving AFP, measles and rubella among children, female and male, carried out. While 735 measles samples were received, those for AFP were 3,365.

Four field mosquito sampling excursions in each region of the country to establish arboviral and malaria vector species were conducted. Two field mosquito sampling excursions each in two regions of the country to establish arboviral and malaria vector species were conducted.

Four surveillance enhancement drives across the country for *Anopheles stephensi* invasive malaria species that is in Kenya: Two surveillance enhancement across the country for *Anopheles stephensi* invasive malaria species that is in Kenya was carried out.

Four quarterly HIV drug resistance surveillance interventions among children, females, and males in hard-to-reach populations carried out: Two quarterly HIV drug resistance surveillance interventions among children, females, and males in hard-to-reach populations carried out.

Assessments for functional and broadly cross-reactive immune responses (antibodies) to SARS-CoV-2, and impact conducted. Two assessments for functional and broadly cross-reactive immune responses were carried out. Available infected human specimens tested for their ability to neutralise currently circulating global SARS-CoV-2 strains, generating essential data to inform and guide vaccine strain updates, including neutralising antibody responses, were assessed in samples from Ugandans who received the Pfizer, Sinovac, and Johnson & Johnson COVID-19 (SARS-CoV-2) vaccines, and is still ongoing.

Viral disease epidemics investigated to identify immune markers of protection relevant for designing interventions in at least 40 cases per epidemic (yellow fever, Rift Valley fever, and other viral diseases): Two surveillance interventions on viral disease epidemics investigated to identify immune markers of protection relevant for designing interventions, including surveillance in infected human specimens by testing for their ability to neutralise currently circulating global SARS-CoV-2 strains, generating essential data to inform and guide vaccine strain updates.

**UVRI retooled to support research activities:** All the planned outputs, including shelves and other equipment and furniture, remained at the procurement stage as of 31st December 2024.

#### **Implementation Challenges**

- i) Inadequate staffing and funding to undertake high-quality specialised research at UVRI, as well as at regional and academic institutions.
- ii) The lack of Institutional Review Boards (IRBs) at RRHs affected the research plans of various health workers.
- iii) There was slow uptake of research findings and utilisation, partly due to lengthy and bureaucratic approval and uptake procedures.

#### Recommendations

- i) MoFPED, MoPS, MoH, and HSC should prioritise filling staffing gaps at all research institutions and hospitals to enhance health research at various levels.
- ii) The MoH and research institutions should support capacity building of Research Committees at all RRHs to boost their interest towards medical research.
- iii) The MoH should award medical workers who exhibit high-quality research products to boost morale and interest in research in health institutions.

# 7.3.9 Increase access to inclusive safe water, sanitation, and hygiene with emphasis on increasing coverage of improved toilet facilities and hand washing practices

The Ministry of Water and Environment (MWE) continued to develop piped water supply systems and sanitation facilities with the aim of increasing access to safe water and sanitation for both rural and urban populations across the country. However, progress was impacted by the non-release of funds in the first quarter and delays in disbursements during the second quarter.

The following outputs were planned and assessed under the intervention:

- 1. Access to inclusive safe water supply, sanitation, and hygiene services increased in rural areas.
- 2. Access to inclusive safe water supply, sanitation, and hygiene services increased in urban areas.

#### **Physical Performance**

The intervention performance was fair (52%). Implementation of piped water supply systems, sanitation facilities, and hygiene promotion campaigns continued across both rural and urban areas, with emphasis on gender mainstreaming.

The key achievements included: Major urban projects were substantially completed, such as Karuma (99.8%), Parabongo (98%), and Adwong (100%). A total of 164 solar-powered systems under Nexus Green progressed significantly, with 94 substantially completed and 35 technically commissioned. Urban sanitation also advanced, with faecal sludge treatment facilities in Nalukolongo, Kumi, Busia, and Koboko reaching substantial completion. This progress has improved access to safe water, including for vulnerable communities, through the provision of public stand posts.

Despite these gains, the intervention continued to face challenges, including USh. 45 billion in outstanding arrears at the Nakivubo wastewater treatment plant, weak management structures in rural systems, and procurement delays. To address these issues, the report recommends prompt settlement of arrears, strengthening of rural management frameworks,



and repackaging of large projects such as Mbarara to align with available funding, ensuring the sustainability and timely delivery of WASH interventions.

# Rural water supply, sanitation and hygiene services increased

The ongoing work on water supply and sanitation systems included Isingiro and Ala-Ora water supply and sanitation (WSS) systems, both at 10% completion, while the Bitsya WSS system progressed to 76% and Nyamugasani WSS reached 30%. The construction of the 15 solar-powered systems for Rural Growth Centres (RGCs) reached an average 46% progress, with notable good quality works observed in Rakai (Kasese and Lwentulege) and Kagadi (Kikoora and Mwitanzige) Districts. Though these were behind schedule, the contracts for an additional 11 RGC systems were signed, pending commencement.

Concerning the 20 solar-powered systems intended for refugee-hosting communities, five contracts were concluded, while another five were at the procurement stage, undergoing bid evaluation. The large and medium solar-powered piped water systems together achieved an average progress rate of 52%. Of the 50 planned systems across 22 districts, where safe water coverage remained below 50%, six systems were completed, while 42 were under construction.

Out of the 302 solar-powered rural systems planned under Nexus Green, construction has progressed at 97 sites, with 51 systems substantially completed and 21 officially handed over to Local Governments for management. However, challenges remain in the management of small solar-powered systems for rural communities, including unclear supervision, non-payment of caretakers, and slow responses from District Water Offices to community concerns, as observed in Ogwari (Nwoya District) and Aloi (Lira District).

The sanitation facilities were constructed alongside the piped water supply systems, including institutional and public facilities with separate blocks and stances for males, females, and PWDs. In schools, separate facilities for teachers were at times provided. For the solar-powered systems, eco-san toilets were installed for caretakers at the pumping stations. Hygiene promotion campaigns were conducted before and during construction, with strong emphasis on gender mainstreaming during both the campaigns, and the training sessions.

Detailed progress of the rural water systems monitored is presented below:

# a) Ogwari solar-powered water supply system in Nwoya District

This system is located in Ogwari Village, Lakalac Parish, Nwoya District. It was completed in April 2024 and handed over to the District Local Government. Following the end of the Defects Liability Period (DLP), the system became fully operational, serving over 68 households, each contributing USh 1,000 per month for systems maintenance. A water users committee, consisting of nine members, was formed with support from the Parish Chief to oversee the system's management. However, despite being operational, the system suffered from poor maintenance. Taps were broken, and the grass around the pump station and reservoir overgrown, posing a fire hazard due to wildfires. The records of household cash contributions were not readily available. Additionally, the system operator reported that he was getting paid for his services from the district.





L: A public stand post (PSP) with broken tap; R: Two 10m³ reservoir tanks for Ogwari WSS in Lakalac Parish, Nwoya District.

## b) Pakiya solar-powered water supply system in Nwoya District

The system covers two sub-counties, including a primary school. By 10th February 2025, the cumulative physical progress was 85%. The components, including the pump house, water reservoir tank, two public stand posts (PSPs), and six-yard taps were installed. The quality of work was good. The pump was still under procurement. The community's demand for water was high, and discussions were ongoing to explore the possibility of an extension to one more unserved village.





L: Solar panels installed; R: A PSP for Pakiya WSS in Nwoya District.

#### c) Aloi solar-powered water supply system in Alebtong District

Located in Fatima Ward, Otweyotoke Parish, Alebtong District, the system was operational by 19th February 2025, having reached a completion rate of 98%. The water source was a borehole, pumped into two 10 m³ reservoir tanks, and distributed through pipes to three PSPs. The key components included a pump house with a guard room, a solar-powered pump, and a solar power system. To promote sustainability, a five-member water users' management committee was formed, composed of three men and two women, but no training had been conducted for the committee.

Despite being operational, there were several challenges. The two existing reservoir tanks were inadequate to meet the needs of the village population and two local schools. During construction, the contractor left behind numerous debts, including unpaid rent for workers. Furthermore, the sub-contractor failed to pay some workers, and the grass planted on site dried up due to harsh weather at the time of planting.





L: A pumping station with ecosan toilet and solar panels; R: A PSP for Aloi WSS in Alebtong District.

# d) Oumu solar-powered water supply system in Alebtong District

By February 2025, the system, which is located in Oumu Village, Awori Parish, Abako Sub-County, Alebtong District, had been technically commissioned. Its components included a pump house, solar panels, two 10 m³ reservoir tanks, a one-yard tap, and two PSPs, designed to serve a total of 1,679 people. The pumping system was operational, with the reservoir located at Apami Primary School. One of the PSPs served 1,208 students and supplied approximately 500 jerrycans of water per day for the surrounding community. However, several operational issues were affecting the system performance. Payment delays by the system operator had disrupted the regular pumping schedule, and one of the PSP taps was non-functional. Additionally, the collection of water user fees had not commenced, further impacting the system's long-term sustainability.





L-R: A yard tap, and a PSP for Oumu WSS in Awori Parish, Alebtong District.

## e) Bitsya water supply system in Buhweju District

By February 2025, the overall completion level of the system stood at 77%. The key system components included a water treatment plant, offices, and staff house construction, under construction. Six reservoir tanks, including a backwash tank, were being installed, while the intake, clarifier, and rapid sand filter were already in place. The only pending work at the intake involved completing the gabions and site restoration.

The project was facing delays, with the completion date extended from October 2024 to March 2025. This was mainly due to the relocation of the booster station, delayed importation of materials, and late payment of workers by the contractor, which was affecting performance. The system is designed to serve 1,000 consumer connections, with 600 customer applications submitted but still pending verification.

Out of the 994 project-affected persons (PAPs), 559 had been compensated, while the remaining were awaiting payment. Delays in compensating PAPs had further slowed work progress as some withheld consent for construction activities until they received payment. Health and safety inspections were carried out three times a week, and personal protective equipment (PPE) was available on site. Additionally, the Environmental and Social Impact Assessment (ESIA) had been completed, and environmental meetings as well as community sensitisation activities had been conducted.





L-R: The intake and the Filtration tank for Bitsya WSS in Buhweju district

#### Urban water supply, sanitation and hygiene services increased

Significant progress was achieved across several piped water systems in urban areas. The systems in Buikwe, Kapchorwa, Bundibugyo, Obongi, Parabongo, and Zombo were technically commissioned and met the expected quality benchmarks, providing safe water to beneficiaries. Other piped water systems were at various stages of completion. Those nearing completion included Kamuli (90%), Busia (99%), Namasale (92%), Palabek Kal (95%), Lamwo Town Council (95%), and Lacekocot (90%).

Meanwhile, the projects in Kaliro-Namungalwe (46%), Butaleja-Busolwe (62%), Budaka-Kadama-Tirinyi-Kibuku (43%), Busaale (66%), Ngoma (81%), Lunya (50%), Arra/Dufile (41%), Rhino Camp TC (34%), Karago Phase II (50%), and Kagera (78%) progressed steadily.

However, projects such as Kasawo Phase I (5%), Kyebando-Kasimbi (5%), Lobule (10%), and Boroli (5%) had just commenced. The procurement for works in Mbarara was halted due to insufficient funds, while work in Masaka was at the contract signing stage. Additionally, the contract for the restructuring and rehabilitation of the water pipe distribution network in the Kampala and Wakiso areas was signed in September 2024, and the contractors were mobilising to commence work.



Out of the 133 sites planned under Nexus Green, work had commenced on 67 sites. Of these, 43 were substantially completed, and 14 had been technically commissioned and handed over to the respective Water and Sanitation Umbrella for management.

Sanitation facilities were constructed and hygiene promotion campaigns conducted in urban areas, including institutional and public facilities with separate sections for males and females. Some sites also included dedicated facilities for teachers. Additionally, faecal sludge treatment facilities (FSTFs) were planned and built to ensure the safe disposal of sewage. For instance, the FSTFs in Kumi, Busia, and Koboko were largely completed, while the facility in Buliisa was 20% complete. The Nalukolongo FSTF had entered the Defects Liability Period (DLP). Hygiene promotion campaigns were implemented both before and during construction, with a strong focus on gender mainstreaming in both the campaigns and training activities.

## Karuma water supply system in Nwoya District

As of February 2025, the overall project progress had reached 99.8%, marking substantial completion, and the system had entered the DLP. The system was operating satisfactorily, with identified snags being resolved. A total of 2,139,008.02 m<sup>3</sup> of water had been supplied,





L-R: Managers residential buildings and chlorine dosing units for Karuma WSS.





L-R: A prepaid PSP and installed a Supervisory Control and Data Acquisition (SCADA) system control unit.

leading to a significant improvement in system reliability. In Gulu City, the total number of connections had reached 15,352, including at least 122 new connections added since the project's completion. Additionally, 29 of the planned 140 prepaid public standposts had been completed.

The quality of work was rated as good, with the contractor's quality assurance plan reviewed and approved by the site engineer. The project is currently under the operation and management of the National Water and Sewerage Corporation (NWSC).

# a) Parabongo water supply system in Amuru District

By February 2025, the water system was 98% complete, with the quality of work rated as good. The completed components included 200-yard tap connections, five PSPs, a six-stance VIP latrine block for boys and girls, and a four-stance VIP latrine block for staff at Agwayugi Primary School. Additionally, 7,467 metres of transmission mains and 15,589 metres of distribution pipeline had been installed, with only 200 metres remaining. A total of 192 connections had been completed. The system was commissioned in December 2024, and test runs were ongoing.

Two pump stations were operational: Acoke, powered by solar energy, and Olet, designed to run on both solar and grid electricity under the Uganda Electricity Distribution Company Limited (UEDCL). However, grid power had not yet been connected to the Olet pump station.

The system was being managed by the Northern Umbrella of Water and Sanitation, supported by a team of six trained staff. The tariff was set at UGX 2,500 per 1,000 m³ for yard taps and UGX 1,500 for PSP water access. Billing began in January 2025, with UGX 4.9 million billed and UGX 1.8 million collected, reflecting a collection efficiency of 36.7%. Owing to the lack of banks and mobile money agents in the sub-county, payments were made in cash at the Water Office.

Gender and inclusion were actively promoted. Three PSPs were managed by women, and the infrastructure included accessibility features such as ramps at the office and latrines for PWDs, separate toilet facilities for males and females, and dedicated bath and changing rooms for girls. Girls also received training in making reusable sanitary pads to support menstrual hygiene management. The Water Office was equipped with two computers, furniture, a motorcycle, and plumbing tools to aid operations and maintenance.





L-R: Water Office, and installed solar panel for Parabongo WSS in Amuru District.





L-R: A PSP, and girls VIP latrine for Parabongo WSS in Amuru District.

#### b) Adwong solar-powered water supply system

As of 19th February 2025, the Adwong water system – located in Adwong Village, Nakabela Parish, Alebtong Town Council, Alebtong District – had been technically commissioned and was in the Defects Liability Period (DLP). The works were 100% complete, with all components installed, including a pumping station, two 10 m³ reservoir tanks, a chlorine dosing unit, transmission lines, and distribution lines.

The system was managed by the Northern Umbrella of Water and Sanitation. The tariff was set at USh. 2,000 per 1,000 m³ for yard tap connections and USh 1,500 for water accessed through PSPs. In January, Ush. 210,000 was billed, and Ush. 190,000 was collected, resulting in a high collection efficiency of 90.5%. At the PSPs, water was sold at Ush. 100 per 20-litre jerrycan.

The system served approximately 250 people through five PSPs. The borehole had a yield of 8 m³/hour, which was sufficient to support system operations. However, some challenges were observed, including one non-functional PSP tap and limited system coverage, to fully meet the high-water demand of the target population.





L-R: A pump/guard house, and a PSP for Adwong solar-powered WSS in Alebtong Town Council.

#### c) Karago Phase II water supply system in Kabarole District

As of 27th February 2025, the Karago WSS, located in Karago Town Council, Fort Portal City, Kabarole District, had reached 85% overall physical progress. The system sources water from a reservoir tank built during Phase I and is supported by two booster tanks – one in Amabale with a capacity of 100 m<sup>3</sup>, and another in Karago with a capacity of 50 m<sup>3</sup>. Key

components already completed include transmission and distribution lines, as well as two toilet blocks constructed at Bukuku Primary School.

The remaining works included the installation of nine kilometres of transmission and distribution pipelines, 15 PSPs, 280-yard taps, 265 private taps, and 15 institutional taps. The primary challenge affecting project completion was inadequate funding, which had led to significant delays in finalising the outstanding works.





L-R: A reservoir tank, and an institutional VIP latrine for Karago WSS in Kabarole District.

# d) Kamuli water supply and sanitation system Phase I

By the end of February 2025, construction works had reached 89% completion. The project contract was extended by two months, through March 2025, at no additional cost. The major completed components included a water treatment facility with a capacity of 10,090 m³/day, water storage tanks, and the provision of tools and equipment for offices, workshops, and laboratories, along with chemicals and chemical-handling equipment. However, housing structures remained incomplete, with painting, wiring, and toilet fittings still pending.

The project also featured a treated water transmission main to Kamuli Town, with extensions to Mbulamuti and Butansi, supported by three storage reservoirs and a 75 km water distribution network, in addition to 55 km of intensification works.

So far, 15 out of the planned 50 public PSPs had been installed, and 800 consumer connections were still pending. Five of the nine planned sanitation facilities had been completed and handed over, while the remaining facilities were still undergoing water-tightness testing and installation of fittings.

The intake works were ongoing, with key tasks – such as the installation of intake screens, submersible pumps, a gantry crane, and roofing structures – yet to be completed.





L-R: Ongoing works at the pump house, and at the Intake for Kamuli WSS in Kamuli District



The project faced several implementation challenges. These included major delays in importing pipes and fittings due to an unexpected rerouting of shipping traffic from the Indian Ocean to the Atlantic Ocean. Additionally, erratic rainfall and severe flooding caused construction delays of up to three months. Efforts to mobilise community members for consumer connections were also hindered, as many residents were reluctant to sign up before seeing actual water flow, further affecting project timelines.

#### e) Mbale water supply and sanitation system

The overall progress of works stood at approximately 26.61% by the end of February 2025, while 52.27% of the project duration had elapsed, with financial progress at 46.61%. The project had lost about four months due to insufficient design and a change of site from Bungokho to Namatala because of land conflicts. The slow progress was also attributed to the contractor's low mobilisation of both staff and equipment.

The work progress was as follows: The Namatala intake and raw water transmission mains had completed the river diversion works, and earthworks were ongoing at the source. However, physical rehabilitation for the Manafwa and Bungokho treatment plants, as well as the Nabijo and Nabuyonga intakes, had not commenced.

Progress on the project included: a) Doko wastewater treatment ponds – Rehabilitation was underway, with earthworks completed and roof stanchion installation in progress; b) Namatala wastewater treatment ponds – Earthwork excavation, fencing, and shear wall construction had been completed, while hardcore backfilling was in progress; c) IUIU wastewater treatment ponds – The site had been cleared, and earthworks for the ponds were ongoing, along with trial pit excavation and the installation of a 500 m sewer pipeline.

Others were: d) Manafwa to Bungokho WTP transmission mains – Foundation excavation, cofferdam construction, and UPVC pipeline work were ongoing; e) Namatala water treatment plant – Fencing had been completed, with earthworks for the weir and river diversion in progress; f) Namatala to Bungokho WTP transmission mains – The topographic survey was in progress; g) Ablution blocks – Foundation construction had begun for Nabuyo, Bugema Quran Primary School, and Nakaloke Market Place.

# f) Construction of Tirinyi, Kibuku, Kadama and Budaka water supply and sanitation systems

The new transmission main, spanning 60.126 km and designed to connect the small towns of Budaka, Kadama, Kibuku, and Tirinyi from Pallisa, had reached 77% completion. Meanwhile, the new distribution pipe network, totalling 67.507 km, was at 11% completion. Construction of cold-pressed steel reservoirs was in progress, including a 300 m³ reservoir for Kadama, a 250 m³ reservoir for Kibuku, and a 200 m³ reservoir for Budaka. Roof and column bases had been completed, with installation of the steel tanks pending.

Rehabilitation works were also ongoing for three existing raised cold-pressed steel tanks in Budaka, along with storage reservoirs ranging from 50 m<sup>3</sup> to 150 m<sup>3</sup>. A booster pump station in Budaka, with a capacity of 48 m<sup>3</sup>/hr, was under construction, though mechanical installations were yet to be completed.

The installation of PSPs – five in Budaka, four each in Kadama and Kibuku, and five in Tirinyi – was still pending, along with 1,300 metered yard taps and household connections. Waterborne toilets and ablution blocks at Kadama Market (90% complete) and Budaka Market (70% complete) were awaiting final verification.

A seven-month contract extension had been requested and was pending bank approval.

The Tirinyi, Kibuku, Kadama, and Budaka water supply and sanitation systems experienced significant delays due to rocky terrain in parts of the distribution network, which hindered trenching and pipe installation. Additional delays were caused by slow permit approvals from the Uganda National Roads Authority (UNRA) for the use of road reserves, further affecting the pace of construction activities.

## g) Kaliro - Namungalwe water supply and sanitation system (Lot-2)

By 28th February 2025, the overall progress of the Kaliro-Namungalwe water supply and sanitation system (Lot-2) stood at 46%, despite 88.9% of the contract time having elapsed and only 42% of the contract value having been paid.

Notable achievements included the horizontal flow sedimentation tank at the Masese WTP, with a capacity of 12,792 m³/day, which had reached 15% completion. The sludge drying beds were at 85% completion. The Wairaka booster station, with a capacity of 336 m³/hr, was 75% complete, while the Iganga booster station – equipped with three clearwater vertical multi-stage pumps and a 200 m³ reinforced concrete sump – stood at 80% completion. Procurement of electromechanical and electrical installations for both booster stations was in progress.

The Kaliro Water Office and two 13-stance waterborne public toilets located in Kaliro and Namungalwe were each 80% complete. The transmission main along the Iganga–Kaliro Highway had reached 50% completion. Meanwhile, the new distribution pipe network – made of HDPE and uPVC pipes ranging from OD 200 mm to OD 50 mm (PN10) – was 42% complete. However, construction of the six planned reservoirs lagged behind, with only 10% progress reported.





L: Namungalwe toilet; R: Iganga pump house at Kaliro-Namungalwe water supply and sanitation system (Lot-2) in Kaliro District.

Despite progress on several components, additional effort is needed to meet project targets and deadlines.

The project encountered several challenges that significantly disrupted progress. These included serious contractor cash flow constraints, which delayed procurement of materials and compliance with the approved work schedule. The excavation activities at the Masses clarifier site were further complicated by heavy rainfall and unforeseen diversions of existing pipelines. Delays in importing critical materials also hampered construction, prompting the client to issue a letter of comfort to the contractor's bank to facilitate access to credit lines. In



addition, rocky terrain across various locations hindered pipeline trenching, demanding more time and resources to overcome the difficult conditions.

# h) Construction of Manafwa Town Council water supply system in Manafwa District

By the end of February 2025, the project was progressing well, with an overall completion rate of approximately 70%, compared to 77% of the contract time elapsed. However, only 28% of the total budget had been disbursed. Notable progress had been made across several key components: the borehole pumping main was 90% complete; the storage reservoir and associated site works had reached 95%; the distribution network stood at 93%; and both the Water Office Block and the Chemical Storage House were at 85%. The three borehole pumping stations had achieved 80% completion.

While the quality of work was deemed acceptable and overall progress was encouraging, the project experienced delays primarily due to difficulties in securing land for the Water Office, public toilet, and two pumping stations. Prompt resolution of these land acquisition issues is essential to keeping the project on track and avoiding further delays.

#### i) Kagera waterworks in Isingiro, Mbarara and Masaka Districts

The scope of the project includes the construction of an intake and water treatment plant at Kagera with a capacity of 30 million litres per day, transmission mains, an intermediate booster pump station at Kabingo, and multiple service reservoirs. As of 28th February 2025, the overall project progress stood at 81%, with the completion deadline extended to 30th June 2025.

The design and engineering phase was substantially complete at 90%, and procurement was nearly finalised at 98%. However, construction lagged behind at 63%, mainly due to unforeseen issues in Component A. Specifically, the intake structure required reconstruction due to unexpected leakages. To mitigate this, the contractor set up a temporary pumping station, which was successfully used to test the water treatment process, equipment, and chemical dosing lines, enabling water delivery to the pump house.

In Component B, progress on the service reservoirs was as follows: Kabingo -77%; Bihunya -78%; Kaberebere -88%; and Kajaho -85%. The remaining tasks included the construction of retention walls, installation of concrete drainpipes, and backfilling. Pipework was 82% complete, with only two minor road crossings pending resolution in coordination with UNRA.

A significant challenge emerged in Mbarara Town regarding the 14.741 km pipeline linkage from Masha to Boma, where design modifications led to compensation disputes. The project awaited the disclosure of the Resettlement Action Plan (RAP) and compensation details to PAPs, along with valuation approvals from the Chief Government Valuer (CGV), which were critical for resolving these disputes and allowing progress to continue.

Overall, the project experienced delays at various sites due to additional work requirements such as landscaping and paving, which extended the timeline. Land compensation disputes also contributed to setbacks, stemming from a re-routing of the pipeline from road reserves to private land — an issue that generated tension among stakeholders. Furthermore, the unanticipated reconstruction of the intake due to basement leakages posed major challenges for the contractor, resulting in further delays and increased costs.

## j) The Isingiro Water Supply and Sanitation Project

The project is a vital initiative aimed at improving water access for approximately 80% of Isingiro District, utilising water from the Kagere waterworks. However, as of the end of February 2024, progress was significantly behind schedule, with only 11% of the work completed – well below the expected 25% milestone.

Despite the contractor receiving a 20% advance payment, mobilisation and execution of works remained slow. Engagement had occurred at only 13 of the planned 18 sites, reflecting operational inefficiencies. Of the planned 700 km pipe network, just 3 km had been installed by January 2025, primarily from the Kabereebere and Kashumba site reservoirs.

This slow progress raises serious concerns about delays in improving the water supply for the residents of Isingiro District. To mitigate further setbacks, stakeholders may need to closely evaluate the contractor's performance and ensure that the necessary support, oversight, and resources are in place to accelerate implementation and meet project timelines.

## k) Kampala Water- Lake Victoria Water and Sanitation Project

The construction of Component A – the Nalukolongo faecal sludge treatment facility (FSTF), with a nominal capacity of 400 m³/day – was completed on schedule, and the Defects Liability Period (DLP) began in October 2024. During this period, the plant efficiently managed between 60 to 80 cesspool trucks of varying capacities daily. However, the quality of the dumped material frequently caused pump blockages. To resolve this, an improvised grit chamber was introduced, which effectively addressed the issue and restored smooth plant operations.

The prepaid water meter installation component was revised, reducing the original target from 2,600 meters to 1,440. As of the latest update, 1,000 meters had been successfully installed, with 440 still pending. The remaining 1,160 prepaid metering points (PMPs) will be handed over to NWSC, whose teams have received comprehensive training in installation, operation, and maintenance to ensure seamless continuation of services.

Significant changes over the eight-year period from design to implementation prompted a major revision of the water pipeline. Originally designed as a 72 km line using small-diameter pipes (10 mm and below), the final implementation consisted of a 52 km pipeline with larger diameters of up to 200 mm. These adjustments were necessary to reflect shifts in settlement patterns and evolving demand.

Meanwhile, the construction of 64 toilets across Kampala Capital City reached 90% completion by the end of February 2025. Of these, 39 toilets had been completed and handed over for use, while 29 were awaiting stakeholder confirmation before handover. The toilets were constructed in key locations, including markets, police stations, Kyambogo University, and prisons. The final five toilets were also nearing completion, with 90% of the work done. Given the limited scope and value of the remaining tasks, it was agreed that these would be finalised during the Defects Liability Period (DLP), avoiding any need to extend the overall project timeline.







L: A section of the sludge drying bed; C: Final treated sewage water that is discharged into the wetland from Nalukolongo FSTF in Wakiso District; and R: A prepaid water meter in Nalukolongo

# **Intervention Challenges**

- 1. Outstanding Payments payments: amounting to UGX 45 billion for the Nakivubo WTP remain unsettled. The continued accrual of interest on this amount poses a significant financial risk to the Government.
- 2. Non-functional management structures: Many rural piped water systems lack effective operation and maintenance frameworks, increasing the risk vandalism, theft of components, and premature system failures.



Wandegeya Police Station toilet in Kampala District.

3. Stalled procurements: The procurement process for the Mbarara waterworks has stalled due to submitted bid prices exceeding the available budget, delaying project implementation.

#### Recommendations

- i.) MoFPED should allocate funds to settle the outstanding payments to mitigate financial risks and enable the project to exit the Public Investment Plan (PIP) since its interventions have long been implemented.
- ii.) The MWE and District Local Governments should establish robust management frameworks for rural piped water systems to ensure effective operation and maintenance.
- iii.) The NWSC should repackage the Mbarara Waterworks Project and, if feasible, adopt a phased approach to align with available funding.

# 7.3.10 Improving Occupational Safety and Health (OSH) management.

The Occupational Health and Safety (OHS) intervention implemented by the Ministry of Gender, Labour, and Social Development aims to improve working conditions across various workplaces. This intervention contributes to three key outcome indicators:

- i) An increased proportion of workplaces with health and wellness programmes;
- ii) A reduction in the prevalence of gender-based violence (GBV); and
- iii) An increased proportion of workplaces offering occupational health services.

During FY 2024/25, the Ministry prioritised activities in inspection and monitoring, as well as the strengthening of chemical safety and security management systems, to enhance compliance and reduce occupational hazards.

#### Under the Inspection and Monitoring priority area, the planned outputs included:

Development of the National Occupational Safety and Health (OSH) Profile; development of guidelines for managing OSH in cotton ginning industries; inspection of 400 workplaces nationwide for compliance with OSH standards; examination and certification of 600 statutory equipment units; capacity building of 100 employers and employees on OSH management across the Central, Western, Northern, and Eastern Regions.

# Under the strengthened Chemical Safety and Security Management area, the planned outputs included

Inspection of 120 workplaces handling toxic chemicals for safe handling and management practices; chemical risk assessments conducted in 20 cosmetics and personal care industries; capacity building for 600 workers on handling toxic chemicals; training of 400 employers on the use and management of the Occupational Safety and Health Management Information System (OSH-MIS). The detailed performance results by output are presented in the sections that follow.

#### Performance

The performance of the intervention was fair at 57% attainment of the semi-annual targets. Significant progress was attained in the key priority areas of inspection and monitoring, as well as strengthening chemical safety and security management systems, to improve compliance and reduce occupational hazards. For instance, significant progress was made in strengthening the national Occupational Safety and Health (OSH) framework. In addition, a total of 81 workplaces handling toxic chemicals had been inspected, representing approximately 68% of the annual goal. The chemical risk assessment was conducted in 20 cosmetics and personal care industries. Detailed performance is presented as follows.

The Ministry of Gender, Labour, and Social Development has made notable progress in implementing the Occupational Health and Safety (OHS) intervention, focusing on inspection, compliance, capacity building, and chemical safety management. The National Occupational Safety and Health Profile was developed, with a zero draft of Terms of Reference (ToR) completed. Additionally, draft guidelines for managing OSH in the cotton ginning industry were finalised to guide future sector-specific policies.

During the period, 214 workplaces were inspected for compliance with OSH standards, achieving 53.5% of the annual target of 400 inspections. A total of 758 workplaces were registered under the OSH Act of 2006, generating UGX 845 million in non-tax revenue, indicating increased formalisation and regulatory adherence within the labour market. Six occupational accidents were formally investigated at key industrial and construction sites, including locations in Busabala, Virat Alloys Ltd (Kampala), GM Sugar (Buikwe), Landy Industries Ltd (Mukono), Leeko (U) Ltd, and Pramukh Steel Ltd (Jinja). Furthermore, 123 Environment and Social Impact Assessments (ESIAs) and audit projects were reviewed to



ensure integration of OSH safeguards into project planning and implementation. Sixteen inspections were conducted under the Uganda Institution of Professional Engineers OSH Awards initiative, promoting best practices in workplace safety.

In terms of equipment compliance, 336 statutory equipment units were examined and certified, representing 56% of the annual target of 600 inspections and mobilising UGX 238 million in non-tax revenue. Capacity-building efforts trained 406 employers and employees on the OSH management system, surpassing the annual target of 100 and enhancing data-driven compliance tracking by the Parliament of Uganda. An additional 389 stakeholders received training on labour laws, principles of decent work, and OSH across various regions, including Fort Portal, Hoima, Kibaale, Kasese Municipality, Masindi, Kiryandongo, and Kagadi. Moreover, 165 employers and their representatives were trained on OSH and labour regulations within industrial parks located in Mbale, Namanve, Luzira, and Mbalala, focusing on areas with high employment density.

Occupational Safety and Health Inspectors received continuous professional development through specialised training in diverse thematic areas such as results-based management, women in leadership, and waste management. Eight inspectors were trained as Trainers of Trainers (ToTs) to integrate OSH elements into the National Labour Inspection Checklist, National Guidelines, and the Code of Conduct for Labour Inspectors, expected to standardise inspection practices and strengthen compliance monitoring. A total of 113 Labour Officers from the Eastern, Northern, and Western Regions were trained on critical components of OSH enforcement, including harmonisation of inspection standards and improvement of field-level compliance monitoring. Additionally, 18 Labour Officers were equipped as ToTs focusing on developing strategic compliance plans within Uganda's coffee and tea supply chains. Six inspectors also received ToT training to support compliance planning in these agro-industrial sectors.

Regarding chemical safety and security, 81 workplaces handling toxic chemicals were inspected, reaching 68% of the annual target. Chemical risk assessments were conducted in 20 cosmetics and personal care industries. Training was provided to 200 employers in using the OSH Management Information System, achieving 50% of the yearly target. Thirty employers and supervisors working in gold mining were trained on the safe handling of toxic chemicals, representing 25% of the annual target. OSH inspectors raised chemical safety concerns during stakeholder meetings and workshops covering emergency response planning, ESIA consultations, waste management, water and sanitation, and minerals and extractives sectors. Regional capacity-building efforts advanced through the training of 35 first responders – including 10 Ugandans and 25 participants from other East African Community partner states – during the 7th Operational Training session held in Jinja. Furthermore, the annual subscription to the Organisation for the Prohibition of Chemical Weapons (OPCW) was paid.

Two outputs planned for the third quarter of the fiscal year were not yet implemented. These included the World Day for Occupational Safety and Health, commemorated on 28th April 2025, and the upgrading of the National Chemical Database.

Despite the progress made, the intervention faces ongoing challenges, including limited funding that delays inspections and training, which negatively affects follow-up. A significant portion of the labour force operates in the informal sector, which often lacks adequate OSH measures and oversight. Moreover, data collection and analysis mechanisms for occupational injuries and diseases remain limited, hindering evidence-based policy formulation and intervention efforts.

Overall, the OHS intervention has demonstrated steady progress in strengthening regulatory compliance, inspection capacity, and chemical safety management. Addressing funding constraints and expanding OSH coverage within the informal sector remain critical to achieving full impact.

# 7.4 Overall Challenges

- i.) There has been poor planning, as evidenced by the Government overcommitting resources and lacking proper prioritisation. Several projects across the country have been initiated but remain incomplete, with many stalled and others progressing very slowly. Most of these stalled projects are at Regional Referral Hospitals. Moreover, the Ministry of Health has not been proactive in submitting development projects to the Development Committee for consideration, especially given the number of stalled projects that lack project codes, which prevents them from receiving funding. This poor planning is further demonstrated by delays in acquiring maintenance service providers, resulting in faulty equipment remaining unused in health facilities.
- ii.) Health service delivery has also been disrupted due to the suspension of operations supported by the United States, which has placed additional strain on services.
- iii.) Additionally, rural piped water systems lack effective operational and maintenance structures. This deficiency increases the risk of vandalism, theft of components, and premature breakdown of completed systems, threatening their sustainability and functionality.

#### 7.5 Conclusion

The performance of Population Health, Safety and Management was fair as of 31st December 2024. Service provision and ongoing projects continued, while new development projects were partially impacted by resource flow delays. Most (95%) of the visited entities were at various stages of procurement, awaiting the expected funds during the third quarter of FY 2024/25.

Service provision improved compared to the previous financial year, driven by better delivery of essential medicines and health supplies due to increased budgets and timely access to operational funds. Additionally, several health facilities adopted electronic medical records systems, which enhanced the timeliness of service delivery, except during internet outages. Despite these improvements, the sub-programme continues to face challenges from poor planning strategies, resulting in stalled infrastructure, unsustainable water systems, and emerging service disruptions following the suspension of United States-supported operations within the subprogram.

#### 7.6 Recommendations

- i) MoFPED and Parliament should reinforce their gatekeeping role during budgeting to ensure that critical interventions receive adequate funding.
- ii) The MoH should integrate the affected service areas into the existing framework to reduce service delivery disruptions.
- iii) The MWE and District Local Governments should establish strong management frameworks for rural piped water systems to guarantee effective operation and maintenance.



#### **CHAPTER 8: CONCLUSION AND RECOMMENDATIONS**

# 8.1 Programme Performance

#### Financial performance

The total approved budget for the Human Capital Development (HCD) Programme for FY 2024/25, including external financing, was USh. 10.07 billion, later revised to USh. 10.59 billion. By the mid-point of the financial year, USh. 5.92 billion (58.8%) had been released, of which USh. 2.99 billion (50.4% of the released funds) was spent.

While the budget releases were favourable (exceeding the expected mid-year release of 50%) overall absorption was low, at 50.4%. This was largely due to poor performance under external financing (24.8%) and non-wage recurrent expenditure (45.7%).

Although the wage component showed relatively better utilisation at 70%, it still underperformed, mainly because of delays in the recruitment of teachers and health workers. The low absorption rate highlights persistent challenges such as delayed procurement processes and inadequate planning, which stem from limited institutional capacity within the implementing entities of the Programme.

#### Overall physical performance

The overall programme performance was rated as fair, with 60% of the set targets achieved. Among the sub-programmes, Population Health, Safety, and Management performed better than the others, primarily due to the continuation of rolled-over projects and improved service provision. The Gender and Social Protection Sub-programme also achieved fair performance, reaching 58% of its semi-annual targets. However, the Labour and Employment Services Sub-programme recorded the lowest performance, though still within the fair category.

In terms of intervention-level performance, 63% of the interventions were rated as fair, 19% achieved good performance, and only one intervention attained a very good rating. The Education, Sports, and Skills Development Sub-programme had the highest number of interventions in the fair performance category, followed closely by the Population Health, Safety, and Management Sub-programme. The Labour and Employment Services and Gender and Social Protection Sub-programmes contributed equally to the poor-performing interventions.

The only intervention rated as very good was improving adolescent and youth health under the Education, Sports, and Skills Development Sub-programme. This success reflected expanded access to youth-friendly health services, the promotion of gender equity, and strengthened institutional health systems that support the well-being of adolescents and young people. It also highlighted the effective collaboration among programme agencies.

The poor-performing interventions totalled five. Of these, the Gender and Social Protection and Labour and Employment Services Sub-programmes each contributed two, while the Population Health, Safety, and Management Sub-programme contributed one.

# 8.2 Programme Challenges

i) Poor planning and laxity under the Human Capital Development Programme were evident across various implementing entities. For example, the Education, Sports, and Skills Development Sub-Programme experienced delays in projects such as USEEP,

OFID, and BTVET, primarily due to delayed procurements, land acquisition challenges, and weak operational planning. Similarly, within the Population Health, Safety, and Management Sub-Programme, several projects across the country remain incomplete – many stalled or progressing slowly. Most of the stalled projects are located at Regional Referral Hospitals. Furthermore, the Ministry of Health has not proactively submitted development projects to the Development Committee for consideration, despite the stalled projects lacking project codes, which are required for funding. Poor planning was also reflected in delays in securing maintenance service providers, leaving numerous faulty medical equipment unaddressed in health facilities.

- ii) Uneven regional distribution of GROW loans: Disbursement of GROW loans was disproportionately concentrated in Central and Western Uganda, largely due to limited outreach and the relatively low number of women-led enterprises in the Northern and Eastern Regions. This disparity undermined equitable access to financial support across all targeted regions.
- iii) Low local Government compliance and data limitations, particularly under the Gender and Social Protection Sub-Programme: Local Governments often failed to submit accountability documents and beneficiary files on time, leading to delays in fund disbursement and service delivery. Additionally, limited technical capacity in data management systems affected the accuracy and timeliness of reporting, thereby hindering effective planning and monitoring.
- iv) Health service delivery disruptions occurred following the suspension of operations supported by the United States government.
- v) Non-functional management structures: Many rural piped water systems lack effective operation and maintenance frameworks, which has increased the risk of vandalism, theft of components, and premature breakdowns of the systems.

# 8.3 Programme Conclusion

The programme performance was rated as fair, achieving 60% of the set targets. Overall, service provision outperformed infrastructure development, as approximately 85% of the programme's procurements remained incomplete. A comparison across sub-programmes showed that the Population Health, Safety, and Management Sub-programme performed better than its counterparts, largely due to the continuation of rolled-over projects and enhanced service delivery.

The Gender and Social Protection Sub-programme achieved 58% of its semi-annual targets, reflecting a similar performance level. However, the Labour and Employment Services Sub-programme recorded the lowest performance within the fair category.

The attainment of programme results continues to be hindered by several factors, including poor planning, disparities in access to financial services intended to support women-led businesses, limited compliance, non-functional structures for managing rural water systems, and service disruptions caused by the suspension of funding from the United States Government.

#### **Recommendations**

i) MoFPED and Parliament should strengthen their gatekeeping role during the budgeting process to ensure that critical interventions receive adequate funding. Additionally, training in project planning, sequencing, and procurement management should be enhanced.



- ii) Strengthen regional outreach and enterprise development in underserved areas: MGLSD should collaborate with Local Governments and women's associations to intensify sensitisation efforts, enterprise development training, and financial inclusion campaigns in Northern and Eastern Uganda. This will increase the presence of women-led enterprises and promote more equitable access to GROW financing.
- iii) Enhance Local Government compliance and data systems: MGLSD should enforce reporting deadlines and accountability standards at the LG level. Furthermore, investment in digital infrastructure and capacity-building is needed to improve the accuracy, timeliness, and usefulness of programme data for planning and evaluation.
- iv) MoH should integrate USAID-affected service areas into existing frameworks to minimise service delivery disruptions.
- v) MWE, in collaboration with District Local Governments, should establish robust management frameworks for rural piped water systems to ensure effective operation and maintenance.

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## **ANNEXES**

## Annex 1: Interventions monitored for FY 2024/25 under the Human Capital Development Programme

Lead MDA	Monitored Intervention	Coverage	Institutions/ Locations Visited
013 Ministry of Education and Sports	Institutionalise training of ECD caregivers at public PTCs and enforce the regulatory and quality	Basic Education (Pre- Primary)	MoES Headquarters
111: NCDC	assurance system of ECD standards.	Headquarters	Kyambogo
013 Ministry of Education and Sports.	Improve adolescent and youth health	Gender Unit	MoES Headquarters, Kampala  - Basic Education, Department
013 Ministry of Education and Sports.	Equip and support all lagging primary, secondary schools, and higher education institutions to	Instructional Materials Unit	MoES Headquarters, Kampala  – Pre-Primary and Primary Education
122: KCCA	meet the basic requirements and minimum standards.	Directorate of Education and Social Services	KCCA Headquarters
013 Ministry of Education and Sports.  Local Governments	Roll out Early Grade Reading (EGR) and Early Grade Maths (EGM) in all primary schools to enhance proficiency in literacy and numeracy	Pre-Primary and Primary Education Department	MoES Headquarters— Pre- Primary and Primary Education Department
013 Ministry of Education and Sports	Upgrade the Education Management Information System to include functions for tracking enrolment, dropout, retention, and uniquely identify learners, teachers, and institutions.	Planning	MoES Headquarters– Planning Unit
013 Ministry of Education and Sports	Provide early exposure of STEM/STEI to children.	Pre-Primary and Primary Education Department	MoES Headquarters
013 Ministry of Education and Sports	Provide the critical physical and virtual science infrastructure in all secondary schools and training institutions.	The Uganda Secondary Education Expansion Project (USEEP)	Project Coordination Unit — Rwenzori Courts
		The OPEC Fund for International Development (OFID) Projects	MoES Headquarters— Arab- funded Projects Coordination Unit
013: MoES, MoFPED, Local Governments		The Uganda Intergovernmental Fiscal Transfers (UgIFT)	MoFPED – Budget Policy and Evaluation Department (BPED) Local Governments



Lead MDA	Monitored Intervention	Coverage	Institutions/ Locations Visited	
301: Makerere; 302: MUST; 306:Muni;		Support to Universities' Infrastructural Development and Retooling Projects	Makerere, MUST, Muni, MoM, Soroti, Lira, Gulu; Kyambogo and Busitema	
313:MoM; 308:Soroti:		<b>3</b> 3,222		
310:Lira;				
309:Gulu; Kyambogo:304;30 5:Busitema				
013 Ministry of Education and Sports	Prioritise investment in STEI/STEM research and incubation to transform it into goods and services for national growth and	Support to research institutions in public universities	MoES – Higher Education Department	
301: Makerere; 302: MUST; 306: Muni;	societal well-being.	Research and Innovation Fund	Makerere, MUST, Muni, MoM, Soroti, Lira, Gulu, Kyambogo and Busitema	
313: MoM;				
308: Soroti:				
310: Lira;				
309: Gulu; Kyambogo:304;30 5: Busitema				
166: National Council of Sports;	Leverage public-private partnerships for funding of sports and recreation programmes.	National Council of Sports	Lugogo	
166: National Council of Sports;	Develop a framework for talent identification in sports, performing	National Council of Sports	Lugogo	
013 Ministry of Education and Sports	and creative arts.	Physical Education and Sports	MoES Headquarters- PES Department	
013 Ministry of Education and Sports	Maintain existing facilities and construct appropriate and standardised recreation and sports infrastructure at national, regional, LG and school levels in line with the country's niche sports (i.e.,	Phase I construction of the National High- Altitude Training Centre (NHATC)	MoES Headquarters – PES Department	
166: National Council of Sports;	football, netball, athletics, and boxing).	Redevelopment of the KCCA Phillip Omondi Stadium-Phase 2	KCCA – Lugogo	
		The construction of Hoima City Stadium	Lugogo and Hoima City	

Lead MDA	Monitored Intervention	Coverage	Institutions/ Locations Visited
		Upgrading of training grounds at Kyambogo University	Lugogo and Kyambogo University
018: Ministry of Gender, Labour, and Social Development	Establish a functional labour market.	Labour and Industrial Relations and Employment Services	Kampala
165: Uganda Business and Technical Examination Board	Roll out the modularised TVET curricula for all formal TVET programmes to attain a flexible demand-driven TVET system in Uganda.	MoES (TVET Trainers' Training Research and Innovation Department) and UBTEB	MoES Headquarters– Legacy Towers and UBTEB Ntinda Offices.
165: Uganda Business and Technical Examination Board	Support the TVET institutions that have the minimum requisite standards to acquire International Accreditation Status.	Examination management	UBTEB Ntinda Offices
013 Ministry of Education and Sports	Provide incentives to increase enrolment in skills-scarce TVET programmes to reverse the currently inverted skills triangle. Provide incentives to increase enrolment in skills-scarce TVET programmes to reverse the currently inverted skills triangle.	Health Education and Training Department	MoES Headquarters – Legacy Towers
165: Uganda Business and Technical Examination Board	Accelerate the acquisition of urgently needed skills in key growth areas.	Examination management; General Administration and Support Services; Administrative and Support Services 1,792 Uganda Business and Technical Examinations Board Infrastructure Development Project.	UBTEB Ntinda Offices/Kyambogo construction site
014: Ministry of Health	Improve Maternal, Adolescent and Child Health Services at all levels of care.	National	MoH, RRHs, Kawempe RH, Mulago Specialised Maternal, Neonatal Hospital
014: Ministry of Health	Reduce the burden of communicable diseases with a focus on high-burden diseases (malaria, HIV/AIDS, TB, neglected tropical diseases, and hepatitis), epidemic-prone diseases, emphasising Primary Health Care Approach.	National	MoH, NRHs, RRHs, UBTS, and LGs



Lead MDA	Monitored Intervention	Coverage	Institutions/ Locations Visited
014: Ministry of Health	Prevent and control non-communicable diseases with a specific focus on cancer, cardiovascular diseases and trauma.	National	MOH, UHI, UCI and RRHs, Gulu Regional Cancer Centre
014: Ministry of health	Improve the functionality of the health system to deliver quality and affordable preventive, promotive, curative, and palliative health care services.	National	MoH, Health Service Commission (HSC), NMS, Uganda Blood Transfusion Service (UBTS), National Referral Hospitals (NRHs), RRHs, LGs, and professional councils), Uganda Virus Research Institute
014: Ministry of Health	Increase financial risk protection for health with emphasis on implementing the National Health Insurance Scheme.	MoH headquarters	МоН
014: Ministry of Health	Increase access to Sexual Reproductive Health (SRH) and rights with a special focus to family planning.	National	MoH, NRHs, RRHs, and LG
014: Ministry of Health	Reduce the burden of the HIV epidemic and its impact on the socio-development of communities, using the multi-sectoral approach.	National	MoH, UAC, NRH, RRHs and LGs
014: Ministry of Health	Promote health research, innovation, and technology uptake.		Uganda Virus Research Institute, UHI, UCI and NRHs
018 Ministry of Gender, Labour and Social Development	Improve Occupational Safety and Health (OSH) management.	National	MoGLSD, LGs
019 Ministry of Water and Environment	Increase access to inclusive safe Water, Sanitation and Hygiene (WASH), with emphasis on increasing coverage.	National	MoWE, Ogwari solar-powered water supply system, Pakiya solar-powered water supply system, Aloi solar-powered water supply system, Oumu solar-powered water supply system, Bitsya water supply system, Karuma water supply system, Parabongo water supply system, Adwong solar-powered water supply, construction of Tirinyi, Kibuku, Kadama and Budaka water supply and sanitation systems
Ministry of Gender, Labour	Expand the scope and coverage of care, support and social protection	National	MoGLSD, SAGE Main Office (Wandegeya), Mbarara

Lead MDA	Monitored Intervention	Coverage	Institutions/ Locations Visited
and Social Development	services for the most vulnerable groups and disaster-prone communities.		District, Ruti Rehabilitation Centre (Mbarara), Mbarara Regional Technical Support Unit, Kamuli District, Kabale District, Namutumba District, Mbale District, Mbale Remand Home. Jinja DLG, Mbale Regional Technical Support Unit
	Expand livelihood support, public works, and labour market programs to promote green and resilient growth	National	MGLSD, Kampiringisa National Rehabilitation Centre, Naguru Remand Home, Naguru Reception Centre, Kabale Remand Home, Mpumudde Rehabilitation Centre. Namutumba District, Mbarara DLG, Kabale, Masaka, Mbale Kamuli, Masindi, Kireka Rehabilitation Centre, Lweza Rehabilitation Centre
	Promote Women's economic empowerment, leadership and participation in decision making through investment in entrepreneurship programs, business centres	National	MoGLSD, Masaka GBV shelter, Masaka District, Kamuli GBV shelter, Jinja DLG, Mbale, Wakiso, Namutumba GBV shelter, Private Sector Foundation-Uganda
Equal Opportunities Commission	Support gender equality and equity-responsive budgeting in all sectors and LGs.	National	Equal Opportunities Commission, MGLSD, Namutumba District, Mbarara DLG, Kabale, Masaka, Mbale Kamuli, Jinja, Wakiso



## Annex 2: Interventions under the Human Capital Development Programme

No	INTERVENTION COVERED
	EDUCATION SPORTS AND SKILLS
1	Institutionalise training of ECD caregivers at public PTCs and enforce the regulatory and quality assurance system of ECD standards
2	Improve nutrition and food safety with emphasis on children aged under 5, school children, adolescents, pregnant and lactating women, and vulnerable groups
3	Increase access to immunisation against childhood diseases
4	Improve adolescent and youth health
5	Strengthen the family unit to reduce domestic violence, child deprivation, abuse, and child labour
6	Equip and support all lagging primary, secondary schools, and higher education institutions to meet the basic requirements and minimum standards
7	Roll out Early Grade Reading (EGR) and Early Grade Maths (EGM) in all primary schools to enhance proficiency in literacy and numeracy
8	Implement an integrated ICT-enabled teaching
9	Develop and implement a distance learning strategy
10	Upgrade the Education Management Information System to include functions for tracking enrolment, dropout, retention, and uniquely identify learners, teachers, and institutions
11	Integrate Education for Sustainable Development (ESD) into the school curriculum
12	Implement a National Strategy against Child Marriage and Teenage Pregnancy
13	Provide early exposure to STEM/STEI to children (e.g., introduction of innovative science projects in primary schools)
14	Provide the critical physical and virtual science infrastructure in all secondary schools and training institutions
15	Adopt science project-based assessment in the education curriculum
16	Promote STEM/STEI-focused strategic alliances between schools, training institutions, high-calibre scientists, and industry
17	Link primary and secondary schools to existing science-based innovation hubs
18	Develop a framework for talent identification in sports, performing and creative arts
19	Introduce accredited sports and physical education as stand-alone curricular subject(s) in schools and for sports coaches, administrators, and technical officials
20	Establish regional sports-focused schools/sports academies to support early talent identification and development, and the training of requisite human resources for the sports sub-sector
21	Maintain existing facilities and construct appropriate and standardised recreation and sports infrastructure at national, regional, and local Government and schools in line with the country's niche sports (i.e., football, netball, athletics, and boxing)
22	Leverage public-private partnerships for funding sports and recreation programmes

No	INTERVENTION COVERED
23	Develop and implement professional sports club structures to promote formal sports participation
	LABOUR AND EMPLOYMENT SERVICES SUB-PROGRAMME
1	Establish a functional labour market
2	Roll out the modularised TVET curricula for all formal TVET programmes as to attain a flexible demand-driven TVET system in Uganda
3	Support the TVET institutions that have the minimum requisite standards to acquire International Accreditation Status
4	Refocus and support vocational training institutions (schools, institutes, and colleges) to deliver a dual training system for TVET (i.e., 80 percent training in industry and 20 percent learning in the institution) and universities (i.e., 40 percent training in industry and 60 percent training in institution).
5	Provide incentives to increase enrolment in skills-scarce TVET programmes to reverse the currently inverted skills triangle
6	Implement the National Strategy for Girls' Education by, among others, strengthening affirmative action for the enrolment of girls and PWDs in BTVET
7	Accelerate the acquisition of urgently needed skills in key growth areas.
8	Provide the required physical infrastructure, instruction materials and human resources for higher education institutions, including Special Needs Education
9	Implement an incentive structure for the recruitment, training, and retention of the best brains in the teaching profession across the entire education system
10	Introduce initiatives for retaining children in formal school for at least 11 years
11	Develop digital learning materials and operationalise Digital Repository
	GENDER AND SOCIAL PROTECTION
1	Expand the scope and coverage of care, support and social protection services for the most vulnerable groups and disaster-prone communities
2	Establish early warning systems for disaster preparedness, including risk reduction and management of national and global health risks
3	Expand livelihood support, public works, and labour market programmes to promote green and resilient growth
4	Expand and reform contributory social security schemes to the informal sector to cover more risks and provide a wider range of benefits
5	Promote women's economic empowerment, leadership, and participation in decision-making through investment in entrepreneurship programs, business centres
6	Scale up gender-based violence (GBV) interventions at all levels
7	Support gender equality and equity-responsive budgeting in all sectors and LGs
8	Implement a National Male Involvement Strategy in the promotion of gender equality
9	Implement the Uganda Gender Policy Action Plan



No	INTERVENTION COVERED				
10	Reform and strengthen youth employment policies and programmes towards a demand-driven approach				
	POPULATION HEALTH, SAFETY AND MANAGEMENT				
1	Improve Maternal, Adolescent and Child Health Services at all levels of care				
2	Reduce the burden of communicable diseases with a focus on high-burden diseases (malaria, HIV/AIDS, TB, neglected tropical diseases, and hepatitis), and epidemic-prone diseases emphasising the Primary Health Care Approach				
3	Prevent and control non-communicable diseases with a specific focus on cancer, cardiovascular diseases and trauma				
4	Improve the functionality of the health system to deliver quality and affordable preventive, promotive, curative, and palliative health care services.				
5	Increase financial risk protection for health with emphasis on implementing the National Health Insurance Scheme				
6	Reduce the burden of the HIV epidemic and its impact on the socio-development of communities, using the multi- sectoral approach				
7	Promote health research, innovation, and technology uptake				
8	Increase access to sexual reproductive health and rights with special focus on family planning services				
9	Increase access to inclusive safe water, sanitation, and hygiene with emphasis on increasing coverage of improved toilet facilities and hand washing practices				
10	Establish and operationalise mechanisms for effective collaboration and partnership for UHC at all levels was not monitored				
11	Establish and operationalise a multisectoral home-grown school feeding initiative				
12	Establish and operationalise mechanisms for effective collaboration and partnership for UHC at all levels				
13	Improve nutrition and food safety with emphasis on children aged under 5, school children, adolescents, pregnant ar lactating women, and vulnerable groups				
14	Promote the delivery of disability-friendly health services, including physical accessibility and appropriate equipment				
15	Promote physical health activities and behavioural change across all categories of the population				
16	Strengthen population planning and development, including civil registration, vital statistics registration, and population data bank at national and sub-national levels				
	EDUCATION SPORTS AND SKILLS =23				
	Labour and Employment Services =11				
	Gender and Social Protection =10				
	Population Health, Safety and Management =16				
	TOTAL 60				



Annex 3: Performance of Education, Sports, and Skills Development Sub-programme by 30th June 2024

Remarks			Targets partially achieved	Partially achieved	Partially achieved	Achieved	Achieved
	mance	Physical Performanc e Score (%)	56.63	00.09	53.66	75.77	89.67
	Physical Performance	Cum. Achieved Quantity	35.00	00.09	30.20	75.00	40.00
D	Ā	Annual Target	100.00	100.00	100.00	100.00	100.00
	e,	% of Budget Spent	68	m	52	92	87
nce	Financial Performance	% of Budget Received	61.8	100.0	56.3	99.0	44.6
Outputs Performance	Financia	Annual Budget (USh.)	285,709,166	185,000,000	96,663,667	9,460,686,762	127,498,149,671
Outputs Performance	Output		MoES: Dialogue on the licensing, registration of ECCE held; ii) Orientation of ECCE teachers on parenting education in 4 LGs carried out; iii) ECCE centres mapped out and profiled	NCDC: Delivery of quality ECCE services, i.e., Learning Framework finalised to support teaching of finalised; ii) Handwriting guidelines and handbooks (cursive) developed; and iii) Teachers/instructors oriented on the reviewed Learning Framework.	Monitoring, inspection, and support supervision	Provision of instructional materials	Examination, assessment, and certification
	Intervention		training of ECD caregivers at public PTCs and enforce the regulatory and quality assurance system of the proposition of the pro		=		institutions to meet the basic requirements and



Outputs Performance Financial Performance
Financ
Annual Budget (USh.)
11,951,495,034
23,325,572,399
16,532,800,000
440,899,041
2,987,037,000



Remarks				Partially achieved	Not achieved	Partially achieved	Achieved	Partially achieved	Achieved	Partially achieved	Partially achieved
	ттапсе	Physical Performanc e Score (%)		66.03	35.77	47.73	80.16	70.37	86.77	44.00	40.85
	Physical Performance	Cum. Achieved Quantity		65.00	18.00	24.00	87.00	30.00	42.00	44.00	26.00
	<u>ā</u>	Annual Target		100.00	100.00	100.00	100.00	100.00	100.00	100.00	100.00
	93	% of Budget Spent		100	10	23	77	16	38	71	44
nce	Financial Performance	% of Budget Received		98.4	50.3	50.3	108.5	42.6	48.4	100.0	63.6
Outputs Performance	Financia	Annual Budget (USh.)		2,081,532,087	362,076,250,949	121,964,162,828	3,559,235,579	13,835,428,568	4,500,000,000	2,006,434,800	4,276,800,000
	Output	ut procured.		Sets of mini-laboratories procured and distributed; and one National Science Fair in secondary schools facilitated	Uganda Secondary Education Expansion Project (USEEP)	OPEC Fund for International Development (OFID) (Arabfunded Projects)	Mbarara University of Science and Technology	Makerere University	Lira University	Mountains of the Moon University	Muni University
	Intervention			Provide early exposure to STEM/STEI to children (e.g., introduction of innovative science projects in primary schools)	the critical and virtual	science infrastructure in all secondary schools and training institutions			ı	ı	



Remarks		al manc e (%)	41 Not achieved	93 Partially achieved	62 Achieved	02 Partially achieved	90 Partially achieved	65 Partially achieved	35 Partially achieved
	Physical Performance	Physical Performanc ty e Score (%)	10 26.41	0 59.93	10 82.62	33.02	0 64.90	0 65.65	70.35
	Physical F	ual Cum. get Achieved Quantity	100.00 23.00	33.00	100.00 45.00	100.00 33.00	100.00 44.00	100.00 50.00	00.09
		Annual et Target t	58 100	100 100.00	16 100	4 100	58 100	100	100.00
	mance	t Budget red Spent							
rmance	Financial Performance	t % of Budget Received	1.78 00	1 55.1	0 54.5	5 99.9	6 87.1	54 55.1	54.5
Outputs Performance	Fina	Annual Budget (USh.)	10,128,600,000	6,903,917,701	7,327,911,200	3,320,992,415	5,383,896,266	779,161,715,654	657,344,420
	Output		Soroti University	Gulu University	Kabale University	Kyambogo University	Busitema University	Delivery of Tertiary Education: General Administration and Support Services	MoES (PES) Department): i) National and Regional Sports Competition held; ii) National Physical Education and Sports Policy (NPESP) printed and distributed/ disseminated); Guidelines for streamlining organisation and management of physical education in education institutions reviewed; iv) Assorted
	Intervention			1				STEM/STEI- strategic between	schools, training institutions, high-caliber scientists, and industry



Remarks			Partially achieved	Partially achieved	Partially achieved	Partially achieved
	rmance	Physical Performanc e Score (%)	59.95	65.01	41.57	70.35
	Physical Performance	Cum. Achieved Quantity	52.00	28.00	23.50	67.00
	ā	Annual Target	100.00	100.00	100.00	100.00
	93	% of Budget Spent	4	O	53	100
ınce	Financial Performance	% of Budget Received	6.99	67.8	76.2	95.2
Outputs Performance	Financi	Annual Budget (USh.)	8,615,001,469	10,000,000,000	101,350,000,000	657,344,420
	Output		National Council of Sports: i) International games facilitated; and ii) Assorted sports equipment procured and distributed	Redevelopment of the KCCA Phillip Omondi Stadium- Phase 2 commenced.	The construction of Hoima City Stadium; upgrading of training grounds at Kyambogo University	The MoES planned outputs are: iii) National and Regional PES Festivals conducted; iv) Assorted ball, gymnastic equipment and materials, athletic implements and specialised machines provided to education institutions; v) Operations of the NHATC-Teryet supported; vi) National EIs teams facilitated to participate in international competitions; vi) National and regional education institutions Sports competitions organised, coordinated and
	Intervention					Develop a framework for talent identification in sports, performing and creative arts



		Outputs Performance	nce					Remarks
Intervention	Output	Financia	Financial Performance	ø.	Ph	Physical Performance	mance	
		Annual Budget (USh.)	% of Budget Received	% of Budget Spent	Annual Target	Cum. Achieved Quantity	Physical Performanc e Score (%)	
	supervised; vii) Districts and Regional Sports Centres monitored and support supervised; viii) One National Secondary School Music, Dance and Drama festival facilitated; and ix) One East African essay writing competitions conducted at National Level.  National Council of Sports: i) International Games facilitated; and ii) assorted sports equipment procured and distributed	10,000,000	86.7	100	100.00	52.00	59.95	Partially achieved
Maintain existing facilities and construct appropriate and standardised recreation and sports	Redevelopment of the KCCA Phillip Omondi Stadium – Phase 2 commenced	10,000,000,000	43.1	100	100.00	28.00	65.01	Partially achieved



		Outputs Performance	nce					Remarks
Intervention	Output	Financia	Financial Performance	ę,	ā	Physical Performance	rmance	
		Annual Budget (USh.)	% of Budget Received	% of Budget Spent	Annual Target	Cum. Achieved Quantity	Physical Performanc e Score (%)	
infrastructure at national, regional, and local Government and schools in line with the country's niche sports (i.e., football, netball, athletics, and boxing)	The construction of Hoima City Stadium; upgrading of training grounds at Kyambogo University	101,350,000,000	56.5	68	100.00	23.50	41.57	Partially achieved
Leverage public-private partnerships for	National Sports Federations and Associations supported	50,095,520,033	100.0	100	100.00	56.90	56.90	Partially achieved
runding of sports and recreation programmes.	National Sports Federations and Associations supported to subscribe to international sports federations	10,000,000	100.0	76	100.00	20.00	0.00	Not achieved
	Total	757,356,400,373	144.7	51				
Average Output Performance	nance						58.27	Partially achieved



Annex 4: Performance of Labour and Employment Sub-programme by 31st December 2024

Remarks				Partially achieved	Partially achieved	Achieved		Partially achieved
	mance	Physical	Performance Score (%)	41.92	90.00	77.42	65.98	53.3
	Physical Performance	Cum.	Achieved Quantity	20.00	30.00	20.00	26.00	2.00
	Phy	Annua	l / Target (	100.00	100.00	100.00	100.00	100.00
			Receipt s	59.09	100.00	41.29	98.09	4.51
Se .	Financial Performance		Budget Receive	47.71	50.00	25.83	48.48	26.78
<b>Outputs Performance</b>	Financial	Annual Budget	(USh.)	415,000,000	500,000,000	000'000'09	3,312,705,000	15,816,000,302
O	Output			000039: Policies and Regulations (Labour Market Information System established)	320144: Labour Arbitration (Minimum Wage Advisory Board, Medical Arbitration Board, Labour Advisory Board in place	320143: Industrial Peace and Harmony	000023: Inspection and monitoring	a) TVET-OM data collection and survey conducted b) TVET Council preparatory activities facilitated c) 72 TVET institutions monitored and support d) Consultative meetings and conferences on TVET Policy Operating Guidelines and Standards; e) Public awareness drives on modular programmes f) Modularised curricula printed and disseminated. Requirements for implementation inspected and enforced; g) Public awareness drives on modular programmes h) TVET operating procedures and standards developed and disseminated
	Intervention			Establish a functional				Roll out the modularised TVET curricula for all formal TVET programmes to attain a flexible demand-driven TVET system in Uganda



Remarks		Physical Performance Score (%)		53.63 Partally achieved	49.13 Partially achieved	48.53 Partially achieved	71.01 Achieved	0.00	52.40
	Physical Performance			26.40 53	16.20 49	0.00	0.00	0.00	52
	Physical	Annua Cum. I Achieved Target Quantity		100.00 26	38.00	100.00	38.00	0.00	
	93	% of ARCCEIDT S Spent T	70 07	70.81	4.51	70.81	98.85	35.53	
ance	Financial Performance	Budget Receive		54.40	0 26.78	54.40	60.03	5 32.54	4
Outputs Performance	Financi	Annual Budget (USh.)	2 242 705 000	3,312,705,000	205,338,000,000	14,556,727,897	21,592,736,776	264,041,169,975	Average Outputs Performance
	Output		i) 142 public and 60 private institutions support and supervised	320140: Decent and productive employment increased	1778: GROW	Project: 1803 Development and Expansion of Health Training Institutions (Infrastructure Development and Management) Assessment and profiling, education and skills development	Quality, standard, and accreditation, examinations and assessments, construction management (construction of the five-story UBTEB Assessment Centre Project)	Total	Average Outp
	Intervention			lemen intive	the recruitment, training, and retention of the best brains into the teaching profession across the entire education system	Provide incentives to increase enrolment in skills-scarce TVET programmes to reverse the currently inverted skills triangle	Accelerate the acquisition of urgently needed skills in key growth areas		



Annex 5: Performance of Gender and Social Protection Sub-programme by 31st December 2024

Intervention	Output	Financial Performance	ormance		Physical Performance	formance		Remarks
		Annual Budget (USh.)	% Of Budg et Recei	% Of Recei pts Spent	Annual Target( %)	Cum. Achiev ed Quantit y(%)	Physical Performan ce Score (%)	
Expand the scope and coverage of care, support	000039: Policies, Regulations and Standards (Policy and legal framework on social protection strengthened)	1,304,11	49.50	81.42	100.0	20	40.4	Poor performance
protection services for the most	320141: Empowerment and Protection (Adult disability benefits provided)	111,615, 863,500	54.46	93.82	100	25	45.9	Poor performance
vulnerable groups and disaster-prone communities	320147: Transfer to statutory councils (newly appointed members)	1,452,56 0,000	30.91	56.39	100	10	32.4	Poor performance
Expand livelihood support, public	320141: Empowerment and Protection (Youth Livelihood Programme strengthened)	27,440,0 00,000	51.53	100.0	100	30	58.2	Fair performance
labour market programs to promote green	320146: Support to special interest groups (social care programmes implemented)	1,452,11 1,540	70.66	81.36	100	50	70.8	Good performance
and resilient growth	320147: Transfer to statutory councils (social care programmes implemented)	1,270,01	50.47	70.05	100	35	69.3	Fair performance



	Output	Financial Performance	ormance	1	Physical Performance	formance		Remarks
		Annual Budget (USh.)	% Of Budg et Recei ved	% Of Recei pts Spent	Annual Target( %)	Cum. Achiev ed Quantit y(%)	Physical Performan ce Score (%)	
320142: participat	Enhance women's	260,000, 000	26.77	94.73	100	20	74.7	Good performance
3207 Base GBV stak	320145: Response to Gender-Based Violence (Inspection of GBV shelters, capacity building of stakeholders, 16 days of activism)	65,000,0 00	40.77	96.83	100	50	49.1	Poor performance
320 coul	320147: Transfer to statutory councils (women's participation in development increased)	1,288,42 8,669	59.64	64.83	100	e 30	50.3	Fair performance
Stanc Stanc LGs i gendk built)	000039: Policies, Regulations and Standards (capacity of MDAs and LGs in gender mainstreaming and gender-responsive budgeting built)	719,822, 500	38.21	99.72	100	90	78.5	Good performance
000 (gel	000090: Climate change adoption (gender and equity assessments conducted)	20,000,0	40.00	97.12	100	30	75.0	Good performance



Intervention	Output	Financial Performance	ormance		Physical Performance	rformance		Remarks
		Annual Budget (USh.)	% Of Budg et Recei	% Of Recei pts Spent	Annual Target( %)	Cum. Achiev ed Quantit y(%)	Physical Performan ce Score (%)	
	Total	146,887, 917,489	53.67	94.00			58.60	Fair performance

Annex 6: Performance of Population Health Safety and Management Sub-programme 31st December 2024

Remark			Good progress	Good progress	Good progress	Fair progress	Good progress	Poor progress	Fair progress	Good progress
	9:	Physical performance Score (%)	72.83	80.00	70.00	55.86	70.00	26.67	50.00	100.00
	Physical Performance	Cum. Achieved Quantity	0.40	0.60	70.00	0.25	0.35	0.20	0.50	0.20
	Physical	Annual Target	06:0	1.00	100.00	06:0	1.00	0.75	1.00	1.00
		% of budget spent	61	75	321	20	20	100	100	19
	nce	% of budget received	61.0	75.0	321.3	49.7	50.0	100.0	100.0	18.9
Outputs Performance	Financial Performance	Annual Budget ( USh.)	253,394,332,839	30,687,369,807	1,079,255,025,158	11,169,108,385	634,200,000	8,126,554,061	47,466,942,063	6,483,902,125
0	Output		Target population fully immunised	Reduced morbidity and mortality due to HIV/AIDS, TB and malaria and other communicable diseases	Epidemics detected in a timely manner	Health workers recruited to fill vacant posts	Emergency medical services	Construction of functional Intensive Care Units (ICUs)	Hospitals and HCs rehabilitated/expanded	Health facilities at all levels equipped with appropriate and modern medical and
	Intervention		Reduce the burden of communicable diseases with a focus on high-burden	diseases (malaria, HIV/AIDS, TB, neglected tropical diseases, and hepatitis), epidemic-prone	diseases emphasising Primary Health Care Approach	e func system and	preventive, promotive, curative and palliative health care services			



	0	Outputs Performance						Remark
Intervention	Output	Financial Performance	ınce		Physical	Physical Performance	o o	
		Annual Budget ( USh.)	% of budget received	% of budget spent	Annual Target	Cum. Achieved Quantity	Physical performance Score (%)	
	diagnostic equipment							
	Essential medicines and health supplies provided to health facilities	500,306,954,256	68.7	69	1.00	0.21	30.57	Poor progress
	Blood and blood products provided	13,469,595,341	73.7	74	1.00	0.54	73.27	Good progress
Reduce the burden of the HIV epidemic and its impact	UAC retooled	557,369,999	96.1	96	100.00	0.00	0.00	Poor progress
on the socio-development of communities, using the	HIV/AIDS mainstreaming	1,430,000,000	0.62	62	100.00	65.00	82.24	Good progress
multi-sectoral approach	Administrative and support services	2,324,478,722	49.2	49	100.00	30.00	60.92	Fair progress
	Monitoring and evaluation	675,876,800	6.79	89	100.00	0.50	71.43	Good progress
	HIV&AIDS research, advocacy & communication	886,060,000	67.4	29	100.00	40.00	59.39	Fair progress
	Mainstreaming, outreach & compliance	1,830,000,000	60.1	09	100.00	45.00	74.91	Good progress
	National policies and programming	230,000,000	82.6	83	100.00	0.62	77.50	Good progress



	0	<b>Outputs Performance</b>						Remark
Intervention	Output	Financial Performance	nce		Physical	Physical Performance	o o	
		Annual Budget ( USh.)	% of budget received	% of budget spent	Annual Target	Cum. Achieved Quantity	Physical performance Score (%)	
Prevent and control non-communicable diseases	Heart care services provided	147,492,018,685	17.3	17	1.00	0.10	57.77	Fair progress
with specific focus on cancer, cardiovascular	Cancer care services provided	139,296,474,614	33.8	34	1.00	0.20	59.13	Fair progress
diseases and trauma	Medical services provided – Trauma centre under establishment	12,905,603,334	50.1	50	1.00	0.30	59.91	Fair progress
Improve maternal, adolescent and child health	Adolescent and school health services provided	184,000,000	0.79	29	1.00	0.52	77.61	Good progress
ספו עוכפט מו מון ופעפוט טו כמופ	Child health services provided	112,000,000	55.6	26	1.00	0.40	71.99	Good progress
Increase access to sexual reproductive health and rights with special focus on family planning services	Reproductive and infant health services provided	36,202,693,589	81.5	82	1.00	0.63	77.29	Good progress
Increase financial risk protection for health with emphasis on implementing the national health insurance scheme	Equity and efficiency in resource mobilisation	1,747,000,000	78.1	78	1.00	0.30	38.42	Poor progress
Promote health research, innovation, and technology	Virus research, innovation, techology, surveillance	4,796,000,000	50.0	50	100.00	27.50	54.95	Fair progress



	0	Outputs Performance						Remark
Intervention	Output	Financial Performance	nce		Physical	Physical Performance	O O	
		Annual Budget ( USh.)	% of budget received	% of budget spent	Annual Target	Cum. Achieved Quantity	Physical performance Score (%)	
uptake	undertaken							
Increase access to inclusive safe water, sanitation and hygiene with emphasis on increasing coverage of improved toilet facilities and hand-washing practices	Access to inclusive safe water supply and sanitation in rural areas increased (piped water supply systems, point water sources, and sanitation facilities constructed)	209,370,207,260	20.4	20	100.00	12.00	58.79	Fair progress
	Access to inclusive safe water supply and sanitation in urban areas increased (piped water supply systems, faecal sludge treatment plants, and public and institutional sanitation facilities constructed)	239,081,215,740	35.1	35	100.00	18.00	51.31	Fair progress
	Support to improved WASH services in institutions (sanitation and hygiene promotional campaigns, advocacy, contract staff salaries among others)	34,783,403,720	28.4	28	100.00	15.00	52.90	Fair progress
Improving Occupational Safety and Health (OSH)	Workplace injuries, accidents and health hazards reduced	80,000,000	80.9	81	100.00	50.00	61.84	Fair progress

	0	<b>Jutputs Performance</b>						Remark
Intervention	Output	Financial Performance	nce		Physical	Physical Performance	a)	
		Annual Budget ( % USh.) bud	lget sived	of % of Annual Cum. budget Target Achiev	Annual Target	ved	Physical performance Score (%)	
management	Chemical safety & security management strengthened	65,688,500	50.0	20	100.00	25.00	50.00	Fair progress
	CBRNe policy developed	79,160,000	50.0	50	100.00	30.00	00.09	Fair progress
Average Outputs Performance	ce						60.89	Fair progress



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