



# World Food Programme

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## A Report from the Office of Evaluation



*Technical Reports - Evaluation of  
WFP's Development and Recovery  
Portfolio in Uganda  
(5-28 September 2004)*

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The evaluation team visited Uganda from 5 through 28 September 2004. On behalf of the team, the team leader wishes to express its appreciation to all those who facilitated the team's work in the field and in headquarters.

This document is composed of the technical reports of the team members. It is a working document to stimulate discussions at the country office level with regard to the preparation of new phase of the PRRO.

Responsibility for the content and presentation of findings and recommendations rests with the evaluation team. The views expressed in the report do not necessarily correspond to views of WFP, recipient government or implementing partners.

## **Mission Composition**

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## Acronyms and Abbreviations

ALNAP	Active Learning Network for Accountability and Performance in Humanitarian Action
ABEK	Alternative Basic Education in Karamoja
ART	Anti-Retroviral Therapy
ARV	Anti-Retroviral (drug)
CBO	Community Based Organisation
CCM	Country Coordination Mechanism
CDP	Central Distribution Point
CDR	Commodity Dispatch Report
CHAI	Community HIV/AIDS Initiative
COMPAS	Commodity Movement Processing & Analysis System
CP	Country programme
CTS	Commodity Tracking Software
CSB	Corn-soya blend
DDMC	District Disaster Management Committee
DEO	District Education Officer
DSMR	Daily Stock Movement Reports
EDP	Extended Delivery Point
ECW	Enhanced Commitments to Women
EFNA	Emergency Food Needs Assessment
EFSA	Emergency Food Security Assessment
EMOP	Emergency Operation
EVI	Extremely Vulnerable Individual
FAL	Functional Adult Literacy
FAO	Food and Agriculture Organisation of the United Nations
FDP	Final Distribution Point
FFA	Food for Assets
FFT	Food for Training
FFW	Food for Work
FO	Field Office
GFD	General Food Distribution
GoU	Government of Uganda
GTHR	Girls Take-Home Ration
IDP	Internally Displaced Person
IP	Implementing Partner
ITSH	Internal Transport, Storage and Handling
JFNAM	Joint Food Needs Assessment Mission
LCA	Logistics Capacity Assessment
LRA	Lord's Resistance Army
LTSH	Landside Transport, Storage and Handling
MAP	Multi-sectoral AIDS Programme
M&E	Monitoring and Evaluation
MAAIF	Ministry of Agriculture, Animal Husbandry and Fisheries
MCH	Mother and Child Health
MDGs	Millennium Development Goals

MGLSD	Ministry of Gender, Labour and Social Development
MoES	Ministry of Education and Sport
MoH	Ministry of Health
MoU	Memorandum of Understanding
NGO	Non-governmental Organisation
NER	Net Enrolment Rate
OPM	Office of the Prime Minister
OVC	Orphans and Vulnerable Children
PEAP	Poverty Eradication Action Plan
PEPFAR	President's Emergency Plan for AIDS Relief
PLWHA	People living with HIV/Aids
PMA	Plan for the Modernisation of Agriculture
PMTCT	Prevention of Mother to Child Transmission
PMU	Project Management Unit
PRA	Participatory Rural Appraisal
PRRO	Protracted Relief and Recovery Operation
PRSR	Poverty Reduction Strategy Paper
STD	Sexually Transmitted Disease
SFC	Supplementary Feeding Centre
SP	Strategic priorities
SPR	Standard Project Report
SO	Sub Office
SRS	Self Reliance Strategy
TASO	The AIDS Support Organization
TB	Tuberculosis
TFC	Therapeutic Feeding Centre
UGTL	Uganda Grain Traders Limited
UNDAF	United Nations Development Assistance Framework
UNHCR	United Nations High Commission for Refugees
UNICEF	United Nations International Children's Emergency Fund
UPE	Universal Primary Education
VCT	Free Voluntary Counselling Testing
WATSAN	Water and Sanitation

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## EXECUTIVE SUMMARY

This report synthesizes the findings of an independent evaluation of WFP's Development and Recovery Portfolio in Uganda comprised of Country Programme 10019.0, the recovery component of Protracted Relief and Recovery Programme 10121.0 and Development Project 10139.0 in support of families affected by HIV/AIDS, all implemented between 1999 and 2005. The evaluation was commissioned by the Office of Evaluation and fielded in September 2004.

The evaluation team found that the design of the Development and Recovery Portfolio in Uganda is a good example for implementation of WFP's policies; it is also relevant to the Government's national development framework. However, only 31 percent of the distribution target tonnage for the Development and Recovery Portfolio was met during the period under review

The low implementation rate is partly explained by low levels of funding for the development activities – 54 percent of the country programme and 48 percent of the development project – and partly by the fact that fewer internally displaced people than planned returned home so recovery activities could not be implemented. The number of internally displaced people in camps increased threefold over the two years and resources were shifted from recovery to relief in order to assist people in camps. The revised distribution target of 93 percent was achieved. The country office should be commended for an efficient change of strategy to accommodate the evolving humanitarian situation.

The activities implemented were generally found to be efficient and effective. The effects of rations per beneficiary were in many cases reduced, however, because beneficiary numbers were higher than planned. There are corporate lessons to be learned from the effort to stimulate local production by procuring directly from small-scale farmers. To increase production, farmers need increased access to agricultural inputs; WFP needs to strengthen partnership with organizations that can provide them. More attention should be given to identifying procurement procedures that take into account the conditions of small farmers while complying with WFP standards. In general, the low level of support costs available for the development activities – direct support costs and other support costs – affected the quality of activities, especially food-for-assets, the sustainability of interventions in general and the development of exit strategies in particular.

Lack of baselines and systematically collected data based on outcome indicators makes it difficult to show results beyond output.

# 1. INTRODUCTION

## 1.1 Evaluation objective and scope

1.1.1 The objective of this evaluation was to assess the relevance, efficiency, effectiveness, and sustainability of the portfolio of development and recovery activities implemented by WFP's country office in Uganda. The purpose was to provide accountability to the Executive Board and to synthesize the lessons from the current operations to promote organizational learning. The findings were available to the country office by the end of September 2004 in time to inform the new PRRO presented to EB/1 2005, and the country programme document to be presented to EB/2 2005.

1.1.2 The evaluation examined the Development and Recovery Portfolio comprised of CP 10019.0, the development project DEV10139.0, and the recovery component of PRRO 10121.0.

**Table 1: The Recovery and Development Portfolio of WFP in Uganda<sup>1</sup>**

<b>Programme Category</b>	<b>Recovery and Development Components</b>
PRRO 10121.0	Food For Assets
	School Feeding
	Social support <sup>2</sup>
	Supplementary and Therapeutic Feeding
CP 10019.0	Activity I: Vocational Training for Street Children and Orphans
	Activity II: Support for Education and Adult Literacy in Karamoja
	Activity III: Agriculture and Marketing Support
Development Project 10139.0	Food Aid Support to Families Affected by HIV/AIDS through family rations and FFT

1.1.3 The evaluation was carried out by a team of three independent consultants with expertise in food security, nutrition and school feeding, gender and HIV/Aids programming. The team was supported by three WFP resource persons with skills in evaluation, procurement and logistic profiles. The team reviewed central WFP files and documentation from external sources. It spent 23 days in Uganda in September 2004, where it held discussions with i) key informants at national, district and provincial levels, WFP staff at headquarters, country office and sub-office levels, iii) United Nations and other international agencies, iv) non-governmental organisations and v) community-based organisations. It visited 53 project sites in Karamoja, Gulu and West Nile districts as well as the South-West and Kampala and Jinja towns, where it carried out semi-structured interviews with individual beneficiaries, focus groups and households. Given the time and level of resources dedicated to the evaluation, random sampling was not possible and thus the interviews may not be representative. However, information was

<sup>1</sup> Annex I summarizes chronologically key events related to the interventions

<sup>2</sup> Social support interventions include psychosocial support to former abductees, child soldiers, orphans and assistance to TB, sleeping sickness and HIV/AIDS patients



triangulated with different respondents and findings were presented to stakeholders' meetings and feedback gathered.

## 1.2 WFP's activities in Uganda

1.2.1 Uganda's economic growth of ix percent in 2003 is amongst the highest in Sub Saharan Africa but there are considerable income disparities and the number of people living in poverty increased from 7 million in 2000 to 9 million in 2004. Development and poverty alleviation are constrained by:

- i) **Budget deficit** – approximately 50 percent of public expenditure (or 8 percent of GDP) is covered by donors;
- ii) **Insurgency** - in the North has created 1.6 million IDPs and caused political and structural instability;
- iii) **Armed conflict** in neighbouring countries has brought some 250,000 refugees to Uganda of which approximately 150,000 are supported with food by WFP;
- iv) **High morbidity rates** due to Malaria and HIV/Aids;
- v) **Consequent high mortality rates.**

1.2.2 Government policy, framed in the Poverty Eradication Action Plan (PEAP) and the Plan for Modernization of Agriculture (PMA), guides Ugandan development priorities. The 1997 PEAP highlighted the poverty issues of northern and eastern Uganda where the number of people living on less than USD 1 per day rose from 7 million in 2000 to 9 million in 2004. The revised PEAP has the goal of cutting the number of people living in poverty by 50% by the year 2015. The challenge of HIV/AIDS and orphans has been prominent in Uganda for the last two decades. Approximately 42% of Ugandan households support at least one child orphaned by HIV/AIDS, malnutrition, disease or conflict. It is estimated that 70% of vulnerable children in Jinja are orphans, 20% are street children and 10% children from needy families.

1.2.3 The national decentralization policy framework has changed the role of different government institutions such that the role of line ministries has become one of policy guidance, quality control, backstopping, supervision and capacity building while the local administrations have taken full responsibility for implementation of local activities. Local governments manage their own resources according to the agreement of the concerned line ministries.

1.2.4 Insecurity is the overwhelming cause of food insecurity in Acholiland while it is a factor added to the more fundamental one of under-development in Karamoja. West Nile district, more recently classed as a 'post-conflict' region, still suffers the after-effects of war and, again, under-development. The South of the country is relatively food secure. Resettlement of IDPs by GoU (with WFP support) in the southern Bundibugyo district was completed in 2002 and has greatly improved their food security.

1.2.5 Preparation of PRRO 6176, a year after the country programme, coincided with the preparation of the PEAP, PRSP<sup>3</sup> and PMA and enabled its design in line with existing government priorities. The Country Strategy Outline (CSO) focuses WFP's relief intervention in food insecure conflict and post-conflict areas where WFP has by far the largest access to the most vulnerable and where (with regard to the five highly insecure districts of the northern region) it has the most mature knowledge base.

1.2.6 WFP recovery and development strategy is to support government priority sectors towards poverty reduction by focusing on education, vocational training and food security. The approach is to concentrate on the most vulnerable areas and/or people (i.e. the North and North-east together with other locations which manifest poor social indicators. The vulnerable people targeted are subsistence farmers, pastoral communities, orphans, street children, women & children and People Living with HIV/AIDS (PLWHA).

1.2.7 The Country Programme (1999-2004 and now extended to 2005) was the first generation CP and was, with the PRRO (2002 - 2005), designed before they could benefit from the WFP policy guidance which is now available. Their design was based on the priorities of the WFP Enabling Development Policy which concerns health, nutrition, MCH<sup>4</sup>, education, training, asset creation and sustainable livelihoods. The CP and PRRO are very much in line with existing policy frameworks such as the MDG<sup>5</sup> (1,2,3 and 8) and WFP's Strategic Priorities (1,2,3,4 and 5).The itinerary of the Evaluation Team, including field visits and the interventions carried out there is presented diagrammatically in Annex L.

**Table 2: Chronology of events**

14 <sup>th</sup> .February	2002	<b>PRRO 1021</b> approved
28 <sup>th</sup> .March	2002	<b>Letter of Readiness</b> accepted
1 <sup>st</sup> . April	2003	First distribution
31 <sup>st</sup> .March	2005	Planned project completion
	1999	<b>CP 10019.0 ACT III</b> approved
	2002	<b>Project outline</b> approved by the Projects Committee
27 <sup>th</sup> .November	2002	<b>Plan of Operations</b> signed
19 <sup>th</sup> .December	2002	<b>Letter of readiness</b> accepted
	December	2003 First distribution
31 <sup>st</sup> .December	2005	Planned project completion

<sup>3</sup> Poverty Reduction Strategy Paper.

<sup>4</sup> Mother & Child Health

<sup>5</sup> Millenium Development Goals

## 2. FOOD AND LIVELIHOOD SECURITY

### 2.1 Background

2.1.1 About 80 percent of the Uganda population of about 25 million inhabitants generates its income in the agricultural sector. The majority of the farmers (70 percent) are small scale or subsistence farmers, about 25 percent of the farmers are semi-commercial and 5 percent are commercial farmers.

2.1.2 While WFP intervention in the North is clearly necessitated by the acute conflict and post-conflict needs prevailing there, underlying chronic under-development (technical, infrastructural and marketing) still presents a challenge to food and livelihood security in the region and to continued intervention in which WFP has a role to play.

2.1.3 Furthermore, while gross annual precipitation is generally adequate across the North, its reliability (or more usually its distribution) cannot be assured and this is most critical in the North-east where (in the lowlands) evapo-transpiration exceeds precipitation. Across the North, therefore, the incidence of 'rain failure' is frequent<sup>6</sup> (a widespread occurrence during 2004) and, in the North-east, 'adequate rainfall' can be considered the exception rather than the rule.

2.1.4 The CP 10019 is designed to support the economic and social development of the country while PRRO 10121 aims at sustaining food security in conflict affected areas. Both programmes were formulated in line with WFPs 'Enabling Development' policy, prioritising health, nutrition, MCH, education, training, asset creation and sustainable livelihoods.

2.1.5 When PRRO 10121 was approved by the Executive Board (EB) in February 2002, the politico-military situation was such that large-scale return of IDPs to their homes was expected to commence within that year and the programme reflected the anticipation in that a large part of its content was of an FFA (with a large road construction component) and FFT (to enable implementation and technical improvement) nature. Within weeks, however, a new wave of insecurity required WFP to use the flexibility of the PRRO instrument to, quite rightly, move the bulk of PRRO resources back into relief. The PRRO's largest component (about 90%) now, therefore, represented relief assistance providing general food rations to more than 1.6 million IDPs and some 150.000 refugees in post-conflict or conflict affected areas. The large-scale relief assistance in IDP camps limited programming of recovery activities on a large scale since 75 percent of the food needs were covered with relief rations. This explains the low output and, *inter alia*, the low impact of the interventions under review.

2.1.6 Nevertheless, the PRRO provided some support to improved self-reliance through asset creation (FFA) and Food for Training (FFT) while CP Act III aims to assist, through marketing support, small-scale farmers and farmer groups to sell a limited range of

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<sup>6</sup> Frequency not known but thought to be of the order of one to two years in five.

commodities (maize, beans and, in some cases, sorghum and millet) to large buyers. WFP is the initial and, most likely in the medium term, the largest buyer.

## 2.2 Relevance

2.2.1 Relevance is concerned with assessing whether the project is in line with local needs and priorities<sup>7</sup>,

2.2.2 **Karamoja**, in the north-east of Uganda, has a fundamentally pastoral economy in which the adoption of agriculture has brought a degree of sedentarism such that many of the Karimajong (and other peoples integrated into their culture<sup>8</sup>) may be described as transhumants. While important in the very few years of well-distributed rainfall, the practice of agriculture is of lesser importance and the fact that it has been the focus of food security interventions to the almost total ignorance of livestock production has to be seen as a mistake.

2.2.3 Karamoja is marginalized and neglected region. The incidence of malnutrition is high and has been addressed over many of the last forty years through Food Aid distribution, the dependency effects of which are manifested in negative attitudes, poor maintenance of infrastructural assets such as water points and a lack of auto-sufficient disaster preparedness measures at the household level. The almost complete absence of development in the livestock sector leaves the herding population to a ‘museum-like’ existence in which only milk and blood are exploited for family sustenance while almost completely unexploited male animals<sup>9</sup> are still herded until their death at ages in excess of fifteen years or sold in small numbers at times of distress (drought) when their value in cash or grain terms is negligible.

2.2.4 The use of FFW to construct community assets such as water collection dams for both human and livestock consumption, wood-lots and fishponds is considered to be relevant but not addressing the underlying problems (see above).

2.2.5 Insecurity, due to armed cattle raiding between neighbouring clans and now developed into highway robbery and organised crime, does limit the possibilities for developmental intervention. Nevertheless, the development of a market<sup>10</sup>, which constitutes a *sine qua non* for livestock commercialisation, would seem to be a point of departure in which WFP food could possibly represent a means of exchange.

2.2.6 Agriculture does have potential in Karamoja which is availed of some good soils (observed in the Kotido area) while having sufficient total moisture precipitation for the production of most tropical crops<sup>11</sup>. The problem is, however, one of poor rainfall

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<sup>7</sup> **Source:** Evaluating Humanitarian Action – An ALNAP Guidance Booklet

<sup>8</sup> This description of a very complex anthropological issue is a gross over-simplification.

<sup>9</sup> Some very few young (3 – 5 years old) male animals are killed for communal festivities.

<sup>10</sup> It is understood that a market does exist in Kampala for animals stolen through organised crime.

<sup>11</sup> 500 to 700 mm. in the central belt and more than 1500 mm. in the western belt. Eastern belt figures are not available but this desert area reported to be unsuitable for agricultural production.

distribution. Again, the underlying problem (that of capturing available water for agricultural exploitation) has not been addressed.

2.2.7 **Acholiland**, the object of LRA attacks, has seen an almost complete depopulation of the rural areas and the establishment of peri-urban IDP camps in which complete safety is still not assured. Ugandan military authorities forbid the cultivation of crops other than within a short distance from the camps and urban areas in order to deny food supply to the rebels. Consequently, the delivery of Food Aid<sup>12</sup> has had to be a priority and is a challenge to which WFP has responded almost single handed (with the exception of the support of a small number of NGO partners) and for which, in the saving of innumerable lives, it must be applauded. The strict adherence of potential partners to a non-military protection policy, while understood, has to be seriously questioned in light of the humanitarian need here.

2.2.8 The flexibility of the PRRO to adjust programming according to needs has shown the instrument to be invaluable. On two occasions, when an end to the conflict seemed to have been in sight and when new programmes had been agreed for more Recovery oriented approaches, the security situation deteriorated and programming had again to revert to the prioritisation of Relief - this was most appropriate. At the time of writing, as a new PRRO is under design and as prospects for peace again seem more promising, WFP faces the planning dilemma for the third time.

2.2.9 Within such practical and geographic constraints, WFP has managed to develop a fairly extensive portfolio of appropriate FFW and FFT interventions. A common problem in longer term IDP camp situations can often be the loss of practical farming skills and capacity for hard work within a whole generation of young people - this is an issue which could be addressed through Food for Practical Farm Training of school leavers.

2.2.10 **West Nile**, once devastated by war, has now largely recovered but remains host to some 70 000 refugees and is still prone to food insecurity. While there are areas of poor soils and excessive population pressure, the household interview (see Box 1 below) illustrates the potential for greater food production that is currently unexploited due to imperfect markets and poor effective demand.

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<sup>12</sup> Currently to some 1.6 million IDPs.

**Box 1. Household Interview**  
**Sadiq Juma Lebou and his wife Zatuna Ajio Sadiq**  
**Kozinga Village, Apo sub-County, Yumbe District**

The family with 7 children between the ages of 8 and 22 years of age (five of whom are at school) and their grandfather, owns 10 acres of good land of which four acres are planted to a range of crops as follows:

**1<sup>st</sup>.rain:** Maize, Beans, Cassava, Groundnuts, Plantain Bananas, Sugar cane, Cowpea;  
**2<sup>nd</sup>.rain:** Tomatoes, Onions, Sweet Potatoes, Rice.

Meals eaten the previous day included:

**Breakfast:** Zero;

**Lunch:** Sauce of Beans and Cowpea – no carbohydrate due to lack of casual labour for cash that day;

**Dinner:** Sauce of Beans and Cowpea – ditto no carbohydrate.

Zatuna worked on construction of the WFP fishpond for three months and received FFW (1 basin of maize, 10 cups of pulse and 2 bottles of oil for each working day). In 2002, due to a need for cash, Sadiq sold maize (by the kilogramme to a middleman) for the equivalent of **USD 25** per MT (the translator indicated that the lowest middleman price he had heard of was the equivalent of **USD 50** per MT) against a world price of, say, **USD 150** per MT.

Sadiq has seen the newly constructed WFP store and heard of its intention to buy grain through his Cooperative Society. As a consequence, it is now his intention to cultivate an extra three acres for sale to WFP but needs advice, a loan, seed and fertiliser.

2.2.11 While all the answers may not be quite true, the case illustrates the fact that a farmer, although he has a sizeable piece of land, will not produce harvest for the market at such low prices and as a result still feeds his family on a less than optimum diet. This is not only a problem of food, it is lack of development.

2.2.12 WFP, through its very relevant small farmer group purchasing programme under its CP ACT III, will undoubtedly stimulate this family's production and their development processes. However, the farmer is clearly telling us that he cannot do so without Technical Assistance, improved Agricultural Inputs and Credit. WFP has stimulated farmer aspirations but not, to date, assured provision of the complementary activities without which the intervention could fail.

2.2.13 WFP has, nevertheless, made other very relevant interventions in other parts of the region with FFA activities such as water collection dams, fishponds and community roads but, again, these would appear to be *ad hoc* and not complemented with the support of partners with adequate financial, technical and monitoring capacity. The weakness of local government administrations as partners is manifested in two examples:

i) 22 fishponds have been well constructed but only one filled with fingerlings because local government (from District down to sub-County level) do not have the budget to contribute this component of their agreed commitment.<sup>13</sup>

ii) a downhill road construction, completed only three months ago under FFW, has already started to erode through lack of proper design and will, if not addressed, destroy fields through which it passes.

2.2.14 If WFP signs a MoU, then it is morally, if not legally, responsible for its success. People do not work solely for the food ration – they have aspirations of gaining a community asset to improve their lives. A failed project brings disillusionment and constitutes a set-back in the development process. An additional partner is required in such cases to support local administrations in design, capacity building and monitoring. Two such partners, GTZ and FAO, are already working in West Nile and, although GTZ is already cooperating with WFP, this partnership has considerable potential for expansion while FAO, whose mandate is to work through Government, should now be considered.

### 2.3 Efficiency (Means for Activities to produce Outputs)

2.3.1 Efficiency measures the outputs – qualitative and quantitative – in relation to the inputs. This generally requires comparing alternative approaches to achieving the same output, to see whether the most efficient process has been used<sup>14</sup>.

2.3.2 **PRRO 10121.** FFA interventions are still very much in the beginning, because of changed IDP circumstances and it was paused for a number of months in 2002 pending completion of the FFA Guidelines

2.3.3 Implementation of CP activity III has indeed been slow in view of the activity preparation (plans have been well founded) and this has taken time. The great weakness in the planning has, however, been in the assumption that partners would be a) forthcoming in adequate numbers; b) competent; and c) availed of sufficient own-funds to implement the projects properly. There has been a gross assumption that WFP's obligations end at provision of food as a Means for payment of labor – while the latter has been carried out most efficiently<sup>15</sup>, WFP has not recognized its responsibility to follow through to ensure that the Results produced were always of excellence.

2.3.4 With regard to the achievement of excellence, a principle of development is, not that assets be built in every community of a country, but constitute a model of excellence for replication by those who see them. From this point of view, pond construction would seem to be meeting the criteria but spoiled by the fact that the partners are not meeting

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<sup>13</sup> Despite the fact they have signed a Memorandum of Understanding with WFP and funds are understood to have been allocated from Central Government under the PMA (Programme for the Modernisation of Agriculture) which is funded by external donors.

<sup>14</sup> **Source:** Evaluating Humanitarian Action – An ALNAP Guidance Booklet

<sup>15</sup> See **Section G** (Logistics).

their agreed/contracted obligations which, in the case of 21 out of 22 fishponds constructed are still not stocked with fingerlings<sup>16</sup>. What message does this give to interested parties who observe the asset?

2.3.5 Equally, a road<sup>17</sup> built on a slope and already beginning to erode within three months of its construction, and threatening to cause gully erosion of fields on either side, cannot be considered excellent. On the other hand, every woodlot inspected was planted and maintained with excellence – nothing less would expect from a rural people in Uganda.

### Food for Assets

2.3.6 There is a difference in WFPs intention and participants' perception of targeting and utilisation of food support. Targeting towards poorest households is not well perceived, participants preferring to share 'offered support' equally among all community members. As a result of the large number of actual FFW participants in relation to those planned<sup>18</sup>, the actual ration received by each actual participant<sup>19</sup> has been minimal.<sup>20</sup> . Accordingly, the subject of the intervention, the most vulnerable people, have not benefited to the degree planned by WFP.

2.3.7 In 2004, 52 percent of beneficiaries targeted under the PRRO's FFA were reached and quantities of food distributed per beneficiary met the target. Nevertheless, the very low amount of food programmed in that category for 2004 (30kg per beneficiary) has to be questioned. According to FFA guidelines, between 100kg and 200kg<sup>21</sup> of food should be programmed per FFA beneficiary. An explanation could be that most of the food was provided through FFT (2 to 3 kg of food per beneficiary per day for a 10 day training course).

2.3.8 Outputs in Karamoja have been low. Starting in 2003, the intervention proceeded slowly with only 3.7 percent of planned beneficiaries reached and 1.4 percent of the planned tonnages achieved. However, in 2004, 76 percent of planned beneficiaries were reached but only 16 percent of planned food was delivered and beneficiaries only received 8 kg of food instead of the 36 kg programmed.

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<sup>16</sup> Young fish.

<sup>17</sup> A WFP supported community road observed in Yumbe district. Construction of another road, in the same district, was described in translation as having been 'cultivated' – this would be a fair description of the works even though that is not what the translator meant.

<sup>18</sup> Referred to in **Table 3**. (Results by Logical Framework – PRRO 10121).

<sup>19</sup> Referred to in **Table 5**. (Planned versus Actual for Food for Assets) below.

<sup>20</sup> But has not been calculated for all interventions - **Table 5**. indicates that the planned FFA ration was 2.37 kg per person-day for Road Construction and 3.23 kg per person-day for Pond Construction.

<sup>21</sup> **Road construction:** 106kg for 45 days' work. **Fishpond construction:** 203kg for 63 days' work.



## Procurement from small farmers

2.3.9 Local purchase of commodities from small farmer organizations under **CP Activity III** has introduced an element of **subsidy**<sup>22</sup> to the purchase price offered to the small farmers' organisations in a value of about USD 30 per MT. This cannot be judged to be cost effective, sustainable nor in the best interest of the longer term development of the market.

2.3.10 The Evaluation Team considers that such a *de facto* subsidy is not necessary for the success of the intervention. A realistic price offered to farmer organizations, based upon the Kamapala delivered price (adjusted to delivery at e.g., Gulu), would seem to be sufficient to stimulate supply from the farm gate while subsidy is already implied through the assistance (both technical and marketing) given by the project to the farmer. This is discussed in further detail in Section B. (Procurement).

### **2.4 Effectiveness (Activity/Outputs to Purpose)**

2.4.1 Effectiveness measures the extent to which an activity achieves its purpose or whether this can be expected to happen on the basis of the outputs. Implicit within the criteria of effectiveness is timeliness. Issues of resourcing and preparedness should also be addressed under these criteria.

2.4.2 **PRRO 10121** objective of achieving 'self-reliance through the creation of assets in settlements or in the early stages of resettlement' could possibly never be achieved even in the communities targeted due to the small scale nature of the assets produced.

2.4.3 The minimal progress made in implementation of FFA activities may be explained by the pause in FFA activities pending completion of the FFA guidelines and the sudden intensification of violence in May 2004 which lead to an increase in IDP numbers in the north to 1.6 million people. As a result, staff focus and PRRO resources, planned for significant IDP return with substantial FFA activity were redirected towards Relief. The majority of planned assets are therefore yet to be produced and this will undoubtedly have to be integrated in the new PRRO and next Country Programme.

2.4.4 The total of 86 courses over four years compared to the 540 planned (or only 16 percent) is largely due to non-implementation of FFT activities in Acholiland, where a large number of IDPs were expected to benefit from training in resettlement areas. Across the whole of the North, 5,763 females were trained compared to the planned 30,300 over three years (19 percent) while 5,679 males were trained compared to the planned 27,000 over 3years (21 percent).

2.4.5 The project had anticipated the construction of 1 042 km. of community roads as the most vital, necessary and useful issue at the time of project design but, since resettlement did not take place, only 334 km.(28 percent) were actually achieved.

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<sup>22</sup> See Section 3 (Procurement).

2.4.6 Some successes were, however, achieved in Forestry (32 percent of planned trees planted) where the Evaluation Team observed very high survival rates which might not have been the case if higher maintenance workloads had been involved<sup>23</sup>. Significant success was noted in the construction of School Teacher Houses (88 percent) which is considered to be a major contribution to improving teaching standards through attracting good teachers.

2.4.7 The following Table indicates that support provided per beneficiary through PRRO and CP together (56kg in 2003 and 16kg 2004) is much too low to have made any significant contribution to their household income or to their household food security. There was an exception in Karamoja, however, where, in 2003, 46 beneficiaries received 413kg per person. A summary of Planned versus Achieved results of PRRO 10121 - Food and Livelihood security<sup>24</sup>. is annexed in Table C1 (Results (by Logical Framework).

**Table 3: Planned versus Actual for Food for Assets: Beneficiaries, Food Programmed and Delivered per Beneficiary**

		2004			2003			2002		
Activity	Programme Cat.	Planned	Actual	%	Planned	Actual	%	Planned	Actual	%
<b>Beneficiaries (number)</b>										
FFA	CP, incl. Act III (incl. Marketing)	115,000	87,205	76%	1,252	46	3.7%			
	PRRO	86,400	44,679	52%	8,043	12,987	161%	25,160	7,850	31%
	<b>Total</b>	<b>201,400</b>	<b>131,884</b>	<b>65%</b>	<b>9,295</b>	<b>13,033</b>	<b>140%</b>	<b>25,160</b>	<b>7,850</b>	<b>31%</b>
<b>Tonnages (MT)</b>										
FFA	CP, incl. Act III	4,106	659	16%	4,620	65	1.4%			
	PRRO	2,588	1,404	54%	2,148	659	31%	13,098	2,732	21%
	<b>Total</b>	<b>6,694</b>	<b>2,063</b>	<b>31%</b>	<b>6,768</b>	<b>724</b>	<b>11%</b>	<b>13,098</b>	<b>2,732</b>	<b>21%</b>
<b>Food per beneficiary (kg/pers.)</b>										
FFA	CP, incl. Act III	36	8	22%	1,845	413	22%			
	PRRO	30	31	103%	267	51	19%	521	348	67%
	<b>Total</b>	<b>33</b>	<b>16</b>	<b>49%</b>	<b>728</b>	<b>56</b>	<b>7.7%</b>	<b>521</b>	<b>348</b>	<b>67%</b>

**Beneficiaries: Changes from 2002 to 2004**

FFA: PRRO increased from 100% to 569%  
 FFA: CP in 2002 not yet functional  
 FFA: Total: from 100% to 1680%

**FFA food ration:**

**Road construction:** 1.50kg cereals, 0.72kg pulses, 0.15kg vegetable oil, **Total:** 2.37kg per person-day, Participation planned for 45 days: Total food 106kg **Value:** UgSh 1,210 per day

**Pond construction:** 2.55kg cereals, 0.68kg pulses; **Total:** 3.23kg per person-day; Participation planned for 63days: Total food 203kg **Value:** UgSh 950 per day

**Tonnages: Changes from 2002 to 2004**

FFA CP not yet functional in 2002  
 FFA PRRO: decrease down to 51%  
 FFA Total: down to 76%

2.4.8 There is clearly no relation between the amount of food programmed per beneficiary and food actually received for reasons mentioned. Due to the start of the FFA

<sup>23</sup> Low tree survival rates are a characteristic if over-ambitious tree planting schemes.

<sup>24</sup> Gaps in information illustrate the difficulty experienced by the ET in securing data and indicators. This has led to an ET recommendation for improved presentation of planning information, objectively verifiable indicators of success (particularly quality and impact) and clear, concise reporting according to the same LogFrame format.

component under both PRRO and CP, to date the objective of contributing to household food security through creation of assets has not been achieved.

2.4.9 The objectives of **CP 10019 ACT III**: a) ‘Contributing to improved marketing possibilities of small-scale farmers’; b) ‘Increasing productivity of land and time available for productive activities’; and c) ‘Increasing the capacity and organizational skills in food production of food insecure households’, have hardly been achieved because implementation is still at its infant stage.

2.4.10 The low level of project development also makes it difficult to assess the impact of training and market provision on the productivity of land but the Evaluation Team noted a marked increase in the number of farmer groups that have supplied food or registered to supply food to WFP.

2.4.11 A summary of planned versus actual results is annexed in Table C2 (Results by Logical Framework – CP 10019 ACT III) with the same comments on lack of data and indicators.

## **2.5 Impact (Purpose to Goal)**

2.5.1 Impact looks at the wider effects of the project – social, economic, technical, and environmental – on individuals, gender and age-groups, communities, and institutions. Impacts can be immediate and long-range, intended and unintended, positive and negative, macro (sector) and micro (household).

2.5.2 Due to WFP’s re-allocation of the larger part of its PRRO funds to relief necessitated by the upsurge in violence in June 2002 and the fact that substantial human resources were denied to the Country Programme for, *inter alia*, the same reason, very little has yet been achieved in terms of concrete creation of assets, significant development of the Commodity Purchase intervention and the development of enterprises (see Table 3 above and Table 4 on page ...). FFA interventions, for example, made a very slow start and most assets viewed by the Evaluation Team were started in 2002 and so the impact of most of the WFP interventions discussed in this section have not yet materialised.

2.5.3 Nevertheless, through training (management and vocational) and thorough preparation already carried out for these interventions gives the Team confidence in the fact that WFP has laid a good basis for the achievement of its goals, albeit with rather small coverage in relation to overall needs.

2.5.4 The shortage of implementing partners is a problem which has to be addressed; it is resolvable and is discussed elsewhere in this report. Even with an increased number of IPs, however, coverage cannot be expected to be significant but the impact of strategically located examples of excellence should not be under-estimated in their potential to catalyse their replication by neighbouring communities.

2.5.5 The achievement of excellence in some of the interventions discussed here leaves room for improvement. For example, some poorly constructed roads inspected by the Team already manifest signs of erosion six months after their construction. The impact of this is not only early failure of the road but also destruction of proximate agricultural land. The negative impact on communities who view failed interventions constitutes a major set-back in their development thinking – for example, due to inadequate specialised technical input into the WFP fish-farming interventions leads the Team to foresee their failure unless very early correction of this weakness is addressed – without this, the whole concept of aquaculture will be rejected by communities in the foreseeable future.

2.5.6 Enterprise development, therefore, has to be very closely followed by WFP long after its initiation. An example of failure to do this is often seen elsewhere with regard to projects designed to the benefit of women. While they can give women a level of independence, they can also impose an extra insupportable work burden upon them which, particularly if the cash benefits are taken over by their men, can lead to their disillusionment.

2.5.7 Vocational training projects inspected by the Team are clearly having a very strong impact on the motivation of and prospects for participants who did not foresee self-employment but were confident of gaining paid employment. The latter will undoubtedly expand when full recovery operations start with peace-induced return of IDPs to their homes. Training in non-marketable skills has been judiciously avoided by WFP and its partners so not risking the negative impact of disillusionment.

2.5.8 Commodity purchase from small scale farmers, while small to date has already shown some signs of positive impact on farmer behaviour in the way they have used revenue from improved prices. This has involved a willingness to plant varieties more demanded of the market, purchase of machinery and expansion of production through increased acreage and employment of agricultural inputs (fertiliser, etc.). There has been no noticeable impact on wider market prices for maize or beans but the very low level of intervention to date could not have been expected to make any change whatsoever.

## **2.6 Coverage**

2.6.1 Coverage is the need to reach major population groups facing life-threatening risk wherever they are, providing them with assistance and protection proportionate to their need and devoid of extraneous political agendas<sup>25</sup>.

2.6.2 On a national, regional or even district level, coverage is still so very low that the impact of the FFA, FFT and Small-scale farmer procurement interventions is minimal.

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<sup>25</sup> **Source:** Evaluating Humanitarian Action – An ALNAP Guidance Booklet

## 2.7 Connectedness

2.7.1 Connectedness refers to the need to assure that activities of a short-term emergency nature are carried out in a context that takes longer term and interconnected problems into account<sup>26</sup>.

2.7.2 It is clear that the programme structure criteria (Activities, Outputs, Purposes and Goals)<sup>27</sup> of both the current PRRO and CP will have to be adopted in their new phases currently under preparation. These criteria are all compatible with and fall within GoU's PMA and PEAP policy frameworks (and are generally **coherent** with key international<sup>28</sup>, UN<sup>29</sup>, WFP<sup>30</sup> policies). Furthermore, and as a result of the GoU decentralization policy framework in which local administrations have taken full responsibility for implementation of local activities, the WFP projects are very much linked to and complement the planned activities of those concerned administrations.

2.7.3 While the local administrations may be currently weak and under-resourced, they do represent institutions which should take over WFP's responsibilities in the longer term and WFP has a major role to play in their capacity building through training, confidence building and promoting its own work as being that of those administrations.

2.7.4 It would be naïve to deny that this may be a difficult, frustrating and sometimes thankless task but it represents a tangible challenge which the ET is confident that the current WFP CO is quite capable of meeting. Along with the assumption of the natural vigour of the Ugandan people, such handover can be the only true guarantee of sustainability of these interventions.

## 2.8 Conclusions and recommendations

2.8.1 **Conclusion 1.** While WFP has made a significant conceptual step forward, its implementation manifests that this change has not yet been fully translated into a real understanding of the very large practical demands and responsibilities now placed on the institution on the ground. In other words, WFP field staff often considers their responsibilities to end at food delivery and report accordingly.

2.8.2 **Recommendation 1.** WFP must understand that, if it is to initiate Recovery and Developmental interventions, then it has the responsibility to ensure that sufficient complementary financial and project implementation resources are in place to carry out the work with excellence.

2.8.3 **Conclusion 2.** Monitoring and reporting of food movements and numbers of beneficiaries are generally good but the Evaluation Team has found it extremely difficult

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<sup>26</sup> **Source:** ditto

<sup>27</sup> As outlined in Annexe C.

<sup>28</sup> e.g. Millennium Development Goals (MDG)

<sup>29</sup> e.g. UNDAF

<sup>30</sup> e.g. Enabling Development, Crisis to Recovery, Strategic Priorities, Enhanced Commitment to Women (WFP)

to secure reconcilable data on assets and other outcomes produced, their cost (in terms of cash and food) and information to enable meaningful measurement of impact. Following recommendations in the “Summary Report of the Evaluation of Uganda PRRO 6176.00 (WFP/EB.1/2002/5/2)”, the Logical Framework Approach has been adopted in project documents but still leaves room for improvement. An excellent start has been made in preparation of the WFP Indicator Compendium (01062004) but this has not yet very effectively filtered through into the self-evaluation reports undertaken by the CO..

**2.8.4 Recommendation 2.** WFP’s use of the Logical Framework needs to be fine-tuned by bringing its structure and terminology into line with more common norms (EC, DFID, GTZ etc) and wider employment of objectively verifiable indicators (OVIs) from which impact may be measured. Field Self-evaluation reports need to be brought into line to correlate with the corresponding planning Logical Frameworks and become more pro-active in promoting cost-efficient OVIs of impact learnt from field experience.

**2.8.5 Conclusion 3.** A number of IPs do not perceive their association with WFP as a partnership arrangement and consequently they do not recognise the full costs of their obligations nor their need to find sources of extra funds to meet them. The result is that WFP expects the IPs to fund complementary activities while IPs expect the contrary. It is clear that, in the absence of a joint approach with partners, WFP has failed to adequately fund many of its Recovery and Development interventions.

**2.8.6 Recommendation 3.** During initial consultations leading to MoU agreements, WFP should factor in the need to make funding proposals to donors in conjunction with IPs. This will have the effect of:

- a) taking advantage of the good offices of WFP;
- b) helping to clarify, to donors, WFP’s serious holistic approach to the intervention;
- c) convincing donors to support interventions with some confidence of their success.

**2.8.7 Conclusion 4.** The key challenge remains that of dealing with long-term problems through short term mechanisms and this is tied to corporate funding. WFP lacks the financial resources to achieve its planned Recovery and Developmental objectives. Apart from funding for food procurement and the small ‘own funds’ of its IPs, no substantial European Commission funds have been accessed by WFP<sup>31</sup>.

**2.8.8 Recommendation 4.** The Evaluation Team considers that sufficient funds are available for WFP’s work in Uganda but that WFP must present a better and more analytical justification of its case to source EC and other donor funding.

**2.8.9 Conclusion 5.** WFP lacks a sufficient number of competent IPs to achieve its planned Recovery and Developmental objectives.

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<sup>31</sup> Such EC funds are available from the ECHO, STABEX and Food Security Budget lines.

2.8.10 **Recommendation 5.** Possibilities for wider cooperation<sup>32</sup> need to be developed as a *sine qua non* for continuation of its Recovery and Development intervention.

2.8.11 **Conclusion 6.** While the situation in Acholiland remains one of a conflict-based acute humanitarian disaster, opportunities to support short- to medium- term Recovery in Karamoja and West Nile regions are constrained by:

- a) civil insecurity in Karamoja;
- b) rain failures in Karamoja and West Nile;
- c) targeting in Karamoja and West Nile is currently not entirely effective; and
- d) high dependency rates and food access difficulty in Karamoja and West Nile.

2.8.12 **Recommendation 6.** Continued Emergency Relief is still clearly needed for a very large proportion of the population in Acholiland while immediate phasing out of food aid in Karamoja and West Nile would prejudice the most food insecure. In Karamoja and West Nile, a phased approach is required in which some guarantee of a safety net continues for EVIs through their targeting with 100% rations until such time as comprehensive Recovery programmes can be established in their vicinity. SFP and TFP should continue until such time as malnutrition is banished while continuation of School Feeding programmes remains dependent upon political decision.

### 3. PROCUREMENT

#### 3.1 Background:

3.1.1 Regular trade in agricultural commodities in Uganda involves a long supply chain of actors starting with the subsistence farmer who typically has a marketable surplus ranging from half to 5 or 6 bags (100 kg) per crop season<sup>33</sup>. The first sale is normally between farmer and middle men who buy ex-farm at a quality which is neither cleaned nor dried and payment is usually made in cash. The middle men sell the produce to traders at centres along the road from where it is traded along the supply chain to Kampala-based traders. The larger traders have access to drying and cleaning equipment and upgrade the cargo to WFP and/ or export specifications. Every party in the supply chain fulfils a vital role in the process and their functions require (and justify) a cost element.

3.1.2 The Agriculture and Marketing support project, under CP 1019 (ACT III), is implemented in co-operation with the Ministry of Agriculture Animal Industry and Fisheries (MAAIF) and has a strong link with the FFA component in both CP 1019 and PRRO 10121.

3.1.3 The project document states that “Marketing Support will be carried out where farmers’ associations seek the opportunities provided by this component. This could in

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<sup>32</sup> With, for example GTZ, the EC Karamoja Programme, FAO and/or IFAD.

<sup>33</sup> The larger part of Uganda having 2 crop seasons.

time be limited to the north if the north in future seems under-represented under this component.” Marketing Support is aimed at assisting small-scale farmers and farmer groups to sell maize (and, sometimes, sorghum and millet) and beans to large buyers like WFP.

3.1.4 The expected project outputs, detailed in Table C2 (see Annex) are:

- A targeted 10 percent of the total annual WFP Uganda country office local procurement to be purchased from small-scale farmers’ groups subject to availability of funds and competitive prices. Only maize, beans, sorghum and millet will be procured due to their suitability in terms of logistics and consumer preference;
- Training in food storage, drying, cleaning, packaging and small-scale business practices. In addition the Country Office will produce monthly market information pamphlets as well as weekly market information bulletins in collaboration with the International Institute for Tropical Agriculture (IITA) and NGO Investment in Developing Export Agriculture (IDEA). Translation of all information into local languages is to be arranged by WFP sub-offices.

3.1.5 The objective of the project is to “enable households which depend on degraded natural resources for their food security to make a shift to more sustainable livelihoods.” In order for farmers to obtain a fairer share of marketing margins, they have to be sensitised with regard to their role in and encouraged to pay more attention to:

- market forces;
- crop quality;
- post-harvest losses
- storage and handling.

3.1.6 As per the project document: “Eligibility for the market support component will be limited to small farmers who wish to form associations and to adopt new skills. Women will be expected to make up 50% of the total beneficiaries. Each association or farmer group will be required to sell a minimum of 50 Mt”.

3.1.7 The project document also points to:

- “Improved outlet possibilities and increased bargaining power and farm gate prices through participation in farmers’ associations and direct deliveries to end-buyers as well as from information gained through radio bulletins and pamphlets” to bring about:
  - stabilization of consumer prices; and
  - small scale farmers better informed on basic record keeping, cost management and in drying, packaging and storing.”

3.1.8 Furthermore, “WFP and its implementing partners will jointly prepare weekly radio bulletins and monthly marketing pamphlets.” Dissemination of information is by



Foodnet whose aim is to develop a localised market information service that meets the marketing needs of the farming and trading community at district level.

3.1.9 In all discussions farmers/farmer groups confirmed that they were aware of the Foodnet bulletin. Thanks to an almost countrywide mobile phone coverage, farmer group representatives can have access to Foodnet's mobile service giving, on a daily basis, market prices in the main growing and commercialisation areas. This service can place farmers in a more equitable negotiating position *vis-à-vis* middlemen/traders. In addition, Foodnet also arranges radio broadcasts (to which WFP contributes information) on Tuesday, Thursday and Saturdays.

3.1.10 As per the project document: "The rationale behind the marketing support component includes the important savings made by WFP through a reduction of its ITSH costs as a result of procurement and delivery in adjacent locations without passing through the main market, Kampala." The extent of the savings in ITSH could not be established at the time of the mission but, based on information provided by CO Logistics unit and confirmed by the Procurement unit, savings did not occur.

## 3.2 Activities

3.2.1 The project document also states that: "WFP will assist in organizing farmers into associations and in giving them market information and training in food storage, drying, cleaning, packaging and small business practices". According to WFP CO programming section, 1,170 heads of farmer groups, representing a total of 30,796 farmers, attended the training/workshops of the marketing support programme in 2004.

3.2.2 Table 4. below shows that quantities procured from small farmer groups to date (planned to be 10 percent of the CO purchases) are still extremely low:

**Table 4. Total CO commodity purchases v small farmer group purchases**

Commodity		Country Office total purchase	Quantity delivered by farmer groups	Percentage of total CO purchase
<b>2003</b>	Maize	39,418	2,886	7.3%
	Beans	11,668	300	2.6%
	<b>Total</b>	51,086	3,186	6.2%
<b>2004</b>	Maize	59,107	2,197	3.70%
	Beans	8,404	300	3.60%
	<b>Total</b>	67,511	2,497	3.70%

**Table 5. Prices paid to Traders and Small farmer groups**

**a) Maize**

AVERAGE PRICE FOR MAIZE		QTY in Mt small	Ex traders	Ex farmers	Difference	Difference	Total savings
DESTINATION		scale purchase	in US\$ PMT	in US\$ PMT	in US\$ PMT	in %	in US\$
MOROTO		230	212.82	223.23	- 10.41	-4.7	- 2,394.30
GULU		400	215.44	236.81	- 21.37	-9.0	- 8,548.00
KITGUM		1,000	248.03	237.86	10.17	4.3	10,170.00
Total		1,630					- 772.30

**b) BEANS**

AVERAGE PRICE FOR BEANS		QTY in Mt small	Ex traders	Ex farmers	Difference	Difference	Total savings
DESTINATION		scale purchase	in US\$ PMT	in US\$ PMT	in US\$ PMT	in %	in US\$
GULU		50	283.88	243.48	40.40	16.6	2,020.00
KITGUM		213	316.64	210.28	106.36	50.6	22,654.68
Total		263					24,674.68

**3.3 Procurement policy and operational procedures**

3.3.1 In principle, WFP procurement policy encourages developing country purchases but operational procedures limit the selection of suppliers, viz.: “WFP must satisfy itself, to the extent practicable, that potential suppliers have the necessary experience in dealing in the type of commodities required, the financial standing to honour contracts and the capability to meet delivery terms” and

3.3.2 “All suppliers must satisfy certain objectively justifiable minimum requirements such as the legal capacity to enter into a contract, the necessary professional and technical competence, financial resources.....”

3.3.3 None of these conditions and requirements can be met by the small farmer target groups and, accordingly, exemptions have to be considered. Furthermore, the rules and regulations for direct contracting have to incorporate direct purchases from these groups under strict WFP conditions:

- Purchase has to be made under an existing development project;
- Award under competitive bidding has to be issued in the same time frame;
- The additional contract must not be more than 10% of the contract value within which it is framed;
- Prices must be established through competitive bidding and adjustments made to achieve parity (based upon prevailing transport costs as confirmed/established by WFP Logistics unit).

3.3.4 In the market intervention, WFP Procurement Unit uses one tender for regular commercial traders and an adjusted one for farmers/farmer groups with, consequently,

two different prices which artificially creates higher prices for the farmer groups. Cost comparison gives a favourable picture of the efficiency of farmer group purchasing due to the fact that the regular tenders invite delivery ex-warehouse and/or DDU Kampala/Tororo while the farmer groups tenders are ex-growing area which is often the same source area for the commercial traders. The latter have to send the commodity to Kampala/Tororo for cleaning, drying and re-bagging to meet WFP specifications and, frequently, deliver back to the same region. This constitutes a **subsidy** to farmer group purchase.

### 3.4 Limitations

3.4.1 Limitations of the farmers/farmer groups are as follows:

- i) Lack of experience of farmers to participate in tenders** - the workshops and training sessions will address these issues and are a helpful tool to overcome the main problems due to the inexperience of the farmers.
- ii) Receipt/collection of the tender documents** - not all participants have access to FAX equipment and have to collect the documents from WFP Kampala office. Document collection and offer submission is very time consuming.
- iii) Lack of feedback** - the majority of respondent groups would like to receive feedback on why their offer was not accepted and preferred a public tender opening. This matter will have to be addressed at a later stage with ODF/Audit as it is a standard WFP procurement procedure that a tender opening is not public.
- iv) The bid/performance bond** – small scale farmers normally lack bank accounts or sufficient credit facilities to open a bid bond and their (often unsuccessful) attempts to open them turned out to be quite expensive for the participants. The suggestion was made to waive bid/performance bonds. WFP has been asked to accept their physical stock as a security for these small tonnages.
- v) Quality** - the workshops and training sessions address quality issues and it is important that quality meets WFP standards. The farmers must be made aware that regular export markets require such minimum quality.
- vi) Inspections and infestation** – the time between the two required inspections is too long and creates the risk of cross infestation and subsequent rejection of the product. Farmers and WFP staff have experienced major problems and delays due to infestation but a solution could be that of improved timing aimed at last minute fumigation just before transportation and within the 96 hour fumigation period.
- vii) Quantity** – Farmers’ marketable surpluses vary between 50 and a few hundred kg and accordingly the collection of the 50 Mt minimum can take up to 2 or 3 months. Participating farmers have to wait until final delivery for their payment and were, in some cases, tempted to sell their maize or beans to the middlemen.
- viii) Pricing and payment - Costs in Uganda from commercial suppliers are calculated in UgSh** while those for the small scale farmers are made in **USD** and, as a result of **UgSh/USD** unfavourable exchange rate movements, the farmer’s margin can be cut. With the Wings system, it is possible to fix the exchange rate and payments can be made in local currency. The high cost of borrowing (even if this possible) to cover the

delay between delivery and payment can be prohibitive such that one group, which pre-financed the crop, saw its whole margin disappear.

**ix) Packing/marketing** – The high cost and delays, to the farmer groups, of specially marked bags has been addressed by WFP Procurement unit but there is still room for improvement. Some donors are quite pragmatic in their marking requirements but, in order to meet the funding source or flag requirements of others, perhaps the responsibility for bag supply should be taken over by WFP.

**x) Delivery** – Slow commodity collection and preparation for delivery can result in a need to re-fumigate causing an increased costs and reduced margins.

**xi) Equipment** – The cost of commodity preparation equipment (fumigation sheets, moisture meters, sieves, weighing scale, stitching machines, empty bags, etc.) can be prohibitive for small farmer groups. Farmer groups may have to cooperate to make investments in equipment economically justified.

3.4.2 Limitations of WFP small farmer group purchasing were the following:

i) The major limitation of the intervention is the level of resource demands upon WFP which does not currently have the capacity to meet its objectives. The farmers lack experience in the trade, finance, confidence, organisation and adequate marketable surpluses. Farmers have to be trained and assisted in the creation of groups and in cargo preparation to WFP quality standards and specifications. This is perhaps not in WFP's mandate.

ii) WFP has, so far, done a remarkable job in small farmer procurement but total quantity has been low and it is unlikely that the 10% target of all local purchases can be achieved without the support of one or more specialised partners.

iii) Some small-scale farmer groups did not qualify as such, one of them would fall under the category of commercial farmer and another as a middle-man or miller. The actual choice of participants should be by implementing partners in conjunction with Uganda National Farmers Federation and/or MAAIF.

iv) Farmer group tenders need to be adjusted to those of commercial suppliers while farmers need to concentrate on the delivery issues of bulking, quality, bagging etc and improving their cooperation/coordination.

v) The warehouse receipt system based on collection centres in the growing areas deserves further attention. This system is not yet in place but promises to become useful subject availability proper secure warehouses, well trained staff and independent collateral management. The warehouse receipt system could also enable farmers to offer such receipts as collateral with their banks.

### **3.5 Efficiency**

3.5.1 Regular market forces work through middlemen who buy/collect commodities ex-farm and pass them up the supply chain in which costs and margins are added until they

reach the main markets. As indicated in Table 5 above, the actual prices paid by WFP for both approaches (commercial and small scale farmer purchase) look similar but parity differs significantly and favours the farmers with what amounts to a subsidy. Transport charges for small scale farmer purchase are similar to those transported from Kampala and consequently, in the absence of a reduction of the price paid to farmer groups, purchases from the latter cannot be considered economic compared with those from regular commercial traders. The clear advantage of buying from farmer groups thus risks attracting middle-men posing as farmer group representatives – this has probably already occurred.

### **3.6 Effectiveness**

3.6.1 Field interviews with farmers clearly illustrate that participants profit from the intervention in monetary terms such that extra revenue margins ranged from zero to 20%. In some instances, middlemen reluctantly followed the higher prices levels offered to farmers.

3.6.2 They have started to invest their returns in farm improvements, in greater production and in settling debts including school fees and medical bills. Their participation in farmer groups has introduced the concept of better marketing while the need to cooperate with each other points the way to other possibilities such as the development of production groups.

3.6.3 Some of the revenue was reinvested in new crops, more marketable maize varieties<sup>34</sup>, certified seeds, hiring ox ploughs, opening new land, maize cribs, a piggery and buying equipment such as maize de-hullers and generators. In some areas<sup>35</sup>, there was a real improvement in planting methods, largely a result of the former IDEA projects but enabled by increased revenues from the WFP market intervention.

3.6.4 The number of farm families benefiting from this intervention is small but, evidence from interviews would indicate that the number of farmers who have heard about it would seem to be large. This is the precursor of development.

### **3.7 Impact**

#### Impact on the farmers

3.7.1 It is not only too early to measure impact but also the scale of the intervention is too small to have been significant. The fact that the project is discussed by many farmers, and this in disproportion to its size, does hold promise of a significant impact when the intervention achieves a wider coverage. A positive impact should not only be at direct beneficiary level but, in bringing about a change in the market and implementation of some post-harvest activities closer to the farmer, should bring about a more equitable distribution of margins.

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<sup>34</sup> Albeit as demanded by WFP.

<sup>35</sup> Nakasongola, Masindi, Lira, Kumi, Kamuli, Kapachorwa, Iganga and Jinja

### Impact on the market

3.7.2 Local small farmer procurement under the WFP programme has been about 2,200 MT in 2004 (or approximately 0.46 percent of this year's production of an estimated 475,000 MT<sup>36</sup>). This is too small to have any impact on the maize market but total WFP procurement of maize in Uganda (including regional programmes) has been about 69,300 MT (or about 14.6 percent) and this is significant.

3.7.3 Cassava and matoke<sup>37</sup> are the staple foods in the majority of maize growing areas and maize is largely considered to be a cash crop.<sup>38</sup> Farmers benefit most from increased buying activity and, if WFP<sup>39</sup> were to reduce its buying activities, farmers would lose an important source of income<sup>40</sup>.

3.7.4 Uganda has suffered a degree of rain failure in 2004 with an estimated resultant 30% yield decrease. Kenya is currently (pre-harvest October 2004) increasing its buying activities in Uganda and, in offering better maize prices, is limiting availability of the crop in the Kampala market.

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<sup>36</sup> **Source:** UGTL

<sup>37</sup> Made from plantain bananas

<sup>38</sup> Although local consumption (partly as result of WFP maize supplies to the North) would appear to have increased over recent years and is now estimated to constitute about 15% of the daily food basket. Maize constitutes about 85% of the daily food basket in Kenya.

<sup>39</sup> WFP has been a regular player in the Ugandan market for more than 10 years.

<sup>40</sup> As happened in 2001 when maize prices fell significantly due to limited WFP buying.

### 3.8 Connectedness

3.8.1 The duration of this intervention is not indeterminate and ensuring its sustainability is dependent upon a much faster mobilisation than already achieved. This requires the early engagement of one or more implementing partners with the capacity and expertise to manage the programme correctly.

3.8.2 Kampala remains the main commodity market in Uganda and it is here that the regular traders have their offices and well equipped warehouses. Whether Kampala will become the object of competition from the growing areas depends on the security situation in the country and the wish of regular traders to invest in warehouses and ancillary equipment away from the capital.

3.8.3 Uganda Grain Traders Ltd. is about to launch a Warehouse Receipt System with a pre-selected group of suppliers/farmers and this should be monitored closely to learn lessons from the collateral management, inspection, financing and reliability of a commercial entity and to again make a comparison with the WFP system.

### 3.9 Conclusions and recommendations

#### Small-scale Procurement

3.9.1 **Conclusion 1.** The major limitation to the Small scale farmer procurement intervention is the lack of WFP capacity to meet its targets and to provide the complementary activities<sup>41</sup> necessary to maximise the programme's effectiveness.

3.9.2 **Recommendation 1.** WFP needs to seek binding co-operation with implementing partners like ACIDI VOCA, APEP, Global 2000, GTZ and perhaps FAO or IFAD.

3.9.3 **Conclusion 2.** Small farmer group tender procedures are different from those of commercial suppliers but payment is unnecessarily similar, ignores the extra transport costs of the commercial suppliers and constitutes a *de facto* subsidy to the small farmers. Small farmers and farmer groups lack knowledge of the delivery issues of bulking, quality and bagging and could not, therefore, realistically compete at commercial at prices. Both issues make the intervention unsustainable.

3.9.4 **Recommendation 2.** WFP needs to train small farmers and farmer groups in direct contracting based upon commercial tender while training them to meet commercial delivery requirements.

3.9.5 **Conclusion 14.** Small scale farmers normally lack bank accounts or sufficient credit facilities to open a bid/performance bond.

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<sup>41</sup> Such as Agricultural extension and enabling access to improved agricultural inputs.

3.9.6 **Recommendation 14.** Requirement for a small farmer bid/performance bond should be waived although WFP could accept the physical stock as a security for small tonnages.

## 4. NUTRITION

### 4.1 Background

4.1.1 Specific nutritional issues are covered by the PRRO and CP in support to:

- Support to Education: (school feeding) - CP Act II in Karamoja and PRRO;
- Support to extremely vulnerable and disadvantaged groups - CP ACT. 1, PRRO (Social support, HIV/Aids, TB) and DP 10139 (HIV/Aids);

4.1.2 Supplementary and Therapeutic Feeding to malnourished children and pregnant and lactating mothers - in Karamoja was also intended as support to MCH under PRRO. Supplementary and therapeutic feeding. It was originally classified as a 'relief' operation. It aims to 'stabilise or improve the nutrition and health of mothers and children' categorised under SP 1 in crisis situations and under SP 3 when being designed within a broader development context.

### 4.2 Relevance

4.2.1 The nutrition and health situation is not improving in Uganda, the situation being worse in rural than in urban areas<sup>42</sup>. Child mortality rate is 15.2 percent<sup>43</sup> and the prevalence of stunting<sup>44</sup> and wasting increased slightly between 1995 and 2000. Vitamin A deficiency is suffered by 28 percent of under 5 year old children and 52 percent of women between 15 and 49 such that 7 percent of pregnant women suffer from night blindness and their children may be born with low Vitamin A reserves, which reduces their immunity and increases mortality. 65% of children under five and 30 percent of women and 18 percent of men between the ages of 15 and 49 years suffer from anaemia which is mainly a problem of poor diet, intestinal parasites and malaria. Anemia impairs cognitive development in children, increases the risk of mortality and decreases working capacity. Severe cases during pregnancies are associated with increased risk of infections, low birth weight and peri-natal and maternal mortality. It is estimated that Uganda's economy will lose USD 646 million of economic productivity if current levels of chronic malnutrition (stunting) continue at the current rate (USD 2.5 billion due to Vitamin A deficiency and USD 382 million due to anaemia in females<sup>45</sup>).

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<sup>42</sup> 40 percent stunting in rural and 27 percent stunting in urban areas

<sup>43</sup> Average child mortality rate in Sub-Saharan Africa is 17.4 percent, while the MDGs aim to reduce it to 6.2 percent by 2015.

<sup>44</sup> Stunting increased from 38 percent to 39 percent from 1995 to 2000.

<sup>45</sup> Source: MoH 2003



#### Relevance of nutrition support to Karamoja:

4.2.2 There are regional nutritional disparities in Uganda. Karamoja area manifests the highest vulnerability<sup>46</sup>. Hunger necessitates migration, destroys social and traditional structures and leaves many vulnerable. Despite prolonged international and national efforts, Karamoja does not manifest any significant developmental progress

4.2.3 The high malnutrition rates and food insecurity require food based or nutritional interventions but nutrition interventions in the past were not successful and there may be a need to improve their design and targeting and through that their effectiveness. Traditional life styles have to be considered while planning interventions.

#### Relevance of nutritional support to IDP/refugee camps:

4.2.4 Over 1.6million displaced people are accommodated in 188 camps in Northern and Eastern Uganda and some 44,000 children migrate each night for shelter in public premises in order to escape abduction. The majority of IDPs and 148,250 refugees (of the 250,000<sup>47</sup> currently living in Uganda) living in 66 settlements depend on WFP food aid.

4.2.5 IDPs and refugee camp population have limited access to land for own food production and lack income opportunities. They face problems of sanitation and hygiene leading to a high prevalence of diseases associated with limited availability of basic health services. Food rations provided by WFP through PRRO 10121 (upon which IDPs and many refugees will depend until they return home) have assisted people to overcome their immediate food requirements.

4.2.6 WFP currently provides a general food ration to cover an estimated net food gap of about 75% in IDP areas and anything from 25% to 100% in refugee camps according to assessed need.

4.2.7 The nutrition situation in IDP camps has improved since 2003 due to WFP intervention. District level average Acute Malnutrition rates in 2004 range between 4.5 percent and 12.2 percent but the rates are much higher for some camps. Crude Mortality Rates are above acceptable levels<sup>48</sup> and indicate a serious situation requiring intensive nutritional care and other health care services. The situation in both IDP and refugee settlements still requires targeted supplementary feeding as well as therapeutic feeding for identified cases of malnutrition while, in the longer term, the feeding programme should become incorporated into a Mother Child Health programme.

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<sup>46</sup> **Acute Malnutrition:** 15% in Moroto, 21.1% and 25.3% in Kotido, Nationally 6%.

**Child Mortality Rate:** 25% for Moroto and Kotido compared to 15% nationally, much lower access to social services. Aggravating factors are: high morbidity, poor access to food/sources of income, poor infant feeding practices, poor health care practices, poor living conditions, inappropriate water and sanitation facilities.

<sup>47</sup> From Sudan, Rwanda, Congo, and Somalia.

<sup>48</sup> >1/10,000 population per day

### 4.3 Effectiveness (Outputs to Purpose)

#### Assessments

4.3.1 WFP periodically carries out nutritional and food needs assessments and results are the basis for design modifications and improved programming. In the past, six-monthly Emergency Food Needs Assessments (EFNA) were conducted in all IDP camps but, with the support of the WFP Regional Bureau, the tool has been improved with the development of an Emergency Food Security Assessment (first round March 2004) carried out every six-months through Joint Assessment Missions in refugee areas. In addition, and in close collaboration with partners such as MoH, DDHS, UNICEF and implementing NGOs, nutrition surveys are conducted regularly. While the results of assessments and survey are used to revise and re-calculate food rations, the link between identified food insecure areas (or population groups) and programming of recovery activities is not yet effective and needs further improvement. Identified food needs and food gaps are not targeted by any programmed food based intervention.

4.3.2 WFP has provided high-quality technical and financial support to successfully enhance partner nutritional assessment and analysis capacities. According to the global memorandum, UNICEF and UNHCR are the responsible bodies for nutrition surveys but it is WFP who has had to take the lead from the level of strengthening national capacities to the regular implementation of surveys. If UN partners fulfil their obligations, WFP would have additional financial resources available to invest in other complementary activities.

#### Implementation

4.3.3 Support is provided to the implementation and expansion of TFCs and SFCs in order to address high malnutrition rates among children in IDP camps and refugee settlements. Following the SRS, those centres provide support to the IDPs/refugees as well as to the host populations. In early 2003, WFP very effectively developed and disseminated Social Support Programming Guidelines which are up-dated and adjusted according to new national guidelines.

4.3.4 WFP has initiated and intensively supported the development of nutritional guidelines for such as therapeutic feeding, supplementary feeding and nutrition guidelines for people living with HIV/Aids. The nutrition guidelines and food rations are designed according to International and WFPs Guidelines and are appropriate to the local situation. Moderately malnourished children and all pregnant and lactating mothers are entitled to a supplementary food ration. Severely malnourished children receive food support during Recovery Phase II and food is provided to their carer and older siblings if required. Milk-based food formula and medical care required during Phase I has to be contributed through UNICEF and UNHCR. An average admission time of one to two months is assumed. In Karamoja, adults at a critical stage may also be admitted and nutritional support is partly provided through MCH<sup>49</sup> interventions.

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<sup>49</sup> For information regarding food basket, please refer to **Annexe C**.

4.3.5 Implementation of health and nutrition services which directly complements WFP's food support<sup>50</sup> are under the responsibility of the implementing partners. The necessary complementary nutrition activities are often not functional. MoUs are elaborated and signed between WFP and all partners involved in SFC/TFC/MCH. MoUs focus on food management, storage, logistics, financial matters and reporting but complementary 'software components' (such as extension services) are not defined.

#### Monitoring and reporting

4.3.6 WFP has corporately introduced a Results Based Management (RBM) system which includes the regular monitoring and evaluation at the outcome level. RBM is currently the subject of development by WFP CO but monitoring at outcome level is not yet being implemented. Various tools are applied to provide required information. The WFP six-monthly food assessments provide useful success/failure information as well as providing the basis for improved programming. Representative household-based nutrition surveys provide information at outcome level on such subjects as rates of acute malnutrition, morbidity and mortality.

4.3.7 Case studies (or reviews) are conducted where there is an urgent need for information (review of feeding centres, review of outcome and output of food support to the HIV/ Aids programme, impact of food on the clinical course HIV/Aids efficacy study). WFP field monitors follow up the movement, storage, distribution and utilisation of food at the IP level. WFP is not involved in any further monitoring, but analyses and summarises monthly reports submitted by the partners. Partners, as defined within the MoU, provide monthly technical reports whose formats are adapted to the national SF and TF guidelines currently under preparation. Monitoring of use and utilisation of food at household level is the IPs' responsibility, but is not performed nor requested by WFP.

4.3.8 Monthly partner summary reports are, in most cases, not very satisfactory, incomplete, late and inconsistent such that wrong information does not allow meaningful analysis. Lack of information hinders delivery, programme improvement and questions IPs', and consequently, WFP's accountability to donors.

4.3.9 One the other hand, reports of selected, well functioning clinics provide excellent information, including recommendations for programme improvement. In some cases, WFP was requested to provide feedback to enable further improvement but unfortunately, WFP was unable to follow this up. Well functioning institutions may be selected as training institutions for information exchange, training and dissemination of lessons learnt.

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<sup>50</sup> Such as community based health and nutrition activities, nutrition education, growth monitoring, health screening, follow up of malnourished or discharged children as well as monitoring and evaluation.

## IDPs/refugees

### ➤ Output

4.3.10 The target was to rehabilitate 32,400 children suffering from severe or moderate malnutrition (about 10 percent of under 5 year old children of the total IDP/refugee population). By October 2004, ten TFCs were supported in IDP areas and four in refugee areas while 32 SFCs were supported in IDP camps and four in refugee camps. These had provided nutritional support to 10,919 children by June 2004. SFCs show very low success rates<sup>51</sup>. TFCs and SFCs, support both refugee and host populations in line with the SRS.

### ➤ Outcome

4.3.11 The objective is to ensure a good nutritional status for children and pregnant and lactating mothers, indicated by the prevalence of acute malnutrition among children, which should remain below 10 percent for IDP and refugee areas. Malnutrition levels have been high in the past such that, in 2003, a survey in Gulu camps reported a malnutrition rate of between 18.1 and 31.6 percent. As an immediate response, WFP, DDHS, UNICEF and AAH opened two more TFCs and six SFCs. FP also increased the GFD and included fortified blended food in the food basket. The malnutrition rate in Gulu area was reduced to below 10 percent in 2004.

4.3.12 By June 2004, the level of malnutrition in 188 IDP camps ranged from 4.7% to 25.4% and, for the 66 refugee camps, was between 5% and 19.3%. The target (average below 10%) was achieved or maintained for most of the supported settlements but some IDP and refugee camps still show higher malnutrition rates which are reported to show seasonal variation and are higher during the hungry months (July to August). Newly opened settlements are at a higher risk of malnutrition and often show rates (e.g. Ikafe camp, Arua District was 19.3%) because factors such as poor child-care practices, lack of health services and inadequate water and sanitary facilities contribute to a high prevalence of disease which result in high malnutrition rates.

4.3.13 Another planned outcome is to reduce and stabilise Crude Mortality Rates below 1 per 10,000 of the population. Mortality rates, where assessed, are still at a higher level<sup>52</sup> indicating that the primary problem is more health-related than caused only by food shortage. Malnutrition and disease represent a vicious cycle resulting in death if immediate food support and medical care is not provided in time. Supplementary food support is required here.

4.3.14 A problem appears in areas not actively covered by WFP. An example is found in West Nile area among the host population surrounding the refugee camps and in newly opened but still unregistered refugee camps. Children and mothers from those areas are

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<sup>51</sup> TFC: recovery 81 percent, default rate 5.4 percent and mortality 9.5 percent,  
SFC: recovery 51 percent, default rate 41.3 percent, and mortality 0.63 percent

<sup>52</sup> eg. Gulu, May 2003, 5.6/10,000 population, see Annexe C.

entitled to supplementary feeding but are not covered by any on-going community based programme, dissemination of information or follow-up. Reliable information on the situation outside WFP supported areas should be obtained with some urgency and targeted nutrition support might be required.

#### Karamoja

##### ➤ Output

4.3.15 Supplementary feeding is provided, under the PRRO in Karamoja, to 482 malnourished children as an on-site intervention while 2,940 children under five years of age and 1,773 adults take home supplementary feeding rations. In addition 3,045 pregnant and 1,275 lactating mothers receive a dry ration as a component of a MCH programme. In Karamoja, WFP supports 17 health units<sup>53</sup> and two TFCs<sup>54</sup> but no targets were set by WFP for the number of centres and, due to this lack of concrete data, it is difficult to measure the level of success (or otherwise) of this intervention. Data made available by WFP is however presented in Annexe H. (Planned versus Actual – Nutrition).

#### Outcome

4.3.16 The on-site supplementary feeding, more often accommodating severely malnourished children, does not achieve its targets and mortality rates are unacceptably high<sup>55</sup>, but success rates under dry supplementary feeding (as take home ration) are slightly better. This lack of success is due to lack of implementing partner capacity, lack of availability of additional inputs, lack of community based additional nutrition counselling and awareness raising (often children are brought too late). There is an urgent need for capacity building of implementing partners (NGOs as well as Government Institutions).

#### Coverage

##### ➤ IDPs/camps

4.3.17 The SFC/TFCs provide nutritional care for host populations as well as for IDP/refugees. Considering the IDP/refugee caseload and an average malnutrition rate of 10 percent, then about 32,400 children should have been rehabilitated by June 2004 but achievement was only 10,919. The coverage of both the TFCs and SFCs is not at level expected in a settlement setting (>70 percent<sup>56</sup>). This might be due to low nutritional awareness or to low parent caring capacity, high work load and limited availability of time. Traditional attitudes may not allow women to travel to and stay at such centres and most centres visited would not have the capacity to accommodate more children.

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<sup>53</sup> Five in Moroto, 3 in Nakapiritpirit and 9 in Kotido

<sup>54</sup> One in Kaabong and one in Matany Hospital. One more is in preparation in Kotido.

<sup>55</sup> Mortality 11%, Default 8.7%, Recovery 77%

<sup>56</sup> Humanitarian Charter and Minimum Standards in Disaster Response; Sphere Project, Switzerland

4.3.18 The planned catchment of one SFC was 3,324 beneficiaries and 1,131 for a TFC. In practice, an SFC is able to administer between 100 and 200 beneficiaries and a TFC between 20 and 50 children. About seven camps would share one SFC and 18 camps would share one TFC (total 36 SFCs, 14 TFCs, in 254 camps). Refugee camps (particularly in West Nile) are often very scattered and distances to centres are enormous<sup>57</sup>.

4.3.19 The scenario was much worse in Karamoja where the number of SFCs and TFCs is very limited, achieving coverage of only about 5 percent and approximately 7 percent of all pregnant and lactating mothers receiving support. The catchment calculated for one SFC was 5,435 moderately malnourished children and pregnant and lactating mothers and about 5,400 severely malnourished children per TFC. Only two TFCs are functioning throughout Karamoja. Centres are concentrated in urban, semi-urban and market areas and not equally spread over the districts. This shows the limitation of achieving the full benefit of WFPs nutritional support and indicates a desperate need for increased investments in decentralised health structures, primary and MCH centres (Level III health centres).

➤ Nutritional Support to TB

4.3.20 WFP provides food support to TB patients and their families according to the Direct Observation (short course) Treatment Scheme (DOTs). It follows the National Policy on TB treatment supported by WHO. Food support is provided to TB patients and family members throughout the treatment scheme. Food support is very effective in reducing defaulter rates and improves patients' ability to recover and stabilise their nutritional condition. Due to the lack of decentralised health centres or clinics, the programme still shows low coverage.

➤ Provision of mixed food basket and fortified foods

4.3.21 The food basket consists of a mix of traditionally and culturally well accepted commodities which are fortified according to WFP standards<sup>58</sup>. If beneficiaries had received their full entitlement (which they did not), the food basket should have been effective in stabilising nutritional status and preventing micro-nutrient deficiencies. Through WFP's provision of fortified commodities, about 11% of the entire population of Uganda benefits directly from WFP food support and benefits from measures to alleviate Micro-Nutrient Deficiencies<sup>59</sup>.

4.3.22 Three quarters of the above receive fortification through relief GFD as continued support, one quarter being through recovery activities and the Country Programme (FFA,

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<sup>57</sup> For example, Ikafe camp is 12km, or 3 hours' walking distance from the centre, while a 1.5 to 2 hours walking distance should be the maximum

<sup>58</sup> Oil provided by WFP is fortified with Vitamin A. Most of the maize flour is fortified with Vitamin A and Calcium. CSB is fortified with all essential Vitamins and Minerals (Nutritional value of food ration by beneficiary category is presented in Annexe)

<sup>59</sup> Actual support number of beneficiaries in 2004: PRRO plus CP: 2,637,278, Population 22,100,000 plus 250,000 refugees.

FFE, SFC/TFC/social support, HIV/Aids/TB, etc.). Almost 60% of the beneficiaries under recovery are reached through the school feeding programme. In Karamoja, about 15% of the population<sup>60</sup> benefits from provision of fortified foods. Effectiveness of support depends on regularity and quantity of food provided. Support under CP Act I is continuous, regular and manifests benefits even though coverage is low. The School Feeding Programme achieves a broad coverage and supports a large number of children on a regular basis, covering two thirds of children's energy requirements and more than 100% of their micro-nutrient requirements. FFA's coverage is still low and sustainable nutritional benefits are not yet achieved.

#### **4.4 Impact (Purpose to Goal)**

4.4.1 Direct nutritional support alleviates the consequences of malnutrition and physical and mental growth retardation but the problem with regard to WFP operations in Uganda is that in view of the low coverage, no significant impact can be expected.

4.4.2 WFP's direct food interventions in favour of IDPs and refugees has had an impact in reducing the consequences of malnutrition (physical and mental growth retardation) and on the risk of child mortality for about one third of the children in IDP and refugee populations and for about 5% of the children in Karamoja. A broader impact cannot be expected yet because partner implementation structures are not easily accessible due to long distances to the inadequate number of centres for the large area covered and are not well represented in the most vulnerable areas.

4.4.3 **Micro-nutrient Fortified foods**, in a balanced food basket alleviate the consequences of deficiencies especially for Vitamin A and iron, reducing the risk of morbidity and mortality and increasing labour productivity. Here, low coverage limits impact but support through the school feeding programmes shows a good nutritional impact.

#### **4.5 Connectedness**

4.5.1 Government policy. Uganda has formulated its Food and Nutrition Policy within the PEAP framework and nutrition is one of the priority components of the National Minimum Health Care Package under the Health Sector Strategic plan (HSSP). It is in line with the Plan for Modernisation of Agriculture (PMA), National Health Policy, National Gender Policy, UPE and Environment Policy. The policies are also in line with international conventions and resolutions to which Uganda is a signatory.

4.5.2 Uganda aims to achieve the Millennium Development Goals of halving the number of people suffering from hunger and undernourishment by 2015<sup>61</sup> The guiding principles include adequate food as a human right, food as a strategic resource, food and nutrition as cross-cutting issues, and include strategies to respond to food and nutrition

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<sup>60</sup> Karamoja number of beneficiaries: 175,755 PRRO plus CP, Total population: 1.2 million.

<sup>61</sup> **Source:** GoU Food and Nutrition Strategy Investment Plan

concerns at all levels with particular attention to vulnerable groups<sup>62</sup>. The urgent need to reach all individuals and families affected by malnutrition while, at the same time, provide targeted programmes for the most nutritionally vulnerable groups, is clearly stated.

4.5.3 The lead ministries in food security and nutrition issues are the Ministry of Health and the Ministry of Agriculture, Animal Industries and Fisheries (MAAIF).

4.5.4 WFP's Enabling Policy supports the MDGs and is formulated within five Strategic Priorities (SPs). SP 1, which addresses MDG 1 and 4, is to save lives in crisis situations and this is addressed through the relief part of PRRO 10121 (GFD) and nutrition and social support. SP3, which addresses MDG 4, 5 and 6, aims to support the nutritional and health improvement of children, mothers and other vulnerable groups<sup>63</sup>. Activities to strengthen GoU capacities (such as support to the development of guidelines, design and establishment of assessments and surveys, and establishment of food and nutrition data bases) are in line with SP 5.

4.5.5 Co-operation. WFP's nutritional activities, in particular SFCs and TFCs, are being planned and designed in co-operation with the Ministry of Health (Nutrition Department) at national level and the Department of Health Services at district level. Implementation is through various partners (government as well as private hospitals and clinics at county and sub-county level in Karamoja region). Private institutions are mainly under the Church of Uganda or are under private international funding. SFCs/TFCs in IDP areas are managed through MoH and DDHS, and cover the local as well as IDP population – they are implemented mainly by International NGOs<sup>64</sup>. UNICEF supports IDP settlements while Uganda Red Cross is the main partner for refugee settlement support through UNHCR. Non-food commodities and technical support to achieve or maintain livelihood security, such as the provision of non food items, social services, health, sanitation and hygiene measures are required to be supported by UNICEF for IDP settlements and by UNHCR for refugee settlements according to their mandates and guideline but, in reality, their obligations are hardly fulfilled. Community Health Workers are responsible for community-based nutrition activities. According to the Global MoUs, UNICEF and UNHCR should take the leadership role in implementation of nutritional assessments but again their obligations are hardly fulfilled. MoUs with partners focus on food management, storage, logistics, financial matters and reporting. Complementary components, such as nutrition education, are not defined.

4.5.6 WFP has been proactive in establishing Interagency Co-ordination on Health and Nutrition in Emergencies. The working group meets monthly and is chaired by UNICEF with members of MoH, International Organisations<sup>65</sup> and WFP. The co-ordination group reports about the actual situation, discusses issues regarding planning, policies and

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<sup>62</sup> Which is also addressed within the national policy of orphans and other vulnerable children.

<sup>63</sup> Which is being addressed through the nutrition and social support also as a component of the PRRO (including HIV/Aids, TB), the CP Act I. and the DP with regard to HIV/Aids).

<sup>64</sup> Such as ACF in Gulu, MSF Holland in Lira, International Medical Corps in Kitgum, GOAL in Pader.

<sup>65</sup> ACF, IRC, MSF, ICRC, WV, IMC, SCIU, CCF and others.



guidelines. Co-ordination meetings also take place at District level while WFP and its IPs mainly co-ordinate bilaterally.

4.5.7 Sustainability and outlook. Depending upon IDP/refugee return, relief interventions will hopefully be scaled down or phased out at some time in the future. Pockets of poverty in post-conflict areas and food insecurity in chronically food insecure areas will require further nutritional support. In the future, WFP may support GoU Food Security and Nutrition Strategy providing support through a Country Programme implemented by the line Ministries, MAAIF and MoH. Geographic priority areas may be selected according to poverty indicators whereby the rate of chronic malnutrition would play a key role rather than that of immediate food needs and acute shortages. Interventions should be targeted to most nutritionally vulnerable groups.

## 4.6 Conclusions and recommendations

4.6.1 WFP food assistance is relevant to the needs of the targeted population living in conflict affected and food insecure areas. Regular needs assessments and nutrition surveys ensure an adequate ration and show good results. The nutritional situation in IDP camps has improved since 2003 indicating that food interventions show good results in preventing severe food shortages. However, mortality rates are still above acceptable levels. This indicates a severe lack of health services, sanitation and hygiene. Supplementary feeding is provided through SFC/TFC as a complement and safety net to the general food rations in IDP and refugee areas and as nutritional support through SFC/TFC and MCH in Karamoja. Nutrition support is targeted to malnourished children (and their carers), and pregnant and lactating mothers. Coverage is limited.

4.6.2 **Conclusion 1.** Malnutrition rates and food insecurity are worse in remote areas and existing WFP programme components are not yet effective in those areas due to problems of insecurity, lack of capable partners and the limited absorption capacity of District Authorities.

4.6.3 **Recommendation 1.** WFP should expand the range of Recovery and Development activities to areas of high malnutrition and food insecurity. Possible activities could include FFA, Literacy classes, vocational training for subjects such as health, hygiene, nutrition, food security, supplementary feeding or MCH programmes.

4.6.4 **Conclusion 2.** GoU Local Government has limited capacity to be fully involved in project design, implementation and monitoring at this stage.

4.6.5 **Recommendation 2.** A demonstrative approach, entrenched in existing government structures, appears to be the most useful way for a positive long-term impact. WFP, through an appropriate partner, needs to support the capacity of its government counterpart and/or involve itself more directly within established government structures. WFP could cooperate with mechanisms already established for channelling funds to communities and more direct cooperation with UNICEF, the World Bank and other technical partners could also be explored.

**4.6.6 Conclusion 3.** Complementary activities, such as MCH and Nutrition education, are (as a rule) non-existent and sometimes result in non-achievement of intervention potential or even inappropriate utilisation of resources. For example, there is little follow-up of discharged (previously malnourished) children.

**4.6.7 Recommendation 3.** WFP should invest in more comprehensive implementation of community based nutrition programmes while minimum requirements for nutrition education should be defined. In the longer term, SFC/TFC support should become part of an MCH programme including regular growth monitoring which could replace the current regular (and very costly) nutrition surveys.

**4.6.8 Conclusion 4.** Within the health sector, the SRS<sup>66</sup> includes service provision outside camps but this is not yet functioning well nor properly understood within communities. The nutritional situation outside officially registered IDP and refugee camps seems to be worse than assumed<sup>67</sup> and comprehensive information is not yet available.

**4.6.9 Recommendation 4.** While nutrition assessments are currently ongoing in IDP impacted areas, WFP should specifically advocate for wider assessment of the situation outside supported camps and take appropriate action where necessary.

**4.6.10 Conclusion 5.** WFP provision of nutrition services (supplementary/therapeutic feeding) achieves very low coverage due to inadequate implementation structures, limited number of centres and long distances between centres while over-utilisation of few centres diminishes the quality of services provided. At the same time, high work load, lack of time and traditional attitudes hamper household caring capacity while late admission of children to centres increases default rates.

**4.6.11 Recommendation 5.** There is a need for an increase in the number of service providers, of health centres and of peripheral clinics through government structures. High priority areas should be defined by vulnerability criteria (through JAM, EFSA, nutrition surveys) and by the availability of social services. WFP could take the lead in identifying and defining priority areas, based on the results of its assessments and surveys.

**4.6.12 Conclusion 6.** UN partners do not always fulfil their obligations. The supply of additional commodities<sup>68</sup> through UNHCR and UNICEF (as a pre-condition to successful rehabilitation of malnourished children) is not ensured.

**4.6.13 Recommendation 6.** Implementation of SFC and TFC have to follow UN and international standards and, if agreed additional resources cannot be provided by UN partners, then solutions will have to be found. Regarding the provision of food

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<sup>66</sup> Self Reliance Strategy

<sup>67</sup> As observed by the ET in unsupported camps in the Gulu area.

<sup>68</sup> Including medicaments, milk based formula for infants and severely malnourished children etc.

commodities for severely malnourished children, an immediate solution may be to approach UNICEF to also cover IDP supported areas. This would actually be in line with the SRS (providing support to IDP and host populations)<sup>69</sup>.

**4.6.14 Conclusion 7.** Malnutrition rates manifest seasonal variation<sup>70</sup> and this is well recognised by WFP and evidenced by the timing of their bi-annual nutrition surveys in the conflict areas.

**4.6.15 Recommendation 7.** Vigilant attention to the seasonality of food shortages and malnutrition rates has to continue with seasonal adjustments of the food basket as required.

**4.6.16 Conclusion 8.** There is very little complementarity between the various Recovery components of the nutrition portfolio. Food security and nutrition surveys are used to adjust food rations but are not considered for programming and targeting of Recovery activities. Activities are implemented where partners are available not where needs are highest and food support through FFA is on an *ad hoc* basis. Food quantities delivered do not necessarily cover nutritional needs while (with the exception of FFE) additional components targeted towards physiological risk groups still have limited coverage.

**4.6.17 Recommendation 8.** WFP needs to programme and target recovery food operations towards identified most vulnerable areas, aiming to cover identified food gaps of the most vulnerable households. Those components should be complemented by food interventions towards specific physiological risk groups<sup>71</sup> with full coverage within targeted regions.

## **5. FOOD FOR EDUCATION**

### **5.1 Background**

**5.1.1** Under **PRRO 10121** and **CP Act. II**, WFP support to education includes the provision of school meals (a mid morning snack and lunch for day pupils or three meals for boarding students). Both programmes also support officially registered pre-primary schools. Secondary Schools are assisted in Karamoja and Arua while the CP Act II also provides take home rations for girls in Pre-Primary and Primary Schools in Karamoja. CP Act II in Karamoja also supports non-formal education (Alternative Basic Education Karamoja (ABEK) for primary school-aged children and Functional Adult Literacy (FAL) Classes) with take-home rations. A food incentive is also provided to a number of FAL instructors through PRRO FFA.

**5.1.2** In addition, WFP has provided required non-food items for selected schools under CP Act. II. Complementary support has been provided to improve water supply, to

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<sup>69</sup> Health centres are supported by UNICEF but not feeding centres.

<sup>70</sup>The number of children requiring SF or TF support increases during the pre-harvest 'hungry months'

<sup>71</sup> Mothers, children under five, school children, HIV/Aids and TB patients.

implement schools gardens and to improve food related and educational infrastructure in selected schools. The national de-worming programme has been supported by WFP to ensure satisfactory coverage of the targeted school-aged population.

## 5.2 **Relevance**

5.2.1 Problems in enhancing education are the following: Throughout Uganda, irregular school attendance and poor attention in classes impede educational performance and, particularly in conflict-affected areas, food insecurity and poverty jeopardise educational goals. Children of poor and food insecure households have to contribute to the household economy (take care of younger siblings, search for food or firewood, fetch water and boys may have to herd animals, work on the fields, or perform day-labour). Cultural constraints and a tradition of early marriage affect girls' primary education. Malnutrition in school children, prevalent particularly in Karamoja, is detrimental to mental and physical development and impairs cognitive functions.

5.2.2 Consequently, food support to increase enrolment and attendance and to ensure better educational performance of the poor is very relevant to the needs of the most vulnerable population groups. Provision of nutritious food to school children is a relevant intervention to attract children to schools, improve regular attendance and to enhance cognitive functions. It is also a relevant incentive for parents since food provided at school reduces households' food expenses (income transfer through the meals provided at schools and the take home ration for girls in Karamoja) and compensates for the loss of their children's labour. GoU has recognised the importance of alleviating short term hunger and encourages parents to provide breakfast at home, a packed lunch or to contribute to a feeding programme managed by the school. Particularly in food insecure areas, parents seem unable to follow that guidance and, in recognition of this, GoU seeks support for further expansion of a functional SFP through its Expanded School Feeding Programme (New Partnership in Uganda) in which WFP will participate.

5.2.3 Resources to education were increased with the introduction of UPE and education indicators improved drastically but lack of teachers (especially female), classrooms and scholastic material constrain the benefits of SFP particularly among lower Grades and in more remote areas.

### 5.3 Effectiveness (Outputs to Purpose)

#### Management and implementation

##### ➤ Food acceptance

5.3.1 Commodities provided are traditionally and culturally well accepted, children considered the food to be ‘tasty’<sup>72</sup> and the ration size appears to be appropriate<sup>73</sup>. Problems appeared in some schools, however, with regard to the management of food preparation which has led to delayed meals or provision of just one meal instead of two.

##### ➤ Food distribution

5.3.2 Respondent teachers, food focal points and parents indicated that WFP distributes the food in sufficient quantities and without major pipeline breaks while discontinuation of single commodities was negligible. In light of the precarious security situation, remoteness and long distances, this requires enormous logistical efforts and good pipeline management and planning at all levels. WFP was able to elaborate a very well functioning distribution system to schools.

5.3.3 Food release/dispatch is based upon actual head counts and closing balances are assessed by WFP field monitors. This system requires a considerable amount of time and resources, and is, for the time being, the only feasible solution to dealing with exaggerated enrolment and attendance data. WFP advises and supports schools in improving their reporting systems, to properly maintain school registers and to report daily attendance as a basis for monthly and yearly summaries. There are some successes such as the incidences of over 80% child attendance now reported.

5.3.4 District **Project Management Units and WFP Field monitors** conduct school visits once or twice per months, record performance and follow the standardised monitoring form. Those records provide valuable information on various output indicators which would now benefit from analysis and sharing with stakeholders.

5.3.5 **Management at school level.** School and Food Management Committees and Parent Teachers Association exist at all schools and are well functioning in some places but performing weakly in others. Monthly meetings are planned but are mainly held once per term or only at the beginning of the first term and the end of the third term. Poor performance results in improper food management, maintenance and rehabilitation of food related infrastructure. This has negative consequences for the quality of food storage, hygiene situation and timely availability of firewood and water. Weak management affects the timely and regular provision of meals. Poor performance of PTAs and FMCs forces teachers and students to bear additional work loads to the

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<sup>72</sup> All children said to prefer the school meal before their family food, because it was more tasty.

<sup>73</sup> Mid morning snack in form of porridge: 75g CSB (fortified), 10g sugar, 5ml oil; and a lunch: 150g maize meal (partly fortified with Vitamin A and Calcium, 30g beans, 10g oil (Vitamin A fortified). Providing 1194 kcal, 38g protein, 27g fat, about 2/3 of the energy requirements and about 90% of the protein requirements of children between 6 and 12 years (SSG).

detriment of teaching and learning. WFP supported and organised food management training for 319 teachers (106 percent target achievement).

**5.3.6 Villagers' contribution.** In most schools, villagers contribute to the SFP in cash (between 500 and 1500 Ush) or in kind (labour, firewood etc). The required cash contribution can be counter-productive to enrolment and attendance, especially for the poorest children. It was also observed that children were excluded from food distributions if they did not pay the food fee.

#### Effectiveness PRRO 10121

**5.3.7 Output level.** Support to school feeding under the PRRO is designed slightly differently from that under the CP. It was originally designed as a support programme to IDPs and refugees only and was gradually expanded to all refugee-hosting sub-counties. In West Nile particularly, since knowledge of communities' perception was low, SFP was started with the provision of a mid morning snack only. As schools and communities gained more management experience, it was gradually expanded to more schools and from one to two meals per day. To date, not all schools are covered and not all Primary Schools receive support for the provision of 2 meals. Full expansion to all schools refugee hosting sub-counties is envisaged for the coming year. Numbers of children supported between 2002 and 2004 increased by 250%, while tonnages were far below targets (21% in 2002 and 54% in 2004<sup>74</sup>). Expansion to the districts of Pader, Lira and Soroti for displaced and formerly displaced children is under preparation.

**5.3.8 Outcome level.** It is reported by all institutions that food support given to schools increases enrolment and attendance (especially afternoon attendance and from food insecure households). The food represents an attendance incentive, enhances absorption span which leads to improved educational performance<sup>75</sup>. It also increases parents' attention to education. Provision of nutritionally balanced meals is effective in reducing short-term hunger and improves students' health and nutritional status. Fortified food provides a significant contribution to improved micronutrient status and the meals contribute to household savings through reduced food needs so constituting a form of income transfer to parents<sup>76</sup>. Net enrolment rates, attendance and drop out rates were not available for the PRRO supported areas.

**5.3.9 Coverage of SFP under PRRO.** The PRRO SFP supports little more than one third of all children enrolled in supported districts<sup>77</sup> and between 25 and 27 percent of all school-aged children in those districts. The SFP originally started in IDP/refugee areas and expanded gradually. SFP currently targets sub-county level with the aim of full coverage within that level) but, for the two districts visited by the mission (Gulu and

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<sup>74</sup> See **Annexe C**.

<sup>75</sup> As reported by teachers.

<sup>76</sup> Among families able to provide enough food to their children: savings of about 2/3 of the food expenses of food requirements for that child on a feeding day (190 days out of 365 days per year).

Among families not able to provide enough food to their children: food is supplementary to the food eaten at home, increases energy and nutrient intake up to 2/3 (100% supplementary).

<sup>77</sup> 37% average for Gulu, Kitgum, Arua, Pakelle, Bundibugyo (see Annex-Table 2)

Arua), such targeting causes migration/shift of students from non-supported to supported schools. The nutritional situation of host populations (e.g., Arua) is more precarious than that of the refugees so justifying the former's nutritional support.

### Effectiveness of CP Act II in Karamoja

5.3.10 Output level. Activity II provides a mid morning snack and lunch to pre-primary, primary<sup>78</sup> and secondary school pupils, and three meals to primary boarding school pupils<sup>79</sup>. A total of 52,192 pupils from 201 schools received support for 185 days for day students and 260 days for boarding students<sup>80</sup>. 17,925 MT of food was utilised under CP Act II in Karamoja between 2001 and July 2004<sup>81</sup>. Reference to Annexe J (Planned v Actual - Education) will help to understand these figures.

5.3.11 Outcome level. A study comparing enrolment rates in primary schools from 1999 to 2003 proved an increase in enrolment of about 60 percent, with an almost equal increase for both boys and girls. At the same time, attendance decreased proportionally from 70 percent to only 49 percent. Nevertheless, the absolute number of children attending classes increased by about 10 percent (see Table D3 in Annexe D). During the same period, national attendance increased by 21 percent (EMIS, MoES 2003). Analysis of a sub-sample of schools confirmed the 10% increase in attendance but also revealed an increase in enrolment of only 24%<sup>82</sup>. Attendance does not show much variation by season in PRRO supported areas but was an issue in Karamoja where the attendance is slightly higher from April to July.

5.3.12 Net Enrolment Rates (NER) calculated for Karamoja in 2003 is 37 percent, while girls show a lower rate in Moroto and boys a lower rate in Nakapiripirit. The rates are much below the National NER of 90% (see Table D4 in Annexe D). It should be noted that this calculation is based on possibly inflated official enrolment figures after the introduction of UPE .

5.3.13 Average national Completion rate is 22 percent (P1 to P7). Given the 2003 figures only, it is difficult to calculate the completion rate for Karamoja retrospectively<sup>83</sup> but it is far below average and may be about 10 percent. In 2003, the number of children enrolled in Grade 7 was only 6 percent of the children in Grade 1<sup>84</sup> which is the result of low enrolment rates 7 years ago but also of high drop out rates (see Table D5 in Annexe D).

5.3.14 Girl's Take Home Rations (GTHR). In Karamoja, under CP Act II, girls of Pre-Primary and Primary Schools receive GTHR. The ratio of boys to girls throughout all Grades in WFP supported schools in Karamoja is 10 to 8 for 2004 (44 percent of primary

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<sup>78</sup> 29,924 pupils ( 45 percent of plan achieved), 44 percent girls

<sup>79</sup> 16,490 pupils (117 percent of plan achieved), 46 percent girls

<sup>80</sup> Planning figure: 190 and 260 days respectively)

<sup>81</sup> 46 percent of the original target of the current CP Act.II

<sup>82</sup> Most probably being more realistic than the 60 percent increase reported officially.

<sup>83</sup> Completions rate would require the follow up of a cohort of one years' students till completion of Primary School 7. For analysis here a proxy indicators is used.

<sup>84</sup> 9 percent for boys and only 4 percent for girls.

school students are girls). It was reported, that the provision of GTHR resulted in a decrease in gender disparities in lower Grades (52 percent girls in Grade 1) but the food incentive was insufficient to reduce gender disparities in upper Grades and drop out rates remain high (see Table D5 in Annexe D). In May 2004, WFP increased the food incentive for upper Grades<sup>85</sup>. GTHR makes a significant contribution to families' incomes<sup>86</sup> and it is assumed that the incentive will increase completion rates, reduce drop-out and provide significant nutritional benefit.

5.3.15 Coverage of SFP under CP Act II in Karamoja. It is difficult to calculate any coverage rates since statistics are not easily available and numbers differ enormously. Nevertheless, Karamoja's school-aged population is estimated at 230,979, about 104,727 children of all ages are enrolled in Primary Schools, and 47,072 receive food support in Pre-Primary and Primary Schools and this results in about 20% coverage of the total school-aged population and 44% coverage of enrolled children. In fact all enrolled children should be covered by SFP, once they attend school.

5.3.16 Short term hunger - PRRO and CP. Despite lack of reliable data, teachers report the effectiveness of the meals to reduce short-term hunger. Nevertheless, better and more appropriate timing of meals may bring improvement since most children do not eat before school, while others may only have had a cup of milk. Both meals (mid morning snack and lunch) are often delayed in preparation and delivery<sup>87</sup>. A more equal distribution of meals over the day would enhance the nutritional benefit<sup>88</sup>.

5.3.17 Meals provided at schools also attracted younger, non-enrolled children and the number of under-aged children increased significantly so causing disturbance of lessons and teaching schedules. Food resources were stretched over the child head-count regardless of their entitlement.

5.3.18 Pre-primary education. WFP promoted (through the LC) the establishment of Pre-Primary Centres and developed guidelines for their application<sup>89</sup>. In some refugee and IDP areas, pre-primary schools already existed and well trained carers are in place (trained by NGOs and sometimes by FAL instructors). WFP currently supports about 654 primary children in Karamoja (48 percent girls), 446 pre-primary children in Arua and 6,126 pre-primary pupils in Adjumani and Moyo Districts. Numbers are still low and have not increased significantly but many communities, even in remote places, are

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<sup>85</sup> from 300g per day (13.6kg per months) up to 25kg CSB per months for all girls attending P3 to P7 for more than 80 percent of the teaching days. Provides a significant contribution to the 'food available on the families plate' (about 140g CSB per family member and per day).

<sup>86</sup> It is difficult to calculate the monetary value of CSB. Since it is a food commodity well accepted and consumed by all population groups one could assume a market value equal to maize flour, about 400 USh per kg, 25 kg=10,000 USh=5.9US\$, equal about 7 to 10 days income through casual labour of an adult, an values more than a child would earn as child labourer (about 500 Ugsh per day).

<sup>87</sup> Schedule: mid morning meal: 10:00 and 10:30; lunch 13:00 and 14:00.

<sup>88</sup> Porridge could be provided on arrival at school. This would improve the timely provision of lunch which is important to avoid the withdrawal (by parents) of an evening meal at home from children who have had a late school lunche.

<sup>89</sup> i.e. in Arua, guidelines were very detailed and included a screening by District officials before approval. Community has to provide i.e a classroom and kitchen in a defined distance to the Primary School, cooking facilities and utensils, carers.



waiting (and prepared) for approval to receive support. In Karamoja, the enrolment and attendance figures of pre-primary schools did not increase<sup>90</sup>.

5.3.19 Secondary Education. WFP supports Secondary school students in Karamoja<sup>91</sup> and Arua District<sup>92</sup>. Numbers in Karamoja have doubled since 2000 and the share of girls increased from 37 percent to 50 percent. The food support helps to reduce schools fees<sup>93</sup> but the increase in students is more likely to be attributed to the increase in school places. Secondary Education is mainly limited to urban and richer areas while high school fees tend to limit access to relatively better off families. Secondary Schools are either private or are reported to have very limited resources and experience difficulties in absorbing larger numbers of children.

5.3.20 It should be noted that younger children are more vulnerable to nutritional deficits than older children and their response to improved nutrition is higher ('catch-up' growth can partly compensates for previous nutritional shortfalls).

#### Non-formal education

5.3.21 Alternative Basic Education for Karamoja. ABEK is an education system under the Ministry of Education and Sports particularly designed for Karamoja region to offer literacy classes to primary school aged pastoralist children. WFP provided food support<sup>94</sup> to ABEK learners from 2000 to 2002 in Kotido and from 2000 to March 2004 in Moroto. Enrolment numbers varied between 3,250 up to 8,250 in 2003 and decreased to 5327 in 2004 and female participation was 50% to 62%. ABEK's coverage, even in 2003, was still very low (about 4%). Attendance varied between 85% and 396% and was reported at 38% in 2004.

5.3.22 Reports reveal a transition rate into the formal education system of 40%, while other reports state that it was comparatively low but still significant. The correct transition figure may be assessed again but this shows the significant positive impact on raising education awareness and mobilising communities and children to take action for entry into the formal education system.

5.3.23 However, proper organisation, implementation and teaching quality is crucial. The benefit of receiving food was often the main objective for attending ABEK classes rather than the educational benefit. WFP was requested to stop support to ABEK because the value added by food support was not clear. The ABEK approach and potential benefit of food aid is currently under review.

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<sup>90</sup> 921 in 2002 down to 658 in 2004, equally decrease for boys and girls

<sup>91</sup> Karamoja: 5,124 pupils, 10 percent of all children in supported in formal education, 36 percent girls.

<sup>92</sup> Arua: 9,318 pupils, 15 percent of all SFP supported children.

<sup>93</sup> 150 US \$ per year in supported schools in Karamoja compared to 600US\$ throughout Uganda.

<sup>94</sup> 300g CSB per learner and instruction day, 260 days, provided as take home ration, it provides 1128kcal, 52g protein, 21g fat, 63% of the daily energy requirements, up to 100% of protein and far more than 100 percent of the micro nutrient requirements of children of that particular age group.

5.3.24 Functional Adult Literacy Classes (FAL). Sixty-three percent of men and 45 percent of women in Uganda are able to read and write while numbers are much lower in Karamoja at only 18 percent of men and 6 percent of women. In Karamoja, WFP supported 2,058 women and 2,381 men to attend FAL classes (4,439 learners, 47 percent women). WFP also supported production of the first FAL Learners Handbook and provided food support<sup>95</sup> to 76 FAL instructors in 38 centres (145 FAL centres in 2002). In 2003, an 80 percent pass rate in proficiency tests was registered. Nevertheless, an appropriate quality of teaching is not yet assured.

5.3.25 FAL classes and the food support is highly appreciated by the population, there is a high interest in attending such classes, teaching content is regarded as highly useful and relevant to their daily life problems and an impact is expected on improved livelihoods. Furthermore, it raises parents' awareness on children's education. Shortage of funds seems to be the main constraint to increased coverage beyond urban areas. There is no evidence that the number of FAL learners and classes increased over the supported period and total coverage remains extremely low (less than 1% of all illiterate adults in Karamoja<sup>96</sup>). Nationwide, coverage of 4.3% has been reached over 37 districts without major food support.

5.3.26 Complementary Activities. WFP has been very innovative in finding possibilities to broaden the intervention from that of a simple feeding programme towards a comprehensive school feeding programme with implementation of a set of highly relevant complementary activities.

5.3.27 Food related infrastructure. WFP, through FFA, has supported the constructions and renovation of food related school infrastructure and teachers' quarters in settlement schools as well as in Karamoja. Such support is perceived as very useful even though not of the best quality and there is a great demand to further support.

5.3.28 There has been significant GoU investment in Education and its infrastructure. In Karamoja, a series of new school buildings was constructed, and education indicators<sup>97</sup> are now close to or even better than national averages. However, construction followed unique standard designs which do not necessarily match local requirements (number and size of classrooms, number of teachers' quarters, boarding facilities, storage facilities, toilet facilities etc). Lower Grades are overcrowded and under resourced while upper

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<sup>95</sup> Under the PRRO, July 2004: 11 female and 29 male instructors, 1 kg cereal, 0.69kg pulses, 0.13kg oil, monetary value of 953 Ug.Sh. which is equal to the FFW ration provided under the PRRO in Karamoja.

<sup>96</sup> Total population of Karamoja: 1.2 million, of which about 50% of them are adults 20 to 60 years old, about 600,000 adults, 88% are illiterate, 528,000 illiterates.

<sup>97</sup> Teacher-pupils ratio: Karamoja: 1:45; PRRO supported SFP schools: 1:57. National target: 1:40, Actual National Average: 1:55/60, down from 1:120 in 1999.

Textbook pupil ratio for core subjects: Karamoja: 1:4 for lower and 1:5 for upper grades;

PRRO supported SFP area: 1:3.

National average 2003: 1:4 for in lower Grades and 1:3 for P3 and P4. National target for P3 to P7: 1:1 (in 1993 37 pupils shared one text book).

levels are over-resourced<sup>98</sup> and funds do not seem to be well co-ordinated (for example, there is still a lack of secondary schools).

5.3.29 School water supplies have been supported by WFP in a great number of schools either as rain-water harvesting system, mobile water tanks or as deep drilled hand pump wells. In some of the schools, teachers indicated that water systems were no longer used because they were not properly constructed, poorly maintained or spare parts are missing.

5.3.30 Fuel saving stoves. Demand for fuel-wood in schools is large and WFP has facilitated the development, dissemination and construction of fuel saving stoves which reduce consumption by about 60%. The initiative is in its infancy and coverage has so far been low such that, in Karamoja, only 30 of 2001 schools have been supported.

5.3.31 School gardens and wood lots have been successfully designed and supported by WFP. In Karamoja, 100% of the targets (50 school gardens in 201 schools) have been successfully implemented up to June 2004 and another 50 are envisaged for 2005. According to WFP records, 35% of the gardens received seeds through the District's PMU and 65% provided their own seeds/seedlings. About one third of schools use the products to complement the school meal. Some of the gardens are well managed and maintained and even produce some income for pupils to cover school related expenses. Some gardens visited require more technical input and improved management (50% reported failure due to drought, lack of tools and fences). The main aim of a school garden, however, is to enable a garden-based learning approach and not necessarily to bring marketable yields which could overload teachers' capacities.

5.3.32 De-worming (associated with the national de-worming programme), targets all pre-primary and primary school children, is being implemented through the MoH and DDHS and is supported by UNICEF. The programme is designed for sustainability with decentralising planning, management and monitoring responsibilities delegated to District level. The first round took place in May 2004 and will take place twice per year. WFP supported the programme<sup>99</sup> for all WFP targeted schools but summary results are not yet available.

5.3.33 Other educational activities such as health and nutrition education, HIV/Aids education, Malaria prevention were originally planned but, due to budgetary limitations and lack of available of partners, are not yet very effectively implemented. GoU, with the support of various stakeholders, envisages a holistic school health programme where SFP would form a central element.

## 5.4 **Connectedness**

5.4.1 The school feeding programme is implemented through MoES at national level and the Departments of Education at District level. At school level, the Food Management

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<sup>98</sup> a number of Grade 7 or Grade 8 classrooms accommodate only a few children, 1 or 2 or 4 pupils per classroom are not seldom),

<sup>99</sup> Cash contribution of **USD** 26,000 \$ plus logistic support to WFP supported schools.

Committee is the responsible body supported by the PTA. The Local Council (LC) is involved in supervision, educational campaigns, mobilisation and awareness raising.

5.4.2 Primary education. GoU has declared its goals to achieve UPE by 2015, eliminate gender disparities in primary and secondary education by 2005 and at all levels of education by 2015. Targets are:

- to increase net enrolment of 6 to 12 years old to 98 percent by 2003 and to 100 percent beyond 2003; and
- to ensure a certain quality of education<sup>100</sup> and to increase Primary Level Examination to 79 percent by 2002. GoU currently still struggles to achieve the targets set for 2002.

5.4.3 Pre-primary education was supported in the past by a few NGOs through private nursery schools but MoES (supported by UNICEF) has, with the arrival of UPE, developed a draft policy on 'Early Child Development'. The next steps are to develop ECD curricula, train ECD carers, integrate it officially into inspection and monitoring visits and adequately equip such centres. However, since significant outreach cannot be expected in the near future, GoU also encourages community initiatives to set up ECDs.

5.4.4 Adult literacy classes. MGLSD promotes functional adult literacy in 37 districts, providing literacy opportunities for adults who did not have the opportunity to attend schools during child hood. FAL is mainly implemented and monitored through the Community Development Office supported by various NGOs. GoU recognises the high demand for literacy classes and supports all efforts to expand FAL.

5.4.5 WFP and UNICEF aim to collaborate in the provision of school equipment and WATSAN to WFP supported schools. This collaboration could be improved further with UNICEF being the main cooperation partner for the implementation of the ECDs and FAO supporting the school gardens with provision of seeds, tools and technical assistance.

## 5.5 **Conclusions and recommendations**

5.5.1 School meal interventions have been established and are well appreciated but achievements at outcome level are not quantifiable. Non-formal education has also been supported but with much lower coverage. A full set of complementary activities with regard to improved school and food related infrastructure, have been implemented to improve children's health, their food security and schools' availability to natural resources.

5.5.2 **Conclusion 1.** SFP coverage in WFP supported districts is still low and not all schools in each district and county are covered - consequently, students move from non-supported to supported schools within neighbourhoods. Schools in the phase of

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<sup>100</sup> pupil teacher ratio to 50 to 1, pupil classroom ratio to 92 to 1, pupil text book ratio to 6 to 1 by 2003.

introduction of SFP only receive support for just one meal per day and two meals are introduced as the system develops in that phase.

**5.5.3 Recommendation 1.** SFPs should apply district-wide targeting to increase coverage. Within target areas, all primary schools should be supported with equal food rations as soon as possible. In Arua district, it is particularly important that two meals are given per day, again as soon as possible, The resources needed to achieve this are available and the ET understands that it is planned by the CO.

**5.5.4 Conclusion 2.** Achievements at outcome level are not reported and proper outcome indicators are not monitored. Enrolment data are inflated and so make correct food release and reporting at outcome level impossible. Monitoring focuses mainly on quantitative output level data and results are not fully analysed with the result that appropriate decision making is not undertaken.

**5.5.5 Recommendation 2.** The actual monitoring forms and procedures should be revised/ improved and outcome level indicators need to be integrated under the responsibility of MoES/DEO/PMU. The MoES should develop a realistic reporting system particularly in relation to enrolment rates and with the involvement of LC. Regular summaries of core information should be improved and monitoring results used to improve programme design and implementation.

**5.5.6 Conclusion 3.** The majority of children have no breakfast before school and mid-morning snacks and lunch are provided within a relatively short time (10:30 and 13:00) and are often delayed. This can hamper impact on short term hunger, disturb teaching schedules while late lunches can lead to reduced food intake at home.

**5.5.7 Recommendation 3.** WFP could provide porridge upon arrival at school in order to ensure better distribution of meals throughout the day, enhance nutritional benefit and give cooks time to prepare a more timely lunch. This might require cooks to start their work at 6 am and leave at 4 pm (after lunch and cleaning) which is a practical problem best left to the school management committees.

**5.5.8 Conclusion 4.** Financial contributions demanded of parents to cover food related costs (500 to 1,500 UgSh per term), while introducing some degree of sustainability and responsibility can be a deterrent to enrolment/attendance of children from the most food insecure households. This was observed by the ET notably in the non-official camps in Gulu with a consequent poor condition of some children.

**5.5.9 Recommendation 4.** In order to bring parent cash burdens to acceptable levels, the possibility of accepting in-kind contribution<sup>101</sup> in lieu of cash should be explored further and WFP could provide budgetary substitution by providing a ‘food incentive’ to cooks<sup>102</sup>.

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<sup>101</sup> eg. Firewood, fetching water, labour etc.

<sup>102</sup> The value could be comparable to the value of a FFW ration (ie.75% of a daily wage rate).

5.5.10 **Conclusion 5.** Numbers of boys and girls are more or less equal in pre-primary schools making GTHR irrelevant. Since Girls, as well as boys, are not involved in home-based work at that young age, then provision of a meal should attract them and ensure attendance.

5.5.11 **Recommendation 5.** Logically therefore, take-home rations should be phased out for pre-primary school students but the ET understands that this presents practical problems of head counting which would not justify change for such an insignificant saving.

5.5.12 **Conclusion 6.** WFP stopped supporting ABEK (Alternative Basic Education in Karamoja) because of criticism of its low educational outcome and, consequently, the ET was unable to make any on site observations of its performance. In collaboration with partners, the approach and support to ABEK is being reviewed.

5.5.13 **Recommendation 6.** Food support to ABEK classes is recommended (as long as teaching quality is assured) in order to increase enrolment/attendance and to contribute to nutritional improvement of the most vulnerable school-aged children. Food support to instructors may again help to increase class numbers and to reach remote areas.

5.5.14 **Conclusion 7.** Despite GoU UPE policy and all the support to the Primary Education sector, the NER in Karamoja is still very low<sup>103</sup>.

5.5.15 **Recommendation 7.** Community based awareness raising programmes targeted to WFP supported areas<sup>104</sup> (perhaps in partnership with UNICEF) might be of help to sensitise parents to the benefits of school attendance.

5.5.16 **Conclusion 8.** WFP recently revised the Girls Take-Home Ration (GTHR) and increased food support to upper Grades. CSB, as an incentive, has a high nutritional value but may not be an attractive or effective compensation. Boys' Net Enrolment Rate (NER) is unacceptably low (at 37 percent of potential) and significantly below national targets.

5.5.17 **Recommendation 8.** WFP should closely monitor the effect of the revised GTHR and particularly on drop out rates in higher Grades (P5 to P7). The provision of maize meal as a staple and oil as a high value commodity might be a more attractive incentive. Incentive measures, to increase boys' NER, could also be considered.

5.5.18 **Conclusion 9.** WFP Support to Secondary Schools cannot necessarily be effective in increasing the educational performance and achievements of vulnerable population groups since the schools targeted tend to be located in urban areas, students tend to be from better-off families, school fees are high and schools are already overcrowded.

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<sup>103</sup> 37% in Karamoja where the UPE goal for 2003 is 98% NER.

<sup>104</sup> Through local authorities, school authorities, Parents Teachers Association, District Education Office, Local Council, formal and traditional village leaders.

5.5.19 **Recommendation 9.** Support to secondary schools should possibly be scaled down and resources concentrated on expansion of Primary School coverage in rural areas. There is, however, an exception when Primary and Secondary Schools are located on the same premises.

5.5.20 **Conclusion 10.** There is great demand for pre-primary schools which would reduce the number of under-aged children at primary schools, provide them with educational care and mental stimulation and could benefit them nutritionally.<sup>105</sup> In the last four years, pre-primary numbers have not increased, one of the main problems being the limited LC and PTA capacities and lack of guidance to establish those centres.

5.5.21 **Recommendation 10.** WFP should advocate creation of pre-primary centres in WFP supported and most vulnerable areas. In close collaboration with UNICEF, WFP should explore possibilities to support communities in the establishment of simple pre-primary centres, the training of carers and provision of basic educational material.

5.5.22 **Conclusion 11.** While overall figures and indicators of ‘quality of education’ are satisfactory (and look good in upper Grades), the lower Grades still struggle with insufficient resources (e.g. up to 120 pupils per classroom).

5.5.23 **Recommendation 11.** More support and resources are required to ensure adequate quality of teaching, especially in lower Grades.

5.5.24 **Conclusion 12.** School and food-related infrastructure is still not adequate. The SFP is highly relevant to bring children too school and to increase their absorption capacities, which is a pre-condition to achieve good education. However, quality of education is the second constraint requiring support to optimise educational outcomes. GoU resources for education have been increased, since the introduction of UPE and quality of education indicators have improved considerably. Nevertheless lack of teachers<sup>106</sup> (especially female), classrooms and scholastic materials<sup>107</sup> restrict the benefit of the SFP particular at the lower Grades and in most remote areas.

5.5.25 **Recommendation 12.** School infrastructure needs to be improved albeit to quality standards appropriate to the area.

5.5.26 **Conclusion 13.** The majority of FAL classes are located in urban/semi-urban areas where effectiveness is in fact lower than in rural areas where, nevertheless, there is a shortage of instructors.

5.5.27 **Recommendation 13.** Support to FAL classes should be expanded and, particularly so, in remote areas where more and better qualified instructors need to be

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<sup>105</sup> Since under fives are at higher risk to malnutrition and its consequences.

<sup>106</sup> Pupil/teacher ratio for primary schools should be 1:40 and but is 1:57 in target areas, It is much worse in lower Grades and cases of 1:120 were observed regularly by the ET in P1

<sup>107</sup> Student/textbook ratio should be 1:1, but was observed to be nearer to 1:3 in target areas.

mobilised along with teaching aids and text books. Provision of food rations for instructors could be an effective incentive to enable expansion in remote areas.

## **6. HIV/AIDS, ORPHANS AND VULNERABLE CHILDREN**

### **6.1 Background**

6.1.1 With limited funds to cover all development needs of the country, GoU has usually prioritised non-social sectors such as education, health and national security. The revised PEAP prioritises HIV/AIDS mainly through provision of anti-retroviral (ARV) drug therapy, with support from a number of donors.<sup>108</sup> HIV/AIDS is a highly politicised sub-sector closely linked with the image of the current government. The country has gained international recognition for its efforts in combating HIV/AIDS and for its early start at a time when many other African countries were still denying the problem. The prevalence of HIV has declined from 30 percent of the sexually active population<sup>109</sup> (SAP) in the early 1990s to a GoU estimated 6.1 percent in 2004<sup>110</sup>.

6.1.2 The Uganda AIDS Commission, under the President's Office, coordinates all HIV/AIDS efforts. The National Strategic Framework provides the umbrella for HIV/AIDS intervention in Uganda and the District Response Initiative (DRI) is responsible for its implementation at the district level. A National Policy for Orphans and Vulnerable Children is currently in draft form.

6.1.3 The National Health Policy (1999) does not give priority to food and nutrition but, rather, current GoU efforts focus on the provision of ARV<sup>111</sup>s and on treatment of opportunistic disease and are channelled through the Uganda AIDS Control Project of MoH. The Government launched an ARV programme in June 2004 and initially targeted a proportion of PLWHA who have developed full-blown AIDS. The cost of ARVs to patients in the open market has fallen significantly from USD 11,000/month between 1992-2000 to USD 30/month in 2004. Under a recently signed MoU with the Clinton Foundation, GoU will purchase the drugs at USD 9/month.

6.1.4 The medical aspects of HIV/AIDS appear to attract more attention from donors whose political interest is often the true driving force for resource mobilization. Strong international lobbying on ARVs may have led to this focus of donor funding, especially at a time when ARVs have advanced the perceived status of HIV/AIDS to almost that of a chronic disease in western countries. A health sector approach also has the advantage of working through existing government institutions with minimal technical assistance and, accordingly, relatively easy to manage and monitor. Most funds support medications supplied by pharmaceutical companies usually from the same donor country.

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<sup>108</sup> eg.: Global Fund, WHO 3X5 initiative and PEPFAR funds

<sup>109</sup> Fifteen to 45 years of age.

<sup>110</sup> Although a Ugandan NGO, utilising a dubious survey methodology based upon questionnaires to HIV/AIDS sufferers, has recently stated that around 18 percent of the SAP are infected. Although this cannot be verified, rates could be higher than official figures

<sup>111</sup> Anti-retroviral drugs



6.1.5 Amongst the larger donor funded HIV/AIDS initiatives, it is only the World Bank's MAP funds which have a clear social emphasis through its Community HIV/AIDS Initiative (CHAI). MoH has access to the Global Fund via the CCM<sup>112</sup> structures where 40 percent of funds are supposed to support NGOs which serve PLWHA<sup>113</sup>.

6.1.6 At the time of designing the CP, HIV/AIDS was not a WFP priority. Opportunity for a direct focus on HIV/AIDS was limited when CP ACT I<sup>114</sup> began as a pilot project in 1997 and the OVC<sup>115</sup> approach offered an opportunity to address the reality observed by the CO on ground. When OVC and HIV/AIDS intervention began under CP ACT I and PRRO, there was little corporate thinking on the subject and there was little reliable international guidance on OVCs. Nevertheless, in light of the long term implications of the sector, the CO considered HIV/AIDS to be a *de facto* humanitarian disaster similar to the conflict-related disasters in its traditional areas of operation in Uganda. As in all disasters, HIV/AIDS compounds pre-existing socio-economic vulnerability factors making the poorer even poorer.

6.1.7 Implementation of the HIV/AIDS and CP ACT I interventions commenced much faster than other recovery and development activities under the PRRO and CP and quickly surpassed their modest targets. CP ACT I budget was revised in 2002 to increase the planned number of beneficiaries from 3,000 to 10,000 and food commodities from 1,865 to 3,729 MT. The number of beneficiaries actually increased from 6,134 in 2001 to 13,375 in 2004 and Implementing Partners increased from 54 NGO/CBOs in 2001 to 83 in 2004.

6.1.8 CP ACT I is more focused on development activities with regard to urban based poverty and therefore operates in urban municipalities in the south where the stand alone project is based in the ten urban centres in which the IPs have branches. The social support interventions under the PRRO<sup>116</sup> interfaces closely with relief interventions and are therefore located in conflict and post-conflict districts in addition to urban municipalities. This is one of the few examples of a good linkage between WFP activities in the portfolio.

6.1.9 The CP ACT I target group are individual children mainly reached through institutions. The PRRO reaches vulnerable groups either through institutions or through community based mechanisms and targets, for example, EVI<sup>117</sup> category individuals under Relief. PRRO social support interventions target both individuals (orphans, vulnerable children, former abductees/child soldiers and TB patients) and households (e.g., PLWHA).

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<sup>112</sup> Country Coordination Mechanisms

<sup>113</sup> People living with HIV/Aids

<sup>114</sup> Vocational Training of Street Children and Orphans

<sup>115</sup> Orphans and vulnerable children

<sup>116</sup> Social support interventions target beneficiaries who include: former abductees and child soldiers, patients undergoing TB and sleeping sickness treatment regimes and those assisted through AIDS service organisations.

<sup>117</sup> Extremely vulnerable individuals

6.1.10 The PRRO has been subject to five budget revisions mainly to cope with the large increase in IDP numbers which have risen from 0.8 to 1.6. Million between 2001 and 2004. These budget revisions offered an opportunity for the PRRO to incorporate changes in line with changes in corporate policy such as SP<sup>118</sup>s, ECW and developments in the corporate thinking on HIV/Aids.

## 6.2 Relevance

6.2.1 It is well established that poverty is an underlying factor behind the spread of HIV/AIDS and to the increased number of vulnerable children. In communities where the major part of household income goes directly to covering basic needs, any ailment that restricts the key income earner's ability has serious repercussions for that household. Respondent personnel from MoH and IPs described food as 'the first medicine' for HIV/AIDS because, without it, a vicious cycle begins in which patients become weaker and are more prone to opportunistic infections. Another potentially productive person in the family has to become fully occupied with caring for the patient with little time for productive activity - the constant pressure of not being able to meet the food needs of the family adds to patient stress.

6.2.2 Free Voluntary Counselling Testing (VCT) has proven to be of little interest when there is nothing to benefit from knowing one's status. A case study by the NGO Reach Out records a 49% increase in VCT registrations at 170 people/month in June 2004 compared to an average 114 people/month between October and December 2003. NGOs which offer VCT and other services to PLWHA are faced with having to counsel food insecure patients to eat well when it is clear that the patient has no means of obtaining food and the NGO is not in a position to provide food support.

6.2.3 Implementing Partners under the WFP programme reported that availability of food aid for PLWHA had the effect of encouraging voluntary testing, contributed to reduced opportunistic infections and increase in adherence to drug regimes. The ability to receive and recover with ART<sup>119</sup> was reported as being very much dependent on the nutritional condition of the patient. For PLWHA, the issues of food, ARVs and schools fees were reported to be their biggest concerns and in that order.

6.2.4 WFP has, however, had difficulty convincing key donors that HIV/AIDS cannot be approached solely from a clinical angle and that, in the Ugandan context, PLWHA need food aid and other social support for comprehensive care and prevention. There is some conflict in perceptions between WFP and some donors/UN partners on WFP's role and the need for food interventions within the HIV/AIDS sub-sector. It is argued that there is no scientific evidence regarding the immediate benefit of food support to PLWHA or its being a prerequisite to ARV treatment. For these donors, WFP's role is perceived as a response to short-term emergencies whereas HIV/AIDS is considered to be a long term development issue requiring a completely different approach.

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<sup>118</sup> Strategic priorities

<sup>119</sup> Anti-retroviral therapy

6.2.5 With regard to institutional capacity, WFP's resources (financial and human) may be sufficient for relief operations but are too stretched to provide the attention required for the recovery and development interventions. While small in food tonnage, the demands of these interventions in terms of other resources are extremely high, particularly in preparation, implementation, follow-up and monitoring. It is not possible to meet the resource needs of recovery and development programmes such as HIV/AIDS and OVCs using WFP's traditional budgeting systems which are tied to tonnage. For example, at full implementation level, the stand alone HIV/AIDS project is planned to handle 2,500 MT which is what the relief operations handles in 10 days. When handling a large amount of food, economies of scale allow sufficient financial resources to cover operational costs. The flexibility of the CO management has made it possible to support recovery and development operational requirements and has enabled some degree of attention to detail.

6.2.6 Monitoring of development intervention requires a different approach from that for food basket monitoring and tends to be more demanding. Relief food basket monitoring can be relatively easily carried out by home visits and interviews from a relatively standard questionnaire. More effort is required to build up a rapport with the respondent before embarking on the discussion of HIV/AIDS. Monitoring of HIV/AIDS interventions is logistically more challenging where each NGO typically has at least 100 household members scattered over a large urban area.

6.2.7 For most interventions, the beneficiary catchment area is usually fairly narrow, for example where there are concentrations within camps or where prepared food is provided within an institution (school feeding or vocational training) or where households are from a relatively homogenous community (Food For Asset and Functional Adult Literacy). HIV/AIDS interventions are quite different in that, being urban based, the communities are less homogenous and the beneficiaries have often migrated into the location (living with relatives) to access medical and other AIDS services.

6.2.8 The skills required to monitor HIV/AIDS and OVC interventions are also quite different from those for relief. Specialized skills are required to effectively cross-check and monitor the two sub-sectors whose goal goes beyond the emergency one of saving life. This is made even more complex given the diversity of the two areas which the HIV/AIDS interventions support, namely **i**) social entry points (psychosocial care, home base care, community initiatives and OVCs) and **ii**) clinical entry points (such as ARV treatment for opportunistic infections, TB treatment, PMTCT<sup>120</sup>). This stretches the capacity of the CO too far and especially at the sub-office level. The CO has taken some initiatives towards overcoming this limitation through, for example, an internal HIV/AIDS programme retreat conducted in April 2004 to share knowledge and experiences. Here, experts were invited to present papers on specific issues such as TB and PMTCT.

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<sup>120</sup> Prevention of Mother to Child Transmission.

6.2.9 Consultations and review of Sub-offices and IP monitoring reports revealed that there is a clear need for guidance on what and how to monitor in order to report on more than just logistical information. An HIV/AIDS policy guideline is probably pre-mature at this stage but a guidance note would help to operationalise ideas put forward in the Social Support Guidelines regarding issues such as the gradual phase-out of individuals through the gradual reduction of rations. Such a guideline would need to be developed through interim consultations in order to incorporate experiences gained over the last two to three years of operations.

6.2.10 The health sector, in particular, is so highly specialized that the presence of some health expertise within WFP would seem to be a pre-requisite to developing effective monitoring indicators. To some extent, the CO has tried to deal with this shortcoming by collaborating with WHO in order to provide health-related technical knowledge. WHO has produced guidelines on different issues and has established criteria for the different HIV/AIDS stages as well as formulating laboratory tests on which to base clinical diagnosis. In order to apply them, however, WFP staff still needs more medical oriented skills.

6.2.11 Social interventions have the advantage of being less technically challenging. However, WFP interventions in the social sector require some refinement with clear guidelines on beneficiary entry points, better understanding of the gender dimension of AIDS responses and a minimum list of what partners should bring into any partnership with WFP.

### 6.3 Efficiency (Inputs for Activities to produce Outputs)

6.3.1 The attention of the Emergency Food Security Assessment (EFSA) is on food security from a food gap perspective and normally covers a large population for relief interventions. For the HIV/AIDS interventions, people are targeted by virtue of being HIV positive registered and according to the food security circumstances of their individual households. No simple assessment tools are available concerning who is food insecure among the PLWHAs and this judgment is left to the IP. The majority of NGOs have 80 to 100% of their HIV/AIDS registered clients receiving food aid.

6.3.2 For the OVC interventions, seven districts were selected on the basis of a needs assessment carried out at the beginning of the programme by WFP and MGLSD<sup>121</sup>. While MGLSD reported all seven as being equally needy, the number of districts that the programme has been able to support has been limited by resource availability.

6.3.3 WFP support to these vulnerable groups through institutions is probably the safest way to meet the objective of attracting them to quality services which comprehensively meet their needs. However, effective monitoring of IP service quality is difficult for WFP, given the technical nature of the services provided, the diverse technical spread of WFP supported interventions (social and clinical) and the limited resources available for recovery and development activities. WFP has some level of control in the selection of

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<sup>121</sup> Ministry of Gender, Labour and Social Development.

the IPs themselves and here the added value of the institution is considered. Most of them are located in urban residential areas with high proportions of low-income households.

6.3.4 IPs reported that bureaucracy is low within WFP but the speed in decision making processes are somewhat slow for recovery activities, probably an indication of management focus on relief. They also commented on implementation challenges caused by WFP's approach that requires NGOs to spend money before making a claim. This challenges partners who have a low resource base and their funds from other donors are usually tied up elsewhere.

#### 6.4 Effectiveness (Outputs to Purpose)

6.4.1 The objective of the PRRO social support activities is to enhance social support to extremely vulnerable and disadvantaged groups. It aims to provide:

- essential dietary support to individuals in care centres with no alternative sources of food;
- dietary support and incentive to complete medical treatment and to enable clinical observation (TB, Sleeping sickness, Opportunistic infection and ARV treatment for PLWHA); and,
- to access complementary services offered by IPs to PLWHA.

6.4.2 The long term objective of the stand alone project "Food Support to Families Affected by HIV/AIDS" is to contribute to Uganda's national goal of reducing HIV/AIDS infection rates. It aims at dealing with pre-disposing factors such as sexually transmitted diseases, food insecurity, vulnerability and poverty. Its immediate object is to contribute to improvement of the quality and length of life of client families which are assisted by the NGO TASO<sup>122</sup>. This is to be achieved by facilitating education, training and income generation activities to strengthen coping mechanisms. This one year project began in June 2004, with implementation beginning in August 2004, a few weeks before the Evaluation mission. Family rations will be provided to 18,650 PLWHA out of the more than 200,000 members in 12 planned locations. Five locations have already begun to receive food and the rest are in the late stages of preparation.

6.4.3 For CP ACT I, the MGLSD provides the policy guidance for NGOs/CBOs involved in activities aimed at building the capacity of children through education and vocational training. These activities are linked to the national HIV/AIDS strategy to provide vocational skills to children and help them to re-integrate into communities. As confirmed by independent review (2001), the interventions do reach the intended beneficiaries and increase the possibility for their attainment of livelihood skills. WFP reports that 2,866 street children and orphans have been attracted off the street, rehabilitated and resettled back in their communities. WFP's role is to provide nutritional support and budgetary savings to the institution or parents/children through a substitution of a part of the fees by food. At the district level, activities are implemented under of the

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<sup>122</sup> The AIDS Support Organization

Probation and Welfare Office of the Department of Youth and Children who are responsible for guidance and supervision of quality. Its role is to ensure that the children acquire marketable vocational skills.

6.4.5 WFP is clearly an operations oriented agency and, as such, one of the few such UN agencies in Uganda. In Relief, WFP works directly with communities to plan and implement as well as possible within available resource and security limitations. Although the ideal situation would be to work through partners, the latter are simply not available and WFP has to implement it largely on its own. This works in emergency situations when quick action is required and in a situation where the goals are relatively short-term. For interventions that are not short-term in nature like HIV/AIDS and OVCs, however, WFP rightfully only works through government and civil structures and to do otherwise would defeat the purpose of trying to establish structures which can manage such long term challenges and lose the opportunity for a catalytic effect.

6.4.6 For these interventions, and based on broad consultations at the start of programme, WFP took an approach of providing food support through organizations which offer complementary services to the target vulnerable groups. In the urban municipalities, several CBOs operate in areas of interest to WFP's concerning the social support components of the portfolio but they are usually very small and have low capacity. The significant difference in their capacity (which affects their level of performance) was noted by the independent review of ACT I in 2001. To deal with this, WFP developed an approach of working through a lead agency system and only working directly with IPs having more than 1,000 registered clients. In situations where partners are limited, such as in the north eastern, northern and west Nile regions, WFP has rightfully not involved itself in direct implementation of social sector interventions but simply limited its activities to the few partners available.

6.4.7 While all the programme categories under the Recovery and Development portfolio have some type of HIV/AIDS related intervention, these have been maintained as separate components and there has been no HIV/AIDS cross-cutting approach. Integration within other activities has not taken place even where possibilities for complementarity are clear. Such a possibility would be to link HIV/AIDS NGO/CBOs with schools and parents so they may benefit from initiatives developed by the former regarding HIV/AIDS information and communication.

6.4.8 Geographical targeting for Recovery and Development intervention is directed at locations with either explicit risks (such as being post-conflict, conflict and drought prone) or those with implicit risks related to a high poverty index. The focus for recovery interventions, such as those for HIV/AIDS, has been more in peri-urban areas facing poverty related challenges and this is because of the difficulty of implementation in post-conflict and conflict locations. Few HIV/AIDS activities are ongoing in Karamoja where prevalence rates are reportedly very low and this is attributed to the strict traditional culture there. However, many of the street children beneficiaries of the OVC interventions are of Karamajong origin.

6.4.9 Individual targeting for HIV/AIDS and OVC interventions are largely through proxy avenues where inclusion error is expected to be small. The organizations selected by WFP for the channelling of food are usually either located in income poor neighbourhoods or they target the vulnerable groups upon which WFP is focused. Most of the IP activities are self-targeting because PLWHA and children in the Ugandan context are unlikely to:

- join AIDS CBOs and child care centres; or
- attend vocational training course unless they have no other options.

6.4.10 The majority of PLWHA who can afford to pay for ARVs and treatment of opportunist infections would prefer to do so via private clinics rather than queue up in public hospitals. Stigma appears to be stronger among higher income individuals who have the possibility to access treatment through private means. Vocational training is mainly attractive to individuals with low income because they are short courses which provide a quick route to earning a basic living. In a few cases, vocational training centres with high quality facilities do attract some richer individuals.

6.4.11 Under the PRRO's Relief distribution, there has been identification of a category of extremely vulnerable groups which receive full rations to prevent them falling into total destitution. The CO has realised that there is an overlap between Relief and Recovery operations in the northern districts whereby some PLWHA obtained food from both the HIV/AIDS interventions and the general distribution. This issue is gradually being addressed by ensuring that people registered with an HIV/AIDS service organization either return their relief ration cards or obtain written confirmation from their camp leaders that they are not registered for the general ration.

6.4.11 However, a programme change, which reduced the cereal ration for HIV/AIDS interventions from 400g to 200g/person/day, now makes the EVI ration more attractive for PLWHA. This contradicts the intervention logic of encouraging PLWHA to access the comprehensive services available through the HIV/AIDS service organisations. The Social Support Guidelines of June 2003 introduced these changes in order to standardize the ration size for all social support intervention according to the rationale of avoiding a situation in which the same category of beneficiaries receive different rations (but having no justification for the difference). Since then, and in order to avoid undermining the objective of the HIV/AIDS interventions, it has been agreed that there is a justification for providing full rations to PLWHA within IDP camp circumstances where people have few income opportunities.

6.4.12 WFP Programme unit is also exploring the possibility of enabling PLWHA access to the EVI ration under the general relief programme. The advantage would be to allow easier food access for PLWHA through the Relief system, especially for those in the more insecure camps, in order to reduce the necessity of travelling through insecure areas with a high value commodity. Unlike regular EVI households, access to the EVI ration for PLWHA will be dependent on their proof of involvement with the HIV/AIDS services of WVI and TASO in the northern districts.

## 6.5 Coverage

6.5.1 WFP's core function in Uganda is that of Relief, where at least 90% of resources handled are targeted to 1.6 million IDPs and about 150,000 Sudanese refugees, and these constitute the bulk of the two vulnerable groups. In the northern regions, where the IDPs are located, the situation has changed constantly with a resultant and constant change of plans. Consequently, Development and Recovery interventions are subject to second priority management attention behind Relief. Insecurity further restricts WFP and IPs' ability to reach people living in the majority of the 188 registered IDP camps in Northern Uganda and this is particularly so with regard to Recovery interventions under the PRRO where IPs are of paramount importance. Most partners are not prepared to travel under armed escort because of their 'neutrality' policy.

6.5.2 Between 2002 and 2003, WFP provided food assistance to 7,443 infected and affected HIV/AIDS households in different parts of the country in collaboration with community based AIDS service organizations. This is minute compared to the massive scale of the problem in which the estimate of PLWHAs in 2003 was 2.1 million people or 8.3% of the total population<sup>123</sup>.

6.5.3 CP ACT I reaches 13,375 street and vulnerable children (aged 5-18 years<sup>124</sup>) with individual rations totalling some 100 MT/month. Given that there are over 2 million orphans in Uganda, the magnitude of vulnerable children in the country is enormous.

6.5.4 Coverage is spread even more thinly when one considers the wide range of HIV/AIDS and CP ACT I interventions designed to give support through the social and clinical entry points. These all require specialized skills and need very different criteria for entry and phase-out points. The risk of developing dependency in each field is high because true exit is difficult, given GoU's limited resources and high levels of community poverty. Such thin spreading means that WFP's potential to build local capacity in so many sectors is restricted.

## 6.6 Connectedness

6.6.1 .The conceptual difference in HIV/AIDS approaches between WFP and some key donors and other UN agencies limits the coherence of their policies - WFP interventions are generally social in nature while some key donors only recognise the needs from a medical perspective. The management of PEPFAR<sup>125</sup> funds, for example, is only interested in direct impact (an opportunity which a medical entry point offers) and there is a fear that sharing funds with food aid would dilute the impact. Unlike social approaches, medical approaches can be directed at one individual and for a limited period of time which is easily determined on clinical grounds. Food aid, on the other hand, needs to be targeted at the whole HIV affected family and the exit point is not so easily

<sup>123</sup> Estimated at 25,426,200 in 2003.

<sup>124</sup> Sometimes they are over 18 – classified as youth up to 25

<sup>125</sup> PEPFAR: (US) Presidents Emergency Plan For AIDS Relief, USD15 Billion with a particular interest in the promotion of abstinence.



determined. It is also argued that the same donors already fund food aid through other funding sources.

6.6.2 WFP has had difficulty accessing HIV/AIDS funds (e.g. PEPFAR and the Global Fund), partly because of this conceptual issue. The first proposal, for USD 22 million to the Global Fund through MoH and GDLSD, towards a Nutritional Support to People Infected and Affected by HIV/AIDS (2004-2007) was not funded because of a combination of both technical and conceptual factors.

6.6.3 At district level, operational funds for the different sectors depend upon its position within district and central government priorities. As at the central level, local government budget prioritises non-social sectors such as health, infrastructure development and education resulting in limited operational funds for the Probation and Welfare Office. This is compounded by a general view that the social sector is already supported through direct donor funding to NGOs such that HIV/AIDS linked food security and other social sectors remain under-funded. For HIV/AIDS, the key focus of most districts is on prevention (especially to youth and high risk groups) and mitigation, while ARVs have been recently added following extensive advocacy for their provision by PLWHA.<sup>126</sup>

6.6.4 Sustainability. WFP's Recovery and Development interventions suffer the inherent contradiction of tackling long term development problems through short term programmes which rely on a quick impact such that sustainability expectations have to be modest. This particularly relates to the subject of an exit strategy. Options for hand-over of WFP's support to the HIV/AIDS and OVCs sub-sectors are few and, in the short term and due to GoU' limited resources and the levels of poverty within targeted communities, Government would not be a position to take over responsibility.

6.6.5 WFP's intervention through NGOs/CBOs enables the strengthening of local institutions' preparedness to take over when WFP pulls out. Many NGOs/CBOs are dependent on donor funding some of which, albeit few, is local but WFP's intervention over a diverse number of fields restricts its potential to build specific local capacity and a focused approach would be more appropriate for sustainability. Despite the considerable time invested in the establishment of baseline information and systems of food requirement monitoring for Relief, but in which Recovery components have not been adequately introduced, there still remains much work to be done. Spreading HIV/AIDS interventions into so many fields makes this process even more complex.

6.6.6 Support to OVC oriented institutions has been on-going for a longer period (with a pilot project since 1997) during which WFP has encouraged exploration of income generation possibilities and has occasionally provided training courses (e.g. on organic farming). Many of the OVC institutions would need to provide food to their clients anyway, so WFP support may be considered to be budgetary in nature.<sup>127</sup> Savings made

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<sup>126</sup> Virtually every district has a PLWHA association.

<sup>127</sup> See Annex II for a sample budget of a WFP partner NGO.

enable them to invest in improved services (e.g. facilities, other foods etc) or to increase beneficiary numbers. WFP support thus offers potential for individual institutions to become more self-reliant or to improve their service provision.

6.6.7 At the individual level, again phasing out is clearer for the OVC interventions because the children either stay long enough to acquire skills which help them make a basic income (although start up funds required are sometimes limiting) or they are reunited with their families. For the HIV/AIDS interventions, phase-out is more complex in the face of poverty and is more so when parents die. At the same time, without a concerted effort to phase out individual households, there is a risk of creating dependency and of limiting entry for new PLWHA when they are most in need of food support. With treatment (ARVs or for opportunistic infections) and nutritional supplementation, PLWHA have become more productive and their families' quality of life improved or at least maintained.

6.6.8 The Social Support Guidelines of 2003 suggested that support be provided at a reduced (50%) ration for part of the second year<sup>128</sup> but this has not been implemented by IPs. The challenge is what criteria to use for phase-out and whether these should be based on a medical, nutritional or livelihood criteria all for which different time frames would be applicable. The criteria will also differ for the different fields under the various social and clinical entry points supported by WFP. An agreement on the acceptable relapse rate would also need to be reached for each field and the actions to take.

6.6.9 As mentioned above, the government is not in a position to provide food as social welfare. However, more could be done through MoA to assist with making available quick maturing seeds, low management livestock and extension advice, tools and food management information (for house consumption, sale, etc). To take up this role, however, MoA needs capacity building assistance to deal systematically with food security, especially that related to vulnerable groups like PLWHA. WFP has started discussions with MoA on possibilities for greater complementarity in their areas of work and, hopefully, this discussion will include suggestions on possibilities for food production options that are manageable for vulnerable households with limited energy and high dependency ratios.

6.6.10 Coordination. The National AIDS Framework outlines the strategies and structures for coordination at the national and district level. Between 1986 and 1995, MoH was solely responsible for HIV/AIDS care and treatment. Since 1996 the STDs and AIDS Control Programme under MoH became the Technical arm on HIV/AIDS within the government. The STDs and AIDS Control Programme of the MoH is the body that implements and coordinates GoU and several donor funds available on HIV/AIDS. At the same time, a multi-sectoral approach was adopted where other line ministries were encouraged to establish focal points for STDs & AIDS which, to date, has been implemented by 19 line ministries.

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<sup>128</sup> the rationale being that to make it clear that beneficiaries need to develop their own livelihood options

6.6.11 WFP's counterpart for HIV/AIDS, MGLSD, has too low a capacity to ensure that social factors are taken into consideration within other more technical sectors, particularly health. WFP tries to make up for this by directly participating in specific technical steering committees and, for example, one on PMTCT was launched in 2002 and in which WFP managed to bring attention to nutrition. WFP has also established a link with MoH's STDs and AIDS Control Programme's care and support unit (which also handles ARVs) to explore possibilities for complementarity between food and medical services provided to PLWHA. WFP also participates in the monthly Health and Nutrition Emergency Coordination meetings chaired by MoH (with UNICEF as Secretariat) which tries to harmonise issues on health and nutrition. Matters considered to be beyond the specialised sector within these coordination structures are raised at the inter-agency technical or policy committees. A monthly Partnership Committee is held by the Uganda AIDS Commission which brings together issues of common interest arising from the technical committees and other self-coordinating entities.

6.6.12 HIV/AIDS offers opportunity for joint UN activity with different entry points for the different UN organisations to complement each other as promoted under the CCA/UNDAF. UN partners consider the WFP CO to have been instrumental in highlighting the importance of food security and nutrition to development as a whole and to HIV/AIDS in particular. WFP is reported to have been influential in the inclusion of nutrition in the national HIV/AIDS policy. UN partners describe the WFP management as forward looking, supportive, and understanding of the HIV/AIDS issues and food security in general, beyond their mandate and specialisation. UNAIDS now has 10 co-sponsors among whom UNHCR is the most recent addition in 2004. WFP joined UNAIDS in 2003 and the WFP Uganda management chairs the UN country team's AIDS theme Group.

6.6.13 Coordination for relief is through the Office of the Prime Ministers (Disaster Management and Refugees) at central level and through District and Sub-county disaster Management Committee composed of all heads of departments at district and sub-county levels respectively. The circumstances in the north are such that inputs from several players are required to meet a degree of needs and the situation is very much reliant on the limited civil society there. The local government structures simply do not have the level of resources required but they do coordinate local activities through district steering committees which meet quarterly. WFP and local government officials organise quarterly joint monitoring exercises that bring in all players into the activity.

6.6.14 Complementarity. At policy level, the on-going debate on the necessity to link HIV/AIDS directly to good nutrition through food aid, limits the potential for complementarity between food and ARV provision<sup>129</sup>. The reservation, based upon fear of resources being taken up in feeding the PLWHA instead of providing ARVs and other drugs and the fact that Food aid is already well funded through other funding lines of the same donors, has lead donors to consider that WFP be unjustifiably encroaching upon an area outside its mandate. WFP has ensured that it has seat on the table, but has little

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<sup>129</sup> . It is also simplistically assumed that PLWHA can access the health sector through hospitalisation when in the 'emergency' stage of sickness

influence with the big donors on the subject of HIV/AIDS because, *inter alia*, it simply does not have the level of technical competence required to develop and manage the complex M&E systems required to effectively monitor the ARV treatment regime.

6.6.15 However, both at the policy and operational level, reservations as to WFP's social and food security sector role are less harsh. Before or between the incidence of opportunistic disease, victims are better reached at the community level through community home-based care (where the social sector has significant role to play) but the task of reaching vulnerable PLWHA at community level is a difficult challenge experienced by all development agencies. Identification of patients, while relatively easy on clinical grounds is not so easy with respect to vulnerability, which is a social question better addressed by MGLSD and partners such as WFP and MoA who deal with food security.

6.6.16 There is potential for complementarity with other UNAIDS co-sponsors. WHO has set a goal (the '3-by-5 roll-out plan') of reaching 3 million PLWHA with ARVs by 2005 within which Uganda can access ARVs for 60,000 PLWHA by 2005. Discussions are underway regarding complementarity with WFP interventions through provision of home based care to PLWHA enrolled under the 3x5 initiative.

6.6.17 The World Bank's CHAI<sup>130</sup> funds offer potential for complementarity in the social sector. These community support funds of the World Bank's MAP<sup>131</sup> are provided to communities to use on HIV/AIDS related activities. Communities receiving the funds so far had tended to utilize them for:

- providing food to the sick;
- keeping children in school or meeting their school needs; and
- where MoA resources are available for seed or high milk yielding goat purchase.

6.6.18 In the Bank's experience, the biggest challenge to PLWHA is information on how to improve their livelihoods in terms of both food supply and its preparation in a way which does not require too much time and energy.<sup>132</sup> The Evaluation mission was not aware of any efforts to synchronize WFP interventions with the CHAI funding but, if carried out, it would probably be best at district level via the decentralized government structures through which the Bank channels its funds.<sup>133</sup>

6.6.19 Northern Uganda has one of the highest HIV/AIDS prevalence rates in the country and, with the level of insecurity, WFP is the only major international agency reaching the majority of camps (through military escort). Mainstreaming of HIV/AIDS into Relief is particularly important because of the high risk of sexual abuse in such situations but this is difficult because of the complex logistical arrangements required and the limited

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<sup>130</sup> CHAI: Community HIV/AIDS Initiative

<sup>131</sup> MAP: Multi-sectoral AIDS Programme

<sup>132</sup> MoH's recently released document on food preparation has not yet been widely disseminated.

<sup>133</sup> See Annex I for the established decentralized mechanism

number of partners prepared to work in such areas. Community based services are particularly difficult to administer here.

6.6.20 Partnerships. All WFP Recovery and Development activities under the portfolio are highly reliant on either IPs or government counterparts to offer complementary services for comprehensive interventions. MGLSD, whose main agenda is social protection, is WFP's key counterpart. Government restructuring in the late 1980s merged three line ministries (Gender, Labour in Employment and Community Development) into what is today the MGLSD.

6.6.21 For OVC interventions, MGLSD's role in technical and overall guidance is clear but their counterpart contributions toward HIV/AIDS are less clearly established and its capacity to fully meet its counterpart obligations have been limited with respect to WFP's OVC interventions. Accordingly, to expect it to meet its counterpart responsibilities for HIV/AIDS seems somewhat unrealistic.

6.6.22 WFP works directly with IPs and is supported by MoH staff on an informal basis whenever possible. The CO has recognized the need to review and clarify partner roles and responsibilities with their government counterparts at central and district level and with lead NGOs.

6.6.23 In the conflict, insecure and post conflict locations, especially in Karamoja and Acholiland, it is difficult to find partners when the number of NGOs is limited and some district departments are not represented at all. WFP is forced to take on an implementation role in the Relief components of the PRRO but could not possibly do so for the Recovery activities. In other parts of the country, implementation of the HIV/AIDS and OVC activities is mainly through NGO/CBOs selected on the basis of the type and quality of service they provide to PLWHA. Food is only one of the services provided to the vulnerable groups and usually not the key one.

6.6.24 The quality of training, facilities and services provided to PLWHAs under the OVC intervention vary considerably between IPs and their few staff are often overwhelmed by everyday regular operations management as well as by their low capacity to raise funds for other needs such as accommodation and school fees. Weak IP capacity in monitoring and reporting is also common and some have difficulty in proposal writing. Most respondent IPs are unclear as to both the requirements of effective monitoring and its cost, which is prohibitive for them. As a result, their reports tend to focus on logistical not programming information and their good work is not properly appreciated. The CO is aware of the need to programme additional resources for IP capacity building.

6.6.25 WFP's lead agency approach has tried to deal with the smaller IPs' weak capacity by asking larger more experienced NGOs<sup>134</sup> to oversee their work, boost their capacity and, where possible, support them with complementary resources.

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<sup>134</sup> AVSI (Kampala and Hoima), Feed the Children (Kampala and Mukoni), International Care and Relief (Jinja, Mbale and Busia), World Vision (Mpigi, Wakiso, Gulu,) and TASO (12 urban branches nationwide)

6.6.26 A number of IPs do not perceive their association with WFP as a partnership arrangement, the consequence being that they do not recognise the full costs of their obligations nor their need to find sources of extra own-funds to meet them. The result is that WFP expects the IPs to fund complementary activities while IPs expect the contrary. Many WFP interventions are accordingly under-funded.

6.6.27 During initial consultations leading to MoU agreements, WFP needs to factor in the need to make funding proposals to donors in conjunction with IPs. This will have the effect of:

- taking advantage of the good offices of WFP;
- helping to clarify, to the donors, the serious holistic approach to the intervention;
- convincing the latter to support interventions with some confidence of their success.

6.6.28 An operational approach taken by WFP Uganda has been to reimburse funds utilized by IPs after intervention completion and reporting and this has the advantage of ensuring that IPs do account to WFP. This would not seem to be a problem for IPs for whom WFP food represents a budgetary support for expenditure which they would have incurred anyway but sometimes their other donors have restrictions on how funds, so released, can be utilized and this continues to restrict their implementation capacity.

6.6.29 Pipeline breaks are rare and, when occurring, have been due to late request from the lead IP and this is particularly so in the northern region. From the start of interventions in 2000 up to July 2003, WFP was not reimbursing the LTSH costs to lead agencies on the assumption that the sub-contracted NGOs could collect their food directly from WFP warehouses. This was frequently a misconception due to these NGOs' low capacity and lead agencies were forced to deliver the goods for them. In order to reduce transport costs, the lead agencies would wait until all commodities had arrived in the WFP warehouse and thus late arrival of one commodity would delay the complete food delivery and, in turn, lead to late food request for the following months. For this reason, no deliveries were made to WVI in January, February and October 2003.<sup>135</sup>

6.6.30 It has been easier for WFP to provide transport support with its strategic fleet to NGOs in Kampala than in the north and, even though reimbursement has been de-linked from tonnage, LTSH still does not always cover lead agencies' basic overhead costs for delivery and distribution and no funds are made available for proper monitoring. WVI, for example, has 16 centres and WFP payments do not cover all transport/fuel related costs and no monitoring costs.

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## 6.7 Conclusions and recommendations

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<sup>135</sup> Annual figures would miss this kind of detail.

**6.7.1 Conclusion 1.** There is a dearth of IPs capable of achieving WFP's wide<sup>136</sup> HIV/AIDS and OVC objectives and WFP lacks the resources to adequately monitor these specialisations.

**6.7.2 Recommendation 1.** WFP needs to concentrate its HIV/AIDS interventions on one or two fields on the basis of which areas its staff could most gainfully be trained. At the same time, however, there is a need to consider how to incorporate activities which include males and adolescent girls under HIV/AIDS activities. As suggested in a previous evaluation, the possibility of staff exchange or loan arrangements could be explored with other UN agencies in order to bring in specialised skills.

**6.7.3 Conclusion 2.** There is a wide demand from IPs and SOs for guidance on incorporating experience and knowledge acquired over the last 2-3 years of HIV/AIDS interventions.

**6.7.4 Recommendation 2.** WFP needs to develop guidance notes on the role of food assistance to facilitate implementation of HIV/AIDS activities at SO and IP level.

**6.7.5 Conclusion 3.** The focus of both donors and GoU with regard to HIV/AIDS is medical and ignores the linkage between plane of nutrition, medical condition and response to ARV treatment for PLWAs.

**6.7.6 Recommendation 3.** While WFP currently ensures such correlation in its own interventions, it needs to direct advocacy on the subject towards donors and GoU and to strengthen its recognition at corporate level. WFP urgently needs to commission a study to collate information on the relationship between nutrition and the medical condition of PLWHA from different income backgrounds and the role of food assistance. Such a study would undoubtedly prove a correlation between good nutrition, medical condition and response to ARV treatment in income poor communities already acknowledged by those working directly with *HIV/AIDS* interventions in developing countries. It could also help to establish some understanding of the condition of PLWHA in developing countries to whom both food security and clinical assistance are essential entry points to HIV/AIDS interventions. This question may be answered at the corporate level based on experiences from a number of developing countries. Ideally, such a study should be awarded to a University of international repute through UNAIDS which has the appropriate authority and neutrality to convince international opinion. The aim would be to provide country offices with globally applicable evidence-based advocacy tools drawn on lessons from a number of countries that have been measured through indicators which qualify and quantify the linkage.

**6.7.7 Conclusion 4.** A demonstrative approach, entrenched in existing government structures appears to be the most useful way for a positive long-term impact.

**6.7.8 Recommendation 4.** WFP needs to invest in building the capacity of its government counterpart (MGLSD) and/or involve itself more directly with established

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<sup>136</sup> Clinical (PMTCT, ARV, TB treatment, and Opportunistic infections), Social Support, Home-based Care

government structures. WFP could cooperate with the mechanisms already established for channelling funds to communities and more direct cooperation with WHO, the World Bank and other technical partners could also be explored.

## **7. GENDER**

### **7.1 Background**

7.1.1 WFP Gender Policy Guidelines (2003 - 2007) came after the PRRO and CP had been designed but hardly any changes were required to their design because most of the issues highlighted had already been taken into consideration. Nevertheless, the Enhanced Commitments to Women (ECW) provided some insight and details on how to implement and better meet gender targets and, based on these, some operational changes were introduced such as the registration of all woman-headed polygamous households and men were asked to choose to be registered under either one of the households or a separate one of his own. The only commitment from the guidelines not engaged by the CO is the one regarding strengthening the emphasis on adolescent girls.

7.1.2 The gender related development index for Uganda is 0.428 which places the country in the global position of 128<sup>th</sup> out of 146. Gender has been institutionalized in the decentralization process whereby GoU recommends that at least 30% of local council positions and 4 out of 9 local council member seats are reserved for women. Gender disparity in Uganda appears to be due to unequal access and unequal distribution of income.

7.1.3 According to WFP Uganda, the fundamental limitations to overcome when bridging the gap between men and women is low literacy level and a cultural bias against women.<sup>137</sup> To this end, WFP supports women's development through girls' education and Functional Adult Literacy classes for women (FAL) in Karamoja. It also ensures that women are included in all its other interventions.

7.1.4 A cross-cutting approach has been taken to ensure that women have direct access to activities and that they benefit from assets created. Women's position in leadership roles is emphasized in all interventions but their leadership and decision-making capacity still needs development. On the suggestion of WFP CO, one of the Budget Revisions for the PRRO included USD 40,000 for a Gender Baseline Survey on the rationale that this was needed to determine achievements to date. This is planned to take place in October 2004 and should help to set gender targets.

### **7.2 Gender Issues in Specific Interventions**

7.2.1 Relief. The key gender question facing WFP is how to enhance women's control over food. Under the Relief components, this has been achieved through ensuring that more than 85 percent of the direct recipients are women with the right to delegate

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<sup>137</sup> Especially in Karamoja.



collection of their food rations and that over 40 percent of leadership positions in food management committees in refugee and IDP camps are taken up by women.

7.2.2 Education. Education and adult literacy programmes are targeted at communities in areas which have low development indices and high levels of gender disparity. The Male/Female teacher ratio in schools is relatively even at 46:44. The gross enrolment ratio at primary level is 90, which does not indicate a large overall gender disparity in primary school enrolment but drop-out rates at higher primary levels (P6 &7) are considerably higher for girls, being 26% for females and 15% for males in 2001. WFP reports indicate that about 24% of girls, compared to 14% of boys, do not regularly attend school because of labour demands at home.

7.2.3 No take home rations are given in the Northern and West Nile districts because gender gaps are do not qualify according to the gender guidelines. Schools in Karamoja do qualify and take home rations are reported to have encouraged regular attendance of 19,458 girls provided with take-home rations under CP ACT II. The girls' take-home ration in the three Karamoja districts has been increased since September 2004. GoU has plans for an expansion of their UPE<sup>138</sup> efforts where WFP support to school feeding is expected to feature strongly<sup>139</sup>. Priority locations for support will be based on poverty indicators in which gender disparity will be one of the factors.

7.2.4 The objective of Functional Adult Literacy (FAL) classes is to mainly target women but, since attendance is voluntary and open to all, men actually make up almost half of the participants (44% of participant being men and 46% women). WFP reports that, as of June 2004, the FAL classes had reached 2,436 Karimojong parents.

7.2.5 Affirmative action by WFP targets school age children and adults. Adolescent girl school drop-outs or those past the age for primary admission are left out of the current interventions because they are not yet old enough for the 'adult' category or group dynamics of the FAL classes and cultural factors inhibit their ability to fit in comfortably with the age group (especially when men are present). If interested in the FAL classes, they are forced to wait until they feel comfortable as adult women. An area which could be explored is the possibility of Food for Training in subjects of their particular interest.

7.2.6 Social Support. Many social support interventions are self-targeting and vulnerability determines the gender of the target group. For the MCH, Supplementary- and Therapeutic feeding programmes, beneficiaries will tend to be women. For interventions targeting orphans, street- and vulnerable children, the majority of beneficiaries are boys.

7.2.7 WFP has little influence on beneficiary gender in many of its social support interventions because they are often self-targeting (to qualify, they must be PLWHA, orphans, street children, formerly abducted children etc). The entry point of WFP interventions is usually through IPs which offer certain services but whose understanding

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<sup>138</sup> Universal Primary Education

<sup>139</sup> Refer to section on school feeding for more details on the UPE expansion.

of gender issues varies significantly. Those with little understanding sign the MoU with little awareness of the implications and then realise their limitations in knowledge and human resource capacity to enforce gender aspects.

7.2.8 Between the ages of 15 and 26 and especially in the northern regions, the prevalence of HIV/AIDS in women is estimated to be five times that of men. Uganda has (or has had) the macro-economic and political conditions which encourage or compel many men and women to leave their homes and families in search for work or safety. Insecurity and poverty can disrupt social support networks. HIV/AIDS has caused disproportionate hardship on women who are also the main labour force in rural areas where 85% of the national population resides. The burden of caring for the sick usually rests on women and so girls are at greater risk of being withdrawn from school.

7.2.9 While this would indicate that a larger proportion of WFP's interventions should be directed at reaching women, little can be achieved in controlling the epidemic without the inclusion of both sexes. It is worrying that over 90% of clients accessing HIV/AIDS services are women. Responses to the epidemic need to be built upon an understanding of gender-related expectations which should explain why women access AIDS services while men do not and also explain what can be done to encourage greater male participation.

7.2.10 According to UNAIDS documentation, a number cultural factors could underlie poor male involvement. Risk and vulnerability of men is heightened by cultural norms that make it hard for men to acknowledge gaps in their sexual knowledge, that link socialising with alcohol use and where predominant male employment entails mobility and family disruption.<sup>140</sup> Men may be encouraged to demonstrate their masculinity through multiple sexual 'conquests' and fear of ostracism could prevent many men from seeking VCT or care. They may choose to blame their ill-health on something else and may have the means to do so as family resources are more likely to be used (and depleted) for medications (including traditional doctors) and care for men rather than female members of a household. For men, learning to care for children is often limited by cultural and social considerations and widowers may feel forced to remarry to keep their families together. On the hand, women in some cultures are more responsible for the well-being of their children and, having fewer options to hide their problem, may be more ready to seek available services.

7.2.11 FFA. Implementation based on guidelines developed for the programme and, of the three possible approaches proposed, the decentralized system has been mobilised quickest. Since assessment, technical, advisory and quality control mechanisms are institutionally built into the government decentralized system, management of the FFA interventions is based on the existing GoU's gender considerations.

7.2.12 At community level, each project has a committee of 9 to 10 members (at least four of whom are women) and an executive body of four (half of whom are women). Participation is encouraged for men and women on a 50/50 basis. Actual numbers vary

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<sup>140</sup>Ref: UNAIDS – Gender and HIV/AIDS, technical update 09/1998

depending on the type of activity but women always make up at least 30% of the members but on average 50% of the food for asset participants are women. Examples of activities undertaken under the FFA are infrastructure construction (small-scale dams, roads, building etc), tree planting and fish pond construction. Some activities are not ideal for the full participation of women but this is difficult to avoid when activities need to originate from the community.

7.2.13 Originally, gender interest in the FFA concentrated on ensuring women’s participation in distribution and leadership but this was improved upon during development of the guidelines to focus on who owned the assets created and in ensuring that women were involved in activity design. Emphasis focussed on ensuring that the finished product was also of benefit to women irrespective of whether they worked on the project or not.

### 7.3 Conclusions and recommendations

7.3.1 **Conclusion 1.** Adolescent girls who are not in school are left out of the current WFP interventions.

7.3.2 **Recommendation 1.** There is a need to explore ways for their greater inclusion. Possibilities are to begin separate classes on subjects of particular interest to them, to make FAL teachers aware of the shortcoming or provide an incentive that encourages them to attend and makes it clear that they are welcome.

7.3.3 **Conclusion 2.** It is of concern that a large majority of clients accessing HIV/AIDS services are women and very few men are involved, while control of the epidemic requires the involvement of both sexes.

7.3.4 **Recommendation 2.** Response to the epidemic needs to be built upon an understanding of gender-related expectations to explain and suggest ways to encourage greater male participation.

## 8. LOGISTICS

### 8.1 Background

8.1.1 Uganda is an important logistics hub for the Great Lakes region. WFP logistics operations involve receipt from Mombassa, storage, cross border dispatches for WFP programmes in Eastern DRC, Rwanda, Burundi and Southern Sudan along with Uganda CO Programmes under PRRO 10121, CP 10019 and CP 10139. Total regional throughput figures for the region are presented in Table 6. while Uganda CO throughput is in Table 7 below:.

**Table 6.** WFP, Uganda Logistics: Total Throughput

Year	2002	2003	2004 Jan-Jun
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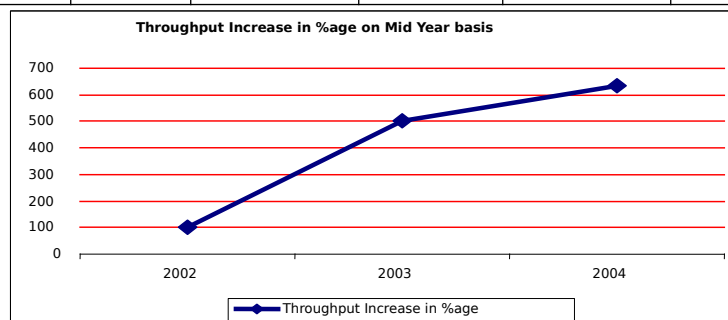
<b>Receipts (MT)</b>	128,397	217,240	107,864
<b>Despatches (MT)</b>	141,930	214,252	107,739

8.1.2 Mombassa port is the predominant corridor entry point with Malaba as the major transit point into Uganda. From Mombassa food is moved to Uganda by both rail and road. Uganda Logistics unit maintains Central Distribution Points (CDPs) at Tororo and Kampala. Total CDP storage capacity is 30,000 MT and Extended Distribution Points (EDPs) are spread over Uganda with a combined storage capacity of 18470 MT. WFP also dispatches food to warehouses maintained by IPs/NGOs.

8.1.3 The CO has contracted Primary road transporters to move food commodities from CDPs to EDPs. Transport contracts are not specific to PRRO or CP and all or any of these transporters are used for dispatching food commodities to EDPs. Food accountability is maintained through Commodity Tracking Software COMPAS v.2. that, along with WINGS is utilised for Programme management.

**Table 7. Uganda CO throughput figures from 2002 to Jan-Jun 2004**

<b>Programme</b>	<b>2002</b>		<b>2003</b>		<b>Jan- Jun 2004</b>	
<b>Portfolio</b>	<b>Receipt</b>	<b>Distribution</b>	<b>Receipt</b>	<b>Distribution</b>	<b>Receipt</b>	<b>Distribution</b>
<b>PRRO 10121*</b>	20683	22537	125605	116610	86086	71439
<b>CP 10019 Act 1</b>	1728	657	442	996	252	643
<b>CP 10019 Act 2</b>	8033	5887	4982	5467	946	2818
<b>CP 10019 Act 3</b>			3335	19		209
<b>CP 10139</b>			101		1147	20
<b>Total</b>	<b>30444</b>	<b>29081</b>	<b>134465</b>	<b>123092</b>	<b>88431</b>	<b>75129</b>



\* Consolidated PRRO 10121 figure. Individual programme figures are not available

8.1.4 It is necessary to keep efficiencies and inefficiencies of such a large scale of operation in perspective. Another major challenge of the evaluation has been to review smaller CO Programme components with whole CO Programme logistics capacity in the background.

## 8.2 Observations

8.2.1 The logistics operation was evaluated keeping in mind the specific regions, their logistical challenges and programmes for their specific needs.

8.2.2 The absence of a Supply Chain evaluation resulted in exclusion of the main performance influencing factor – Commodity Availability. Programme planned figures were considered for level of preparedness of Logistics Capacity and Total Receipts vs dispatches as performance indicators.

#### Planning Phase

8.2.3 The essential process of Logistics Capacity Assessment was undertaken by the CO in 2002 and 2004. Use of LCA in designing unit operation could not be ascertained due to paucity of time.

8.2.4 Introduction of RBM methodology was observed to have brought in an element of time phased actions, goals for expected results by time period.

8.2.5 The absence of specific operational plans for Relief and Recovery programmes seems to have been influenced by small throughput levels and joint operations in Northern Uganda due to security concerns.

8.2.6 Cross-functional coordination during the programme planning process lacks purpose and effectiveness. This could be attributed to the Programming unit requesting inputs from the Logistics unit in the final stages of programme planning or a lack of inertia in the Logistic unit during the planning process.

8.2.7 During discussions with NGOs/CBOs, the question of insufficient LTSH funds was raised as this resulted in poor performance at the field level. WFP is not conducting prior assessment of stake holders' capacity for suggesting the scope of the LTSH component in new programmes. No capacity building of IPs through sustained training was planned.

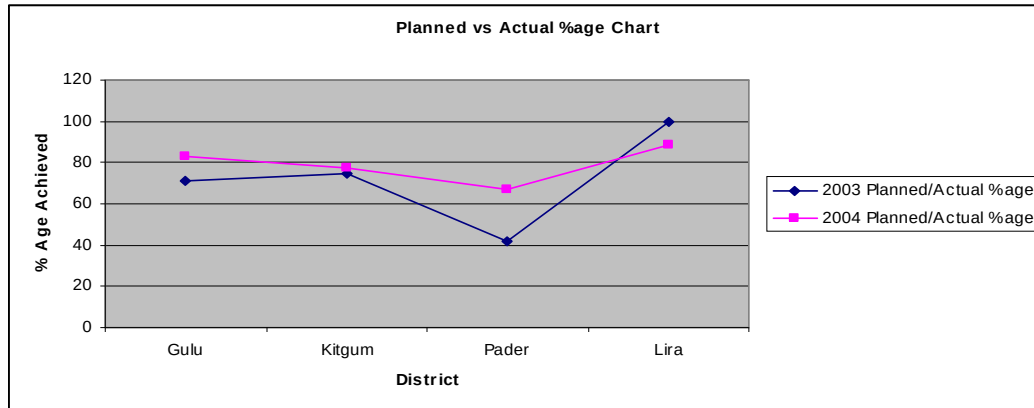
#### Northern Uganda

8.2.8 The Northern districts of Gulu, Kitgum, Pader and Lira districts constitute the largest area of WFP operation under PRRO 10121. EDPs at Gulu, Kitgum and Lira provide adequate storage capacity of approximately 7,000MT. Secondary transport is handled by a private transporter whose capacity is supplemented by the WFP strategic fleet in Gulu and Kitgum. Programmes in municipal areas are served by SF trucks in Gulu and Kitgum.

8.2.9 Logistics efficiency in this region was measured by the number of distribution cycles achieved in a calendar year due to the complete dependence of food movement to FDPs under Military escort. This resulted in bunching together of relief and recovery deliveries.

8.2.10 It was observed that time and security concerns restricted food deliveries to 1 or 2 neighbouring camps in a day while more distant camps took two days for distribution completion. Food deliveries for municipal area programmes were on time.

#### **Figure 3. Planned vs. Actual Distribution Cycle - Northern Uganda**



8.2.11 Underachievement of School feeding targets was a direct result of losing school term days due to Security constraints.

8.2.12 Splitting of the Kitgum/Pader joint logistics operation into independent operations from July, 2004 has resulted in shortening monthly cycle time to 35 days in Pader and 25 days in Kitgum.

8.2.13 WFP is using Single Secondary Transport Company in Gulu, Kitgum, Pader and Lira districts. The decision was based on:

- A single company coming forward during the Transport Contract tendering process;
- a weak, unreliable and unsustainable local capacity;
- the need to build dedicated Transport Company for Logistics operation under Phase III security conditions in North.

This arrangement was observed to have achieved acceptable response levels.

Karamoja, Teso region, West Nile and South West

8.2.14 WFP has deployed its Strategic Fleet for secondary distribution in these regions and maintains a combined storage capacity of approximately 11,495 MT.

8.2.15 The limited capacity of the Strategic Fleet and absence of local transport companies to augment this capacity was observed to be causing food delivery delays. Availability of trucks for longer periods will be helpful in bringing greater efficiency.

### CP 10019 ACTs 1 & 2, PRRO Recovery, Refugees.

3. 8.2.16 The main purpose of the visit was to determine whether LTSH component is sufficient for NGOs and CBOs to handle and distribute food according to programme requirements. The following observations were made:

- There is a lack of IP transparency and food accountability in Refugee operations at Nakivale, Oruchinga and Kyaka II;
- There is a lack of IP field operational capacity;
- CBOs are being inadequately reimbursed by NGOs for food transport and handling expenses.

8.2.17 **Logistics under CP 10019.0 Act 3.** The administration of WFP food logistics procedures faces the following challenges:

- Receipt of commodity in accordance with procurement quality control norms;
- Ensuring receipt of contracted quantity and issue of transport documents;
- Time and Cost incurred in administering these procedures.

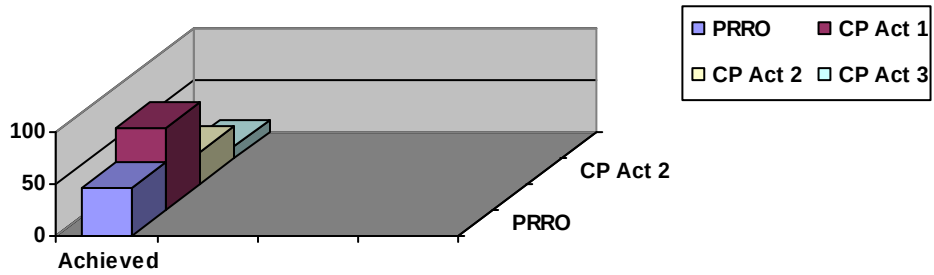
8.2.18 Logistics cost inefficiency was observed due to small contract quantities, recurrent commodity infestation and poor interaction between the Procurement and Logistics units.

8.2.19 The construction of good food storage structures through FFA in West Nile and Iganga is a positive basic infrastructural initiative to minimise the occurrence of infestation.

### 8.3 Result of Logistics Operations

**Table 8. - Planned v Actual Distribution  
CP and PRRO Recovery & Development Components  
(2002 to Jan-Sept. 2004)**

Prog.	2002		2003		2004.3qtrs		Total Planned	TOTAL Actual	%age achieved
	Planned	Actual	Planned	Actual	Planned	Actual			
PRRO	26649	5727	14033	8556	19116	13048	59798	27331	45.71
CP ACT 1	1243	655	1370	996	864	1090	3477	2741	78.83
CP ACT 2	7594	5887	4392	5466	30828	2071	42814	13424	31.35
CP ACT 3			2310	19	3465	659	5775	678	11.74
CP 10139					7734	59	7734	59	0.76
	35486	12269	22105	15037	62007	16927	119598	44233	36.98

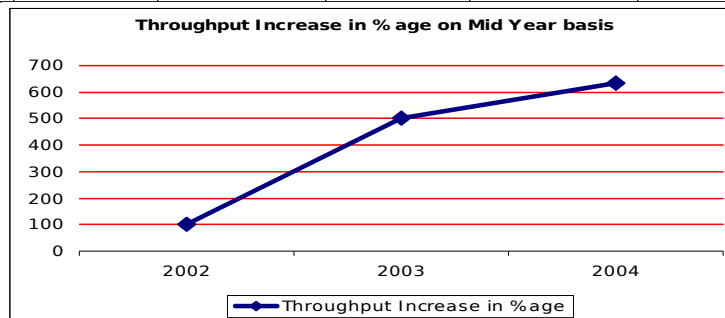


**8.3.1 Throughput Analysis.** Throughput analysis was considered to be a better measure of logistics performance than Programme Planned v Actual Distribution figures as the latter involves an element of programme capacity to generate demand and resources to absorb planned figures.

8.3.2 Receipt figures for the PRRO recovery component were not available for complete throughput analysis and so Total Receipts and Distributions under the PRRO programme were employed.

**Table 9. Uganda CO Throughput Figures (2002 to Jan-Jun 2004)**

Programme	2002		2003		Jan- Jun 2004	
	Receipt	Distribtn	Receipt	Distribtn	Receipt	Distribtn
<b>PRRO 10121</b>	20683	22537	125605	116610	86086	71439
<b>CP10019 ACT 1</b>	1728	657	442	996	252	643
<b>CP 10019 ACT 2</b>	8033	5887	4982	5467	946	2818
<b>CP 10019 ACT 3</b>			3335	19		209
<b>CP 10139</b>			101		1147	20
<b>Total</b>	30444	29081	134465	123092	88431	75129



Throughput analysis indicates that the Logistics plan complements the Programme plan.



## 8.4 Internal Effectiveness

8.4.1 Commodity **losses**. The planned limits were 1% of throughput tonnage.

- Warehouse losses in 2002 were 876 kg, 41.368MT in 2003 and 70MT by mid 2004.
- Post delivery transit losses were 23.236MT in 2002 and 133.389MT in 2003.

These are minimal losses.

8.4.2 **Logistics Capacity to bring flexibility**. WFP has an EDP level storage capacity of 19520MT and a CDP capacity of 30,000MT. These are adequate to meet throughput needs.

- For Primary Transport, 13 local transporters are contracted with a combined truck capacity of approximately 416 vehicles (Uganda LCA 2004).
- Secondary transport in the North has a capacity of 900 MT.
- When necessary, capacity is augmented by 320 MT by using the WFP strategic fleet.
- Warehouses are managed by WFP storekeepers.
- 9 SOs have CTS nodes.
- Weak WFP and IP distribution planning and monitoring capacity at field level is resulting in distribution breaks.

8.4.3 **COMPAS utilisation for Programme Management through activity**. COMPAS v.2 software was introduced in 2004 and is judged to have been premature, without field trials in the complex Uganda programme, resulting in the following shortcomings:

- Lessons learnt and solutions developed with COMPAS v.1 were not incorporated in COMPAS v2. Major components, such as the Invoicing Tool and automated report generation for SPR are still being stabilised.
- A trial of COMPAS v2 should have been carried out in parallel with COMPAS v1 to avoid work loss during software customisation according to individual country needs.
- The level of Technical skills of field CTS staff and the quality of the data transmission environment was not taken into consideration during development of the tool. Bigger operations like Uganda generate bigger Data files for replication. HF based data transmission has inherent limitations. In certain FOs, staff are spending 1-3 hours daily to achieve successful replication.
- There is a lack of information flow between HQ and CO regarding solutions.
- There is a lack of training of CO staff in the use of solutions provided by HQs.

## Asset Utilization

**8.4.4 Strategic fleet Utilization.** WFP has made effective use of the Strategic Fleet in Karamoja, Teso, the South West and West Nile areas. Utilisation of the Strategic Fleet increased from 1,501,901 MT/km. in 2003 to 1,483,000 MT/km in the first six months of 2004. WFP CO plans to increase the Strategic Fleet will enhance operations reliability.

**8.4.5 EDP construction at strategic points for efficient operations.** The Logistics unit has constructed EDPs in Karamoja, Gulu, Kitgum, the South West and West Nile with a combined capacity of 19,790 MT. This is an adequate capacity in relation to location and programme size.

## **8.5 Internal Efficiency**

**8.5.1 Cost Efficiency: LTSH.** LTSH expenditures analysis (carried out by the CO) of funds from the start of the PRRO in April 2002 to date, shows that the difference between total funds called forward (received under planned rates) and the funds actually spent alternates around the 5%, with the CO planning to reduce the figure to nil.

8.5.2 The budget and individual LTSH lines in the budget, such as the transport for each destination/leg, handling costs, rentals, labour costs, staff salaries etc., are according to the rules and regulations calculated in the LTSH Matrix, are according to the contracted rates and reflect the actual costs incurred by WFP. The Matrix is revised on a regular basis (every 6 months and with greater frequency, if circumstances demand), so that they correlate with the real costs incurred at all times.

8.5.2 The Impact on LTSH due to local procurement is such that local purchase is saving approximately USD 60/MT.

8.5.3 There is an impact on LTSH due to the changing rail/road transport ratio from Kenya (between Mombassa and Uganda). Initial planning for LTSH was done on the basis of a 70/30 split of cargo between rail and road respectively. Due to a decrease in the number of available rail wagons and locomotives, the ration has changed to 30/70 so introducing a cost escalation of approximately USD 25/MT.

Recent changes in Kenyan Road regulations which only allow a maximum truck load of 28 MT as opposed to 43 MT is anticipated to increase the Kenya/Uganda road cost by approximately 20%.

8.5.3 The Planned v Actual LTSH matrix indicated that the CO has met its financial performance expectations.

## **8.6 Conclusions and Recommendations**

**8.6.1 Conclusion 1.** There has been weak cross-functional coordination during the programme planning process. Logistics inputs were planned at the end of the programme planning process whereas the two processes should be concurrent.

**8.6.2 Recommendation 1.** The Development programme's Logistics planning timelines need to be different from those of Emergency Operation planning. For CP 10019 Act III, the Procurement and Logistics units need to develop a joint strategy to maintain individual unit policy guidelines in order to achieve programme goals. A contact person, preferably with programming background, should be nominated in the Procurement unit to streamline and secure a constant flow of information between it and the Logistics unit.

**8.6.3 Conclusion 2.** The CO has developed a measurement approach for monitoring the performance of the Strategic Fleet, primary and secondary transporters but has no system of monitoring the operational performance of IP/NGOs. It is agreed that the IP is responsible for overall operations but monitoring of the utilisation of LTSH funds by IPs for agreed logistics activities<sup>141</sup> needs to be monitored by the WFP Logistics unit.

**8.6.4 Recommendation 2.** There is need for development of an operational performance measurement tool for IP/NGOs as well as a need for periodic WFP evaluation of LTSH fund utilisation.

**8.6.5 Conclusion 3.** There is a lack of operations planning and monitoring capacities at SO level. Feedback to CO at critical times does not reflect forecasting and diagnostic capacity at SO level. There is a lack of clarity with regard to the monitoring duties and responsibilities of the Head of Sub-office as they relate to the CTS and warehouses.

**8.6.6 Recommendation 3.** There is a need for development of Standard Field Operation modules and Logistics Operations Planning process training for SO/FO level staff. Strengthening of field staff abilities to pre-empt operational problems will help the Logistics unit to achieve less distribution breaks at EDP/FDP level.

**8.6.7 Conclusion 4.** There is low field operational capacity amongst IP/NGOs resulting in loss of transparency and food accountability.<sup>142</sup>

**8.6.8 Recommendation 4.** Prior assessment of IP/NGO' logistics capacities is necessary to complement the programme and there is a need to identify the LTSH component. IP/NGOs' capacity is in need of improvement with regard to warehouse maintenance, on-the-job training, record keeping and periodic reporting for transparency and food accountability.

**8.6.9 Conclusion 5.** There is room for improved reliability and flexibility of the Development and Recovery logistics operations.

**8.6.10 Recommendation 5.** WFP could change to exclusive use of the Strategic fleet to cut the costs of the Agricultural Marketing Support programme (CP ACT III). WFP could strengthen the Acholiland operation by using more than one transporter there.

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<sup>141</sup> eg. Trickle-down of resources from NGOs to CBOs

<sup>142</sup> eg.URCS in Refugee operation at Nakivale, Oruchinga and Kyaka II.

## **9. OVERALL MISSION CONCLUSION**

- 9.1 WFP has launched itself admirably with great vigour and innovation on a portfolio of interventions for which it did not appreciate the enormity of its ongoing responsibilities nor the nature of supporting activities necessary to make it work. This is no reason to abort – on the contrary, it can bring the interventions to great success and has to because of obligations already entered into. Measurement of this success is currently hardly possible in terms of efficiency and impact due to a lack of reconcilable data (both planning and output) and objectively verifiable impact indicators and this needs to be addressed in order to maintain direction. The Team has every confidence in the CO's ability to lead WFP into this new phase and direction of its work given the support of its Executive Board and the funding of its donors.

## **Annexes**

**Draft**  
**Terms of reference**  
**Development and Recovery Portfolio Evaluation for Uganda CO**

**Background**

Uganda has achieved steady improvements during the last decade in the economic, Political and social spheres. Notwithstanding, Uganda ranks as number 146 out of 177 countries in the 2004 United Nations Development Programme (UNDP) Human Development Report (2002 figures). Although annual growth rates have exceeded 5 percent over the past decade, contributing to a reduction in poverty levels from 56 to 41 percent between 1992/1993 to 1998/1999, there are significant disparities in income distribution, with 41 percent of the population still living on less than US\$1 a day. Life expectancy is only 42.6 years. Annual real per capita gross domestic product (GDP) is 283 United States dollars. The FAO Aggregate Household Food Security Index for Uganda is 76.4, but this national rate hides great regional disparities.

Furthermore, Uganda suffers from recurrent drought, flooding and civil unrest in the north and west of the country, which causes varying numbers of internally displaced people, and it is home to 150,000 Sudanese refugees. Since 1964 WFP has assisted the Government of Uganda in responding to the different needs launching a mix of emergency, protracted relief and recovery and development operations latest the Country programme (1999-2005), PRRO 10121 (2002-2005) and Development Project 10139 (2002-2004).

According to OEDE policy all first generation CPs have to be evaluated to provide accountability to the EB and to ensure that WFP learns from experience and can improve the quality of its development activities. In consultancy with the Country Office (CO) it was decided to also evaluate the development project 10139 and the recovery activities of PRRO 10121 as they together contribute to WFP's strategic priorities 2, 3, and 4 related to development and recovery as expressed in WFP's management plan approved by the EB in e October 2003. As the CO is currently preparing a new CP and a PRRO the findings from the evaluation will inform the design of the new documents.

**Objectives of the evaluation**

- To assess the relevance, efficiency, effectiveness, sustainability and connectedness of the portfolio of development and recovery activities in the CO in Uganda, and provide accountability to the Executive Board.
- To learn from the current portfolio in order to improve the design of the new PRRO and Country Programme under preparation

## Scope

This evaluation will assess to what extent the development and recovery activities have achieved their objectives and contributed to national development and recovery efforts and to WFP's strategic priorities. As these were only approved by the EB in October 2003, the current activities were not designed to specifically contribute to these, and will therefore not be evaluated against them. But as the new CP and PRRO in the future will be assessed based on their contribution to the SPs, the mission team will look at the potential of the current activities to do so, and recommend adjustments that would enhance this link in the future programmes. The activities to be evaluated are:

HIV/AIDS (PRRO 10121.0, CP)

Food for Assets (PRRO 10121.0)

Local Procurement (PRRO 10121.0 and CP)

School Feeding (PRRO 10121.0, CP activity I, II, III and Development Project 10139)

Food Security (PRRO and CP)

The evaluation will focus on assessing the results and the effectiveness with which they have been achieved by the operation, and will only look at process or management related issues if they are identified as obstacles to achieving the desired results.

## Key questions and sub-questions:

The evaluation mission will examine though not necessarily limiting themselves to following key issues:

1. Is WFP's development and recovery portfolio relevant to the reduction of poverty and food insecurity in Uganda?
  - Is the portfolio relevant to national priorities as expressed in the national Poverty Eradication Action Plan? And how does it complement other international and national efforts directed at this through initiatives such as the UNDAF, PRSP, etc.?
  - Is the portfolio contributing to development and recovery in Uganda across WFP's programme categories without overlapping, and is there evidence that the recovery objectives contribute to building the bridge between relief and development?
  - To what extent does the portfolio contribute to WFP's strategic priorities 2, 3, 4, and 5, and WFP's policies on development and recovery?
  - What is the comparative advantage of food aid in the areas where WFP operate?
2. What are the main recovery and development results (output and outcome level) achieved by the operation?
  - Has the operation achieved its intended outcomes and outputs? (a result matrix will be developed to clarify activity specific outcomes and outputs) If not, what are the main obstacles, and what can be done to reduce them?
  - How effectively has the portfolio been implemented in terms of quality, quantity and timeliness? (e.g. are the right beneficiaries being reached at the right time? Are the food rations adequate? Are the targeted groups benefiting from the assets created?)
3. Do the assessments on which the activities are based seem valid and in sync with what is considered to be the situation by other stakeholders? How have food insecurity,

vulnerability and beneficiary figures been assessed at country level, community level and household level? How effectively is vulnerability assessment linked to programming?

4. Does the targeting seem reasonable? How successfully has the project targeted poor, vulnerable and food insecure households in food insecure areas? How effectively is the project ensuring female participation in sub-project selection and in programming?
5. Have there been other unintended results or spin off effects, negative or positive, such as effects on agricultural production, prices and markets or labour market dynamics?
6. What monitoring systems are in place for assuring programme quality? (M&E plan, capacity building of IPs, involvement of stakeholders, etc.) and how are they linked to programming?
7. How effective are partnerships with other national and international actors on the ground?
8. Does the operation seem to be achieving an optimum relationship between cost and results?
9. What are the prospects for self reliance and continued utilization of community assets and services after WFP assisted operations have been completed?
  - What is the likelihood that an improvement in any of the indicators (increased enrolment rates, reduced gender disparity in primary schools, etc?) Will be sustained if food rations are phased out?
  - Is a viable exit strategy in place for all activities?

### **Evaluation approach and method**

A team of independent consultants will be identified to carry out the field mission. They will be guided by the present TORs and the Evaluation Manager assigned by OEDE. The evaluation has four phases:

- I CO preparation, design of TORs, identification of mission team
- II Documentation review
- III Field visit and report writing
- IV Stakeholder consultation

The documents to be reviewed are national policy documents, WFP policy and operational documents (e.g. UNDAF, project documents, earlier evaluations, self assessments carried out by the CO, monitoring data, etc.). The TOR have been drawn up by OEDE in consultation with the CO and the mission team leader. The initial hypothesis formed after the document review will be triangulated and expanded through interviews with WFP staff at HQ, CO and Sub-office levels, key informants (Government, other UN agencies, donors, NGOs, etc.) at capital, district and local levels, and focus groups and household interviews with beneficiaries. As resources do not permit to carry out interviews with a representative sample of the beneficiaries, a convenience sample of a limited number will be drawn based on types of activities and areas that can be reached by the mission team in the relatively short time available.

Before the mission leaves Uganda, it will produce a written Aid Memoire containing the initial findings and recommendations. This will be presented to the CO and Regional Bureau before



departure. This should ensure that the findings can feed into the ongoing formulation of a new PRRO and CP. The initial findings will also be presented in HQ. The team leader will write a report based on inputs from other team members. The report will be circulated for comments and a final draft will be ready approximately 1.12. A recommendation matrix will be drafted to ensure management response to the findings.

### **Timing and outputs**

Documentation review 1.9 –5.9

Travel 6.9

Field mission 7.9- 27.9. Aide Memoire.

Report writing 28.9-12.10. Report max. 60 pages + summary of max. 5000 words

Circulation 18.10-1.12

Submission to PEBC 15.12

### **Team composition**

#### **Team leader:**

- Evaluation skills incl. proven skills in construction of logic models and indicators
- Theoretical and proven practical skills with evaluation methods such PRA, RRA, focus group interviews, etc.
- Proven skills in facilitation and team leading
- Theoretical and Practical experience with food security issues and food aid in relief and recovery operations (such as food for work and food for assets)
- Prior experience with the UN in the field and ideally with WFP
- Practical experience with relief and recovery in both post-conflict and drought related emergencies
- Uganda experience

#### **Team members:** (2-3 international/national) should have following skills combined:

- Prior work experience in Uganda and understanding of national priorities, specially with regards to food security
- Theoretical and programmatic background and work experience with, school feeding and vocational training, income generating projects, IDPs and refugees, HIV/AIDS, nutritional interventions and local procurement
- Theoretical background and work experience with livelihood approaches
- Understanding of food security and food aid issues in relief and recovery situations
- Proven practical experience with Participatory Rural Appraisal (PRA) and/or other participatory assessment methods
- Prior experience with WFP

## Annex B. List of People met

1	A. Mugume	TASO, Uganda
2	Adi Castor	DED Representative, Arua
3	Aggrey Kibenge	SFP Focal Person, Desk Officer, MoES
4	Agnes Nabananga	Matron, Mama Jane Childrens Home, Jinja
5	Agnes Nabawanga	NGO Administrator
6	Aidah	Nurse, UDEL
7	Alex Attine	Community Development Facilitator, World Vision, Gulu
8	Ali Walimbwa	Hospital Administrator
9	Alice Kisolo	Coordinator/Mother, Siita West, Mother's Love Home, Jinja
10	Amos Mwesigye	National Programme Officer, WFP CO
11	Andrew O. Kadepa	World Vision, Gulu
12	Andrew Okello	Field Monitor, WFP Arua
13	Annette Biryetega	Acting Coordinator
14	David Apollo Kazungu	Assistant Commissioner Refugees, OPM
15	Arthur Holdbrook	Regional Director, ODK
16	Basilio Okello	Senior Programme Manager, World Vision
17	Beatrice Nabuzale	Field Monitor, WFP
18	Benjamin Byarugaba	Project Manager, Uganda Youth Devpt Link (UYDEL)
19	Benon Kwikiriza Salongo	Director, Nile Vocational Institute
20	Bienvenu Djossa	Senior Regional Programme Advisor, Head of Programme Unit, Eastern and Central Africa Regional Bureau (ODK)
21	Bilem Yemsu	Nurse/Counsellor, AHAP, Arua
22	Bosco Mukiibi	Child Restoration Outreach, Jinja
23	Brenda Kaijuka	Programme Officer – Nutrition, WFP
24	Bro. Agathon Wassiwa	Director, St Mugagga, Jinja
25	C. Bamuhigire	Assistant Administrator, St. Moses Child Center, Jinja
26	Caled Bwengye	Logistics Clerk, WFP Gulu
27	Carewell Awibo	Teacher, Tuku Primary School, Arua
28	Carlos Twesigomwe	Act. Permanent Secretary, Commissioner Disaster Management and Refugees, OPM
29	Catherine	Head of Field Office Kotido WFP
30	Catherine Semakula	Ministry of Agriculture and Animal Industry and Fisheries
31	Charles Odor	Counselor, TASO, Gulu
32	Charles Opoya	Headmaster, Masese Co-education, Jinja
33	Christopher Wakiraza	Executive Director, Kids in Need (KIN)
34	David Mugawe	ICR Uganda
35	Dawin Dawa	District Information and Communication Officer
36	Dominic Aciaye	Client/Member, TASO, Gulu
37	Dominick Tibyampansha	Health Coordinator, UNHCR

38	Dominique Leclercq	Procurement Officer, WFP
39	Dorothy Kanyomozi	Programme Assistant (Agric & Marketing), WFP
40	Dr E. Odor	AHAP Coordinator
41	Dr Joyce Kadusu	Medical Coordinator, TASO, Gulu
42	Edward M. Kallon	Deputy Country Director, WFP
43	E. M. Lugero	Act. CBSO
44	Edward Butele	Deputy Head Teacher, Tuku Primary School, Arua
45	Edward Galabuzi	Deputy Chief Admin. Officer, Jinja
46	Edward Mabweijano	Reports Officer, WFP
47	Elias Ambayo	Field Monitor, WFP Arua
48	Elizabeth Madraa	Co-ordinator, STD & AIDS Control Project, Ministry of Health (MoH)
49	Elvis Odeke	Programme Assistant (Agric & Marketing), WFP
50	Elvis Odeke	Program Assistant, WFP
51	Eric Adrundu	Teacher, Tuku Primary School, Arua
52	Ernest Mutanga	VAM Officer, WFP
53	Ester Aceng, Dr.	Nutrition, WHO
54	Evelin	Programme Assistant, WFP Arua
55	Florence Opoka	Counseling Coordinator, TASO, Gulu
56	Francis Kyagaba	Coordinator Vocational Training, Kamwkyo Christian Caring Community
57	Francis Obote	Field Monitor, WFP Gulu
58	Fred Olaa	Programme Assistant, WFP Gulu
59	Geoffrey Wasajja	Child (Age 16), KIN
60	Geoffrey Kyeyune	Executive Director, RYDA
61	Geoffrey Muzusa	Community Development Officer, Jinja Municipality Council
62	Gerald Duda	GTZ, Regional Technical Advisor, Conflict Management, Disaster Preparedness and Emergency Programs
63	Grace Katusiime	PSDO, Ministry of Gender, Labor and Social Development (MGLSD)
64	Grace Okello	Prog. Officer, World Vision, Gulu
65	Harnet Kobusingye	Social Worker, UDEL
66	Helen Bafaru	HIV/AIDS Clinic Clerk, MSF, AHAP, Arua
67	Henry Ringakech	Deputy RDC, Arua
68	Irene Amonjin	Field Manager, Ikafe Camp
69	Jakob Mikklesen	Programme Coordinator, Northern Uganda, WFP
70	James Lomoro	Principle Inspector of Schools, Education Standards, Gulu
71	Jan Kolaas	Project Manager - Food Distribution, Norwegian Refugee Council
72	Jane Anyakuru	Snr Nursing Officer + VCT Officer-in-Charge, AHAP, Arua
73	Janthi Price	Field Coordinator, MSH, Arua
74	Jimmy Ameko	Administrator, NACWOLA, Arua
75	John Adonga	Finance and Liasion Officer, MoES
76	John J. Oloya	Rural Development Specialist, World Bank

77	John Magnay	Chief Executive, Uganda Grain Traders, LTD, Nakawa Complex
78	Joseph Ssewanyana	Programme Officer, AVSI
79	Joviah Musinguzi	Field Monitor (HIV/AIDS), WFP
80	Joyce Draru	Head of Compliance Team, Nurse Consellor, AHAP
81	Juliet Nalugya	Teacher, UDEL
82	Julius Isabiye	Siita West, Jinja
83	Julius Tiboa	Gulu Support the Children Orgzn (GUSCO), Gulu
84	Kapel Romano	Head of ABEK, DEO, Kotido
85	Kaye	Nurse, UDEL
86	Ken Noah Davies	Country Director, WFP Uganda
87	Keneth Arubaku	Sub-County Chief, Arua
88	Keneth Nichols	Field Security Officer
89	Kimera Mutebi Boogare	Administrator, TASO, Gulu
90	Kumela Gragne	Logistics Officer, WFP
91	Lacinta Magew	Food Distribution Officer, NACWOLA
92	Leah Achen	Field Monitor, Kotido
93	Leo Richard	Project Managment Unit, Kotido
94	Lucia	ACF, Programme Officer, Nutrition
95	Luciano Valla	Programme Manager, AVSI
96	Luguma Tameli	DDHS Officer, District Health Visitor, Public Health Nurse, Gulu
97	Lydia Kinobe	Health Service Provider, UDEL
98	Mabel Tibiita	Assist. Matron, Mama Jane Childrens Home, Jinja
99	Margaret Katate	Community Devpt Officer, Kamwkyo Christian Caring Community
100	Margarete Caroline Kedi	GTZ Food and Nutrition Security Programme, Aura, Nutrition Advisor
101	Margrethe Juncker	Programme Coordinator, Reach Out, Mbuya
102	Martha Were	Food Distribution Officer, NACWOLA
103	Martin Maling	Head of Sub-Office, WFP Arua
104	Martin H. M. Mugoya	Pre-Primary and Primary Education Department, MoES
105	Martin Owor	Officer of the Prime Minister (OPM)
106	Michael Bongomin	Field Monitor, WFP Gulu
107	Michael Orundi	World Vision, Gulu
108	Molly Olema	Nurse/Counsellor, AHAP, Arua
109	Moses Nagaya	Town Hall Caretaker /Comm Devpt Off, Jinja
110	Moses Ojota	Program Assistant, WFP Arua
111	Moses Oryema	SFP Focal Person, Field Monitor, WFP, Gulu
112	Mwaka Amos Deogratus	DDHS, Acting Director
113	Namayanja	Nurse, UDEL
114	Nassejje Famdeh	C/PPE Secretary, MoES
115	Nicolas Siwingwa	Deputy Regional Director ODK
116	Nixon E. Olangi	Logistics Clerk, WFP Gulu
117	Nkoyoyo Swalbu	Member, Meeting Point International
118	Nora Mwanje	Community Worker, Meeting Point International
119	Odette Kweli	Programme Assistant (HIV/AIDS), WFP
120	Oladapo Walker	WHO Representative

121	Onek Cassun Nelson Binas	Headmaster, Koro P7 School
122	Opio Ouma	Probation Officer, Jinja
123	Paddy Baguma	DISO, ARUA
124	Paul Lutz	GTZ, Teamleader, Food and Nutrition Security Programme, Arua
125	Paul Oputa	Assistant, Education Office, Moroto
126	Peter Pauligu	Food Programme Coordinator, Reach Out, Mbuya
127	Petro	Head of Sub-Office Gulu, WFP
128	Prabhas Kashyap	Logistics Officer, WFP
129	Prossy Nalugya	Project Officer, Feed The Children Uganda
130	Purnima Kashyap	Programme Officer, WFP
131	Ralph Chan	Permanent Secretary, MGLSD
132	Ramathan Addaiy	Deputy Coordinator, Karamoja, MoES
133	Richard Ekodeu	ICR Uganda
134	Richard Ewila	Programme Officer, UNHCR, Arua
135	Richard Cliff Okello	Operations Managers, MoES
136	Richard Martin	GFD beneficiary, Achol Pii District (Ikafe Camp)
137	Richard Oyenga	Community Health Worker, Achol Pii
138	Robert Adupa	Head of Sub-Office, Moroto, WFP
139	Robert Lobur	Field Assistant, PMU
140	Robert Okurst	Chairman of WFP Benefiting NGO Group, Jinja
141	Robinah Muganzi	Matron, UDEL
142	Rogers Kasirya	Executive Director, UDEL
143	Ronald Kizito	Social Worker, UDEL
144	Rose Busingye	Chairperson, Meeting Point International
145	Rose Bwenvu	OPM
146	Rose Mulai	Center Manager, TASO, Gulu
147	Rosemary Korobe	Officer-in-Charge, Karamoja Special Education Programme, Mases Co-education School, Jinja
148	Rosemary Oyollo	Education Officer
149	Ruben F. del Prado	UNAIDS Country Coordinator, UNAIDS
150	Sabina Bobos	GFD beneficiary, Achol Pii District (Ikafe Camp)
151	Sally Obiru	Officer-in-Charge, Arua Hospital AIDS Project (AHAP)
152	Sam Onek	Commissioner for Primary and Pre-school Education, Ministry of Education (MoE)
153	Samwel Ouma	Probation Officer, Gulu
154	Sarah Mangali	Country Director, FFE
155	Sheila Marunga Coutinho	Project Officer, HIV/AIDS (OVC), UNICEF
156	Shem Mwesigwa	SRO, Office of the Prime Minister (OPM)
157	Simon Drileonzia	Field Monitor, WFP Gulu
158	Stanley Abrabo	Chief Agricultural Officer, ARUA
159	Stefan Kluge	Programme Manager, Karamoja Programme, European Union
160	Stephen R. Abiribo	Teacher, Tuku Primary School, Arua
161	Surenda Panday	Senior Programme Officer, UNHCR, Kampala
162	Susan Kasedde	Programme Officer, HIV/AIDS (young people), UNICEF
163	Susanne	Head of ACF, Gulu, Nutritionist

164	Ursula Wangwe	Principle Nutritionist, MoH
165	Thomas Mawanda	Principle, St. Matia Mulwimba Polytechnic, Jinja
166	Thomas Ssempijja	Child (Age 14), KIN
167	Tom Alumbisibwe	Programme Assistant, WFP
168	Vicky Oneralit	Staff Assistant, WFP Gulu
169	Vincent Orinda, Dr.	Senior Project Officer ECCD (Health Nutrition & WES), UNICEF
170	Walter Welz	Food for Peace Officer, USAID
171	Wegulo Kusiax Mpumudde	Officer-in-Charge, Mpumudde Vocational Rehabilitation Centre, Jinja
172	Wenka Gelinch	Community Service Officer, Arua

## Annex C Results (by Logical Framework)

Table C1. Results (by Logical Framework) – PRRO 10121 - Food and Livelihood security

Planned	Achieved	Comments
<p><b>GOAL:</b> to sustain food security for the hungry poor through targeted interventions in conflict-affected areas (Arua, Adjumani, Bundibugyo, Gulu, Kitgum, Karamoja, Moyo, Pader.) of Uganda.</p>		FFA activities have been implemented in Bundibugyo, Arua, Adjumani, Karamoja and Gulu (to a small extent).
<p><b>Purpose:</b> (corresponding to Outputs and Activities) 1. Self-reliance through the creation of assets in settlements or in the early stages of resettlement</p>		At the PRRO design stage, IDP return home was anticipated and so necessitate increased FFA activity but this did not happen and few FFA activities were undertaken. There was a pause in FFA activities pending completion of the FFA guidelines (completed in 2002). This explains the minimal progress made in implementation of FFA activities.
<p><b>Outputs:</b>  <b>1.1 Productive skills improved through:</b>            138 training courses in year one,            180 training courses in year two,            180 training courses in year three            42 training courses in year four.  <b>Targeted number of trainees in FFT projects:</b>  <b>Female:</b> 10,300 in year one            10,000 in year two            10,000 in year three  <b>Male:</b> 9,000 in year one            9,000 in year two            9,000 in year three  <b>1.2 Priority physical assets of food insecure populations rehabilitated/developed:</b>            1,042 Km Rural roads constructed/rehabilitated            355,072 Trees planted            880 ha. farm lands opened            4 km Irrigation canal constructed            4 Irrigations structures constructed            200 Dams/ponds            36 ha. terraces constructed            164 Classrooms constructed            132 Teacher houses/kitchens/storage            64 Health posts, 97,195 Shelters constructed</p>	<p>22 training courses undertaken            40 training courses undertaken            24 training courses undertaken            Zero</p> <p>1,181            2,751            1,831            515            3,498            1,666</p> <p>334 km of community roads (28% of planned)            97,532 Trees planted (32% of planned)            No farmlands opened through FFW.            No irrigation canals constructed.            No irrigation structures constructed.            4 water reservoirs constructed.            Zero            14 class rooms constructed (8.5% of planned)            117 teachers' houses constructed (88% of planned)            1 health centre constructed (1.6% of planned)</p>	<p>The total of 86 courses over four years compared to the 540 planned (or only 16%) is due to non-implementation of FFT activities in Acholiland, where a large number of IDPs were expected to benefit from training in resettlement areas.</p> <p>5,763 females were trained compared to the planned 30,300 over 3 years (ie. an average of 19%)</p> <p>5,679 males were trained compared to the planned 27,000 over 3years (ie. an average of 21%)</p> <p>The project anticipated the resettlement of the IDPs in northern Uganda and visualised community road projects as the most vital and necessary at this point in time. As it were, the resettlement did not take place.</p> <p>Due to lack of IPs and health staff posted.</p>

<p><b>Targeted participants in food-for-work projects:</b></p> <p><b>Female:</b> 3,160 in year one 5,500 in year two 5,500 in year three</p> <p><b>Male:</b> 2,700 in year one 5,100 in year two 5,100 in year three</p> <p><b>1.2 Opportunities for IGAs:</b> xxxx type of IGAs created yyyy type of IGAs created</p> <p><b>Targeted participants in IGA projects:</b></p> <p><b>Female:</b> kkkk in year one llllll in year two mmmm in year three</p> <p><b>Male:</b> pppp in year one qqqq in year two rrrrrr in year three</p>	<p>3,568 3,743 11,835 2,586 2,995 12,138</p>	<p>Over-achievement under FFW (an average of 136%) is due to over-whelming participant demand for certain activities like community road construction. 19,146 females compared with 14,160 planned over 3 years (ie. an average of 135%) 17,719 males compared with 12,900 planned over 3 years (ie an average of 137%)</p> <p>Training has been undertaken in Carpentry and joinery, bakery, book keeping, post harvest handling and storage.</p>
<p><b>Activities:</b></p> <p><b>1.1 FFT</b></p> <p>i) Conduct training needs assessments</p> <p>ii) Determine resources requirement (food and non-food items)</p> <p>iii) Identify potential partners to complement WFP resources.</p> <p>iv) Develop training modules.</p> <p>v) Identify and sensitise beneficiaries</p> <p>vi) Procure and deliver resources required</p> <p>vii) Conduct training programmes.</p> <p>viii) Monitor training and use of skills gained.</p>	<p>Training needs assessments are conducted during project identification by sub-county authorities and community facilitators.</p> <p>Resource requirements are determined at the national level and food dispatched to the districts where the District FFA Committee allocates food to the various sub-counties based on food need gaps.</p> <p>Some partners have been identified but at a very low scale.</p> <p>This is a requirement of the partner. No training modules have been developed by WFP. Carried out satisfactorily.</p> <p>Food is delivered on a monthly basis from Kampala and non-food items purchased and delivered on a needs basis. Various training programmes in post harvest handling and IGA have been undertaken.</p> <p>Training monitoring is by Community Facilitator and WFP FFA focal points at sub-offices level. Some assessment of skills gained undertaken particularly in West Nile.</p>	



<p><b>1.2 FFA</b></p> <p>i) Develop criteria for food-for-work interventions.  ii) Conduct participatory needs assessment.</p> <p>iii) Mobilize and sensitize beneficiaries for FFW interventions.  iv) Determine resource requirements and partners to complement WFP resources.  v) Identify beneficiaries and implement food-for-work activities.  vi) Implement and monitor food-for-work activities  vii) Deliver and distribute food to participants  viii) Conduct PDM on utilization of food and assets</p> <p><b>1.3 IGA</b></p> <p><b>i)</b> Through partners, identify potential income generation activities through participatory needs assessment and conduct market research for end products and identify linkages to market outlets.  <b>ii)</b> Determine non-food item needs and partners to complement WFP resources</p> <p><b>iii)</b> Through partners, identify beneficiaries for IGA and train them in business management and income generation activity skills.  <b>iv)</b> Deliver food and non-food items for training.  <b>v)</b> Distribute food to participants.</p>	<p>FFA Guidelines developed.  This is part of the process of project identification implemented by the sub-counties.  Determination of resource requirements is undertaken at the District, Sub-County and community level.  Identification of resource requirements undertaken at the community, Sub-County and District level  Beneficiary identification is done by the PMCs (elected by targeted groups). It is very participatory.  Undertaken on a routine basis by WFP, Sub-County and Community Facilitators.  Food distribution is through the targeted sub-counties and NGOs where a partnership has been established.  Undertaken by the Field Monitors in charge of FFA at the Sub-Office level.</p> <p>Training programmes like carpentry, bee-keeping and bakery implemented with partners. Joint market assessments.</p> <p>Determination of NFI needs has been done. Development of partnership is on-going as well but at a slow pace.</p> <p>Most IGA training through partners and business management included during this training.</p> <p>Delivery of food and NFIs is done by WFP and is timely.</p> <p>Food distribution undertaken by Project Management Committees at community level. WFP delivers food to Sub-County HQ for collection by various group leadership</p>	<p>Partner identification not yet successful since Phase 1 of implementation focused on use of decentralisation system.</p>
<p><b>Inputs:</b></p>	<p>1,364 tons of food. Agricultural tools.</p>	

**Table C2. Results (by Logical Framework) – CP 10019 ACT III**

Planned	Achieved	Comments
<p><b>Goal:</b> Improve access to food &amp; income for food insecure households in the targeted districts for their economic empowerment and poverty reduction.</p>		<p>Communities targeted are largely in marginally food insecure areas. Food procurement from small-scale farmer groups offers opportunity for small holder farmers to bulk their food and sell in large quantities and at better prices.</p>
<p><b>Purpose:</b> (corresponding to Outputs &amp; Activities)  <b>1.</b> Contribute to improved marketing possibilities of small-scale farmers:  <b>Outcomes:</b>  <i>i) Improved outlet at better prices provided to small-scale farmers' associations;</i>  <i>ii) Reduced WFP internal transport cost;</i>  <i>iii) Bargaining power of small-scale farmers improved and general increase in food prices;</i>  <i>iv) Improved income through higher amount of crops for sale;</i>  <i>v) Improved trading possibilities.</i></p> <p><b>2.</b> Increase productivity of land and time available for productive activities:  <b>Outcomes:</b>  <i>i) Productivity of land increased;</i>  <i>ii) Land and catchment areas rehabilitated;</i>  <i>iii) Women can use time saved fetching water for productive activities.</i></p> <p><b>3.</b> Increase the capacity and organizational skills in food production of food insecure households:  <b>Outcomes:</b>  <i>i) Improved supervisory, asset maintenance, planning and implementation skills of leaders and communities;</i>  <i>ii) Number of households adopting new technologies and increasing the productivity of their land.)</i></p>	<p>Transport costs are similar to those from Kampala  No assessment carried out to ascertain this.</p> <p>Evidence of increased income at household level, based on a case study one district.  Some farmer groups recommended buyers like UGTL.</p> <p>No data to back this up.</p> <p>No studies have been undertaken to this effect.</p> <p>No studies have been undertaken to this effect.</p> <p>No assessments undertaken to determine the extent of this outcome.</p> <p>No assessments undertaken to determine the extent of this outcome.</p>	<p>There is a marked increase in the number of farmer groups that have supplied food or registered to supply food to WFP. Due to special treatment of small farmers (ie. subsidy)</p> <p>Project implementation is still at its infant stage making it difficult to assess the impact of training and market provision to productivity of land</p>
<p><b>Outputs</b> (corresponding to Objectives &amp; Activities)  <b>1.1</b> A targeted 10% of total yearly local purchase from small-scale farmers subject to availability of</p>	<p>3,530 MT purchased in 2002/3.  4,680 MT purchased from 2002 to 2004.</p>	

<p>funds and competitive prices;  <b>1.2</b> Training in food storage, drying, cleaning, packaging and small-scale business practices provided;  <b>1.3</b> Monthly information pamphlets and weekly radio bulletins;  <b>1.4</b> Post-harvest losses reduced (500 workers to build improved cribs);  <b>1.5</b> Access to trading centres improved</p> <p><b>2.</b> Productivity of land and access to water improved in targeted project areas  <b>2.1</b> 6,500 workers establish orchards;  <b>2.2</b> 13,000 workers establish fuel wood plantations;  <b>2.3</b> 13,000 workers establish timber or pole plantations;  <b>2.4</b> 6,000 workers plant fruit and fuel wood trees in schools;  <b>2.5</b> 2,500 workers build or rehabilitate water reservoirs or dams;  <b>2.6</b> 16,000 workers establish small-scale irrigation schemes;  <b>2.7</b> 13,000 workers build soil and water conservation structures;  <b>2.8</b> 6,000 workers build fish ponds;  <b>2.9</b> Increase cocoa production;  <b>2.10</b> 12,500 workers dig shallow wells and gravel-lined shallow wells.</p> <p><b>3.</b> capacity/organizational food production skills  <b>3.1</b> Supervisory skills for labour activities enhanced among district and community leaders;  <b>3.2</b> Asset maintenance skills improved among district officers and targeted communities;  <b>3.3</b> Community planning and implementation skills enhanced through field based training.</p>	<p>150 farmers groups trained in post-harvest handling  20 post-harvest handling/storage training sessions</p> <p>Market information prepared by IITA in districts in which WFP has offices and disseminated with WFP assistance.  Not constructed.</p> <p>200 kms. of roads rehabilitated constructed</p> <p>1,170 farmer groups trained</p> <p>14, 132 trees planted</p> <p>Wood lots planted in 3 schools.</p> <p>Not constructed.  Not developed as yet.</p> <p>Not implemented yet.  22 fishponds constructed by 672 workers. 1 pond stocked  Not undertaken.  1 protected spring constructed.</p> <p>30 Community Facilitators identified/trained in project coordination.  Not directly but through training of 30 CFs and involvement of Sub-County leadership.  Not yet undertaken</p>	<p>Training also includes good agronomic practices.</p> <p>Although ,some IPs training farmer groups have helped them to establish cribs.</p>
<p><b>Activities:</b>  <b>1.1</b> Development-oriented procurement;</p> <p><b>1.2</b> Training in food storage, drying, cleaning, packaging and small-scale business practices;</p>	<p>Procurement guidelines simplified and disseminated to farmer groups during training sessions.  20 training programmes undertaken together with partners.</p>	

<p>1.3 Prepare monthly information pamphlets and weekly radio bulletins and translate all information work into local languages;  1.4 Construction of improved cribs;  1.5 Construction and rehabilitation of community roads.</p> <p>2.1 Plant fruit trees;  2.2 Set up community timber fuelwood plantations;  2.3 Set up community timber pole plantations;  2.4 Plant schools and fuel woodlots;  2.5 Dig/rehabilitate water reservoirs/dams;  2.6 Establish small-scale irrigation schemes;  2.7 Build soil &amp; water conservation structures;  2.8 Build fishponds;  2.9 Increase cocoa production;  2.10 Dig shallow wells and gravel-lined shallow wells.</p> <p>3. Implementation of all FFA activities enumerated above</p>	<p>Information developed by IITA and disseminated by WFP in some districts where it has a physical presence.</p> <p>Not done.  200 km of community roads rehabilitated.</p> <p>Not yet implemented although discussed at various fora.  14,132 trees planted so far.  - do -  3 schools supported with wood lots.  Not yet implemented.  Not yet implemented.  Not yet implemented.  22 ponds constructed and 1 stocked.  Not implemented.  1 protected spring supported.</p> <p>118 assets created  200 projects approved  5,749 males and 6,033 females receive FFW  2,542 males and 3,117 females trained through FFT</p>	
<p><b>INPUTS:</b></p>	<p>o 705 MT of food distributed  o Agricultural tools purchased and distributed.</p>	

**Table C3. Results (by Logical Framework)**

**PRRO 10121 (Nutrition) - HIV/AIDS, TFCs and SFCs**

Planned	Achieved	Comments
<p><b>Goal:</b> to sustain food security for the hungry poor through targeted interventions in conflict-affected areas (Arua, Adjumani, Bundibugyo, Gulu, Kitgum, Karamoja, Moyo, Pader.) of Uganda.</p>		
<p><b>Purpose</b>  <b>Nutritional status of PLWHA initially improved and maintained</b>                      % increase in the number of PLWHA gaining weight                      % increase in the number of PLWHA maintaining weight                      Proportion that food support to PLWHA represents in household food basket.  <b>Nutritional Status of TF/SF Beneficiaries Improved</b>  <b>Relief: Net food gap met and nutrition kept at acceptable levels</b>                      1. &lt;10% global acute malnutrition (GAM) among refugees and IDPs                      2. Acceptable recovery, death and default rates from SFCs and TFCs                      3. TFC: Recovery rate: &gt;80%; Death rate: &lt;5%; Default rate: &lt;10%                      4. SFC: Recovery rate: &gt;70%; Death rate: &lt;3%; Default rate: &lt;15%</p> <p>% of children recovered and discharged by medical staff.                      Extent to which mothers sensitized to importance of complimentary feeding                      3 % of children re-admitted</p>	<p>Not reported                      Not reported                      Not reported</p> <p>Refugees: 6.3 - 7.1% GAM                      IDPs: 4.7-25.4% GAM                      <b>2003/04</b>  <u>IDPs: TFC:</u> Recovery rate: 81%;                                        Death rate: 9.5%;                                        Default rate: 5.4%  <u>IDPs: SFC:</u> Recovery rate: 51%;                                        Death rate: 0.63%;                                        Default rate: 41.3%                      <b>2004</b>                      IDP camps: TFC: 81%, SFC: 51%                      not assessed                      not reported reliably</p>	<p>40% of children from 100 households affected by HIV/AIDS attending school funded from household savings on food – Meeting Point/AVSI Hoima</p> <p>Information not continuously available for the years 2002 to 2004.</p> <p>Nutrition surveys should be under the mandate of Unicef/UNHCR. Twice per year is extensive.</p> <p>Only best IPs able to report these indicators. Others lack reporting capacity. Some unreliable results.                      WFP is preparing a review of performance</p>
<p><b>Outputs</b>  <b>2002:</b> Females: 296 TF/SF beneficiaries receive food                                Males: 296 TF/SF beneficiaries receive food                                Total: 592 TF/SF beneficiaries receive food                                Food distributed: 56 mt  <b>2003:</b> Girls: 296 TF/SF beneficiaries receive food                                Boys: 296 TF/SF beneficiaries receive food                                Total: 592 TF/SF beneficiaries receive food                                Food distributed: 56 mt  <b>2004:</b> Females: 284                                Males: 283                                Total: 567                                Food distributed: 54 mt</p> <p>% of TF/SF beneficiaries receiving food assistance &amp; appropriate food basket (daily/monthly). % of carers receiving appropriate food basket</p>	<p><b>2002:</b> Females: 5,260 (18 times target)                                Males: 4,769 (16 time target)                                Total: 10,029 (17 times target)                                Food distributed: 800 mt (14 times target)  <b>2003:</b> Girls: 7,665 (26 time of target)                                Boys: 5,385 (18 time of target)                                Food distributed: 2,137 mt (38 times target)</p> <p><b>2004 (June):</b> Females: 12,574                                        Males: 11,702                                        Total: 24,276 (43 times target)                                Food distributed: 7248 mt (134 times target)</p>	<p>Due to higher malnutrition rates and new camps, more SFC/TFCs had to be opened.</p> <p>Budget increase was requested.</p> <p>2.5 times the 2002 case load.                      9 times the 2002 quantity                      A review to assess those indicators is in preparation.</p>

**Table C4. Results (by Logical Framework) – PRRO 10121.00 Education and Nutrition Support**

Planned	Achieved	Comments
<p><b>GOAL:</b> to sustain food security for the hungry poor through targeted interventions in conflict-affected areas (Arua, Adjumani, Bundibugyo, Gulu, Kitgum, Karamoja, Moyo, Pader.) of Uganda.</p>		
<p><b>Purpose</b> Enhanced attendance and learning capacity of primary school children, especially girls, in re-established pre-primary and primary schools Increased Enrollment rate  Increased Afternoon attendance rate</p>	<p>School feeding relieves short-term hunger, increases attention span, cognitive performance according to stakeholder interviews Useful qualitative information is provided within the Quarterly reports. SFP very effective in enhancing learning capacity. Should be collected, but is not yet functional, Would be ideal to collect information on afternoon attendance</p>	<p>Monitoring of short term hunger is very subjective. Improved and more precise timing would optimise the impact on short-term hunger. Monitoring of ‘timing’ might be a valid proxy-indicator to short term hunger.</p>
<p><b>Outputs</b> 1. Attendance at targeted primary schools maintained at an average of 280,000 pupils over 3-years from P1 to P7 (of which 51% are girls). 2. Enrolment and attendance of pre-primary children (between 2 – 5 years) averages 95,433 in targeted schools in four years (of which 51 % are girls). <b>Number of schools targeted:</b> Year one 541, Year two 541, Year three 541 and year four 541. Number of feeding days: Year one 250, Year two 270, Year three 270 and Year four 20 days <b>Targeted number of Girls receiving meals at school:</b> 2002 131,000 (Proportion of girls: 51%) 2003 146,500 (Proportion of girls: 51%) 2004 148,000 (Proportion of girls: 51%) 2005 148,000 <b>Targeted number of Boys receiving meals at school:</b> 2002 127,000 2003 143,500 2004 144,000 2005 144,000. <b>Total children receiving meals at school</b> 2002 258,000 2003 290,000 2004 292,000 <b>Number of children attending targeted pre- primary and primary school by sex, grade and geographical unit</b> <b>Attendance/ retention of boys and girls in schools targeted by grade.</b> <b>% of planned food allocation distributed /term</b> <b>Quantity of food distributed:</b></p>	<p>MoES need should become pro-active to support the collection of more reliable information.</p>	<p>3. Original aim was not inclusion of Secondary School students. Secondary schools are in urban areas, have limited capacity, school fees are collected. WFP should not further include those schools. Attendance registers are recently introduced not yet reliable. Attendance calculated from physical headcounts currently used. Retention rates not available by DoEs visited or at WFP office, but should be reinforced. With steady in- and out-flux of IDPs/refugees, retention rates may not be a significant indicator success.  Numbers are taken from Self Evaluations but do not match exactly with the Plan vs Actual numbers provided by CO (mainly the 2003 planning figures). Self-evaluation numbers are preferred here, because of the gender disaggregation.</p>

<p>2002 13,098 Mt.  2003 14,005 Mt. (8,244mt)  2004 14,062 Mt. (9930mt)</p>		
<p><b>Activities</b></p> <ol style="list-style-type: none"> <li>1. Advocate improvement of the learning environment to acceptable standards with MOES and other stakeholders.</li> <li>2. Develop criteria for school feeding project</li> <li>3. Mobilize and sensitise stakeholders on school feeding projects noting roles and responsibilities</li> <li>4. Identify schools to target with school feeding assistance taking into consideration criteria established</li> <li>5. Conduct a baseline study and develop an M&amp; E system based on baseline developed</li> <li>6. Identify Partners and train them on management of school feeding projects.</li> <li>7. Assess readiness of targeted schools to start school feeding projects.</li> <li>8. Deliver food and non-food items to targeted schools.</li> <li>9. Monitor implementation of school feeding projects</li> </ol> <p><u>Indicators of Activity</u></p> <ol style="list-style-type: none"> <li>a. Pupil teacher ratio for primary school at acceptable level (1:40)</li> <li>b. Pupil classroom ratio at acceptable level.</li> <li>c. UPE funds available on time.</li> <li>d. Guidelines for school feeding projects developed.</li> <li>e. Stakeholders aware of their roles/responsibility in school feeding projects</li> <li>f. Schools identified</li> <li>g. Baseline survey conducted and M&amp;E systems developed</li> <li>h. Partners identified and LOU prepared and signed</li> <li>i. Letter of readiness received and verified.</li> <li>j. Resources mobilized and delivered – way bills etc</li> <li>k. Reports prepared noting enrolment, attendance</li> <li>l. Beneficiaries by gender, grade and geographical unit</li> </ol>	<ol style="list-style-type: none"> <li>a. 1:57</li> <li>b. 1:12 were observed in P1.</li> <li>d. Guidelines for school feeding are developed.</li> <li>f. school are identified, still there is a need to expand to yet un-supported, or under-supported schools.</li> <li>g. HQ Baseline survey conducted in 2001 and a follow up in 2003. Information is of limited use for monitoring/evaluation.</li> <li>j. According to Planning vs Actual programming and dispatch figures, pupils did not receive 100% of entitlement but only 36% to 42% of their yearly entitlement.</li> </ol>	<ol style="list-style-type: none"> <li>a. This is not acceptable in lower Grades. Information should be collected/analysed/ disaggregated by Grade.</li> </ol> <p>Textbook : student ratio should be 1:1 but is actually at 1:3.</p> <ol style="list-style-type: none"> <li>j. According to stakeholders involved, resources are mobilised and food is delivered. 10) Partly due to the fact, that children did not attend regularly, or only one instead of two meals were provided.</li> </ol>

**Table C5. Results (by Logical Framework) Country Programme Activity II:  
Support to Education & Adult literacy in Karamoja**

Planned	Achieved	Comments
<p><b>Goal</b></p> <p><b>Purpose</b></p> <p><b>1. Increased Enrolment and Regular Attendance</b>  a. of boys and girls enrolled by grade/training (gross enrolment).  b. of boys and girls regularly attending classes/sessions by grade/training  c. Drop out rates for boys and girls by grade/training</p> <p><b>2. Increase Transition from ABEK to Formal Schools</b>  2.1 % of ABEK learners who enrolled in formal schools by age, sex and grade (transition rate).  2.2 % of ABEK learners dropouts from formal schools by age, sex and grade.  2.3 Extent to which parents support transition from ABEK to formal schools.</p> <p><b>3. Better Managed Child-friendly Schools/Learning Centres</b>  Child-to-facility ratio (space).  3.1 Level of satisfaction with learning environment by boys and girls.  3.2 Teacher - Student/ratio (1:40)</p> <p>3.3 Textbook – Student ratio (1:1).</p> <p><b>4. Nutrition Status of Target Beneficiaries Maintained at Acceptable Levels</b>  4.1 % of under five children who are malnourished (&gt; -2SD weight for height)  4.2 % of beneficiaries with micronutrient deficiency (iron, vitamin A, iodine) as determined by presence of anemia, bitot spots, goiter  Incidences of diarrhoeal infections over past 2 weeks</p>	<p>By Grade is reported at quarterly reports, are there any summary reports?  3. Available through review, case studies and proxi indicators. See report.</p> <p>The self evaluation stated 8% transition rate in Moroto, but this should be assessed again.  Not available, should be reviewed.  Not available.</p> <p>Not available  Not available  1:45 but much worse in lower Grades</p> <p>1:4 for lower and 1:5 for upper grades</p> <p>15 to 26% malnutrition reported by Nutrition survey in IDP/refugee camps and Karamoja Nutrition survey 2003 and 2004 ongoing. Not available as ongoing monitoring information. Surveys are cost intensive. Reliable bitot spots and goitre info. requires large sample studies.</p>	<p>ABEK stopped for the time being. Another report talks about 40%</p> <p>Should be evaluated by Grade (1:120). Other schools: PRRO supported SFP schools: 1:57.  National target: 1:40,  Actual National Av.: 1:55/60, down from 1:120 in 1999  PRRO supported SFP area: 1:3,  National target for P3 to P7: 1:1  Actual National average: 1:4 for in lower Grades  1:3 for P3 and P4. in 2003</p> <p>These indicators are in line with WFP SP 1 and 3, and RMB corporate indicators. This information is not available from health centres on a regular basis. Could be used as outcome indicators for a good MCH programme.</p>
<p><b>Outputs</b></p> <p><b>1. No. of Boys and Girls receiving at least 2 Meals in Schools</b>  1.1 No. of boys and girls fed/served meals during school days.  1.2 No. of school days meals are prepared/served.  1.3 Level of satisfaction of boys and girls with meals served/prepared.  1.4 Level of hygiene in food handling/preparation.</p> <p><b>2. Targeted no. of FAL and ABEK Learners Receiving Weekly Rations</b>  2.1 Quantity of food received by FAL and ABEK learners monthly.</p>	<p>This number is assumed to be identical to the number of children attending (see report).  185 feeding days of 190 instruction days 92%.  Not reported  Not reported  Not reported</p>	<p>Indicator being monitored, but summaries not available.</p>



<p>2.2 No. of FAL and ABEK learners receiving monthly rations.  2.3 Level of satisfaction of learners with rations distributed.  <b>3. No. of School Girls receiving Take-Home Ration (THR) Every Fortnight</b>  3.1 Quantity of food distributed to school girls as THR.  3.2 No. of girls receiving THR (monthly).  3.3 Level of parent's satisfaction with THR.  <b>4. No. of Boys and Girls with Improved Food Absorption</b>  4.1 No. of Boys and Girls de-wormed.  4.2 Amount of de-worming tablets administered.  4.3 Perception of teachers and students on levels of improved absorption.  <b>5. No. of Schools with Gardens and Improved Environment</b>  5.1 50 School Gardens established  5.2 Amount of food (yield) from School Gardens.  5.3 No. of trees planted/surviving.</p>	<p>2,000 ABEK learners and 4,439 FAL learners  Not reported   13,595 girls (self evaluation information)  Not reported   50 in Karamoja by June 2004</p>	
<p><b>Activities</b>  <b>Increased community participation and ownership in school management</b>  Regular meetings of FMC (1 meeting per months)  Operational decisions taken by FMC</p>	<p>Not monitored continuously.  - ditto -</p>	<p>Meetings should be held once per term, or less.</p>

**Table C6. Results (by Logical Framework) - HIV/AIDS Components**

Planned	Achieved	Comments
<p><b>A. ACT I: Support to OVCs (CP 10019)</b>  <b>Goal</b>                      Improve health and living conditions of orphaned children.</p>		
<p><b>Purpose</b>                      - Build the capacity of NGOs/CBOs to provide institutional and outreach services to orphans and street children.                      - Rehabilitation of children with enhanced opportunities for a livelihood within home communities or in employment</p>		
<p><b>Outputs</b>  <b>i)</b> Improve the nutritional status of orphans and street children by providing regular meals through selected institutions in 5 urban municipalities by 2005.  <b>ii)</b> Increase access for orphans and street children to participate in vocational training and internships.                      III: Improve and increase partner NGO/CBO outreach services to orphans and street children.</p>	<ul style="list-style-type: none"> <li>- 3,729 mt of food commodities distributed to selected institutions supporting orphans and street children</li> <li>- Number of institutions assisted</li> <li>- 13,375 orphans and street children received regular meals through institutions assisted by WFP</li> <li>- Number of street children enrolled in formal and informal institutions</li> <li>- Quality and number of courses developed</li> <li>- 4,137 children graduated with marketable skills;</li> <li>3,877 children rehabilitated back in communities</li> <li>- USD 529,446 use of partners savings made 2000 – 2004</li> <li>- Improved food management by NGOs/CBOs</li> <li>- Timely reporting by partners</li> <li>- Partners gender awareness raised and staff familiarized on WFP’s commitment to women</li> <li>- Quantity of NFIs provided to partners</li> <li>- Number of institutions receiving WFP food assistance</li> <li>- Number of children removed from the streets</li> <li>- Number of training programmes conducted</li> <li>- Number of children trained in vocational skills</li> <li>- Number of graduates receiving tool kits from partners (&gt;200 youth)</li> </ul>	<ul style="list-style-type: none"> <li>- NGO/CBO partners report increased registration of children as a result of providing food</li> <li>- NGO/CBO partners report savings made have been utilized to support more children, improve training facilities or materials, meet other administration costs or support graduates with a start-up kit.</li> <li>- NGO/CBO partners report food received contributed to improved diet and nutrition for the children and reduced incidence of sickness</li> <li>- Selection criteria of NGOs/CBOs not strictly followed</li> <li>- WFP objective and target groups not always harmonized with those of partners – risk of attracting more vulnerable groups to streets</li> <li>- Partners have limited resources, trained staff, tools and equipment to provide adequate services and reporting</li> <li>- MGLSD and district partners unable to access government counterpart funding for the contributions to the activities.</li> <li>- Lack of relevant indicators/baselines to assess performance more precisely</li> </ul>
<p><b>B. Social Support (PRRO 10121)</b>  <b>Goal</b>                      Enhanced social support systems for extremely vulnerable and disadvantaged groups</p>		

<p><b>Purpose</b> Nutrition support to people infected and affected by HIV/AIDS and support to improved living conditions</p>		<p>Nutritional gains made to HIV/AIDS affected families and other benefits made from saving on food budget</p>
<p><b>Outputs</b></p> <ul style="list-style-type: none"> <li>- Increased attendance in VCT</li> <li>- Nutritional status of PLWHA improved and maintained</li> <li>- Household savings on food costs for those affected/infected by HIV/AIDS</li> <li>- Increased ability for households to meet their food needs</li> <li>- Improved home based care and community support services to PLWHA</li> <li>- Behavioural change in high risk groups and other programme beneficiaries</li> </ul>	<ul style="list-style-type: none"> <li>- Increase in number of people seeking Voluntary Counselling and Testing</li> <li>- Increase in no. of PLWHA gaining weight</li> <li>- Increase in no. of PLWHA maintaining weight</li> <li>- Proportion of food support to family food basket</li> <li>- Reduction in no.of opportunistic infections for PLWHA</li> <li>- Increase in number of people returning to productive life</li> <li>- Number of functional community-based support groups to PLWHA and families</li> <li>- Extent of households initiation of alternative coping mechanisms to support PLWHA</li> <li>- Extent of use of HIV/AIDS preventive measures</li> <li>- Increase in number of functioning HIV/AIDS education</li> <li>- Reduction in incidence of new infections of STIs</li> </ul>	<ul style="list-style-type: none"> <li>- Support makes knowledge of own HIV status of greater interest and offsets effects of stigma</li> <li>- Household saving used to support other family costs e.g. school fees</li> <li>- HIV/AIDS community groups with low organizational capacity</li> <li>- Low IP capacity to gather reliable information, process and document it</li> <li>- WFP does not have adequate capacity to monitor and support HIV/AIDS programmes</li> <li>- Baseline data insufficient to assess progress or performance</li> </ul>
<p><b>Activities</b></p> <ul style="list-style-type: none"> <li>- Assist partners to develop distribution mechanisms and supervise capacity</li> <li>- Sensitize communities on HIV/AIDS and nutrition</li> <li>- Advocacy to donors and communities on importance of good nutrition for PLWHA</li> <li>- Create awareness among high risk groups and other programme beneficiaries</li> <li>- Establish criteria for selection of partners and selection of beneficiaries</li> <li>- Delivery of food commodities for distribution by partners to PLWHA</li> <li>- savings on food purchase by partners</li> </ul>	<ul style="list-style-type: none"> <li>- Percentage of PLWHA receiving food assistance</li> <li>- Percentage of PLWHA receiving appropriate food basket on monthly basis</li> <li>- Level of satisfaction of the food basket by PLWHA</li> <li>- Increased number of PLWHA and caretakers trained in nutrition counselling and care</li> <li>- Increased financial commitment by donors to PLWHA</li> <li>- Extent of beneficiaries understanding of risks of HIV/AIDS</li> <li>- Extent to which beneficiaries can identify HIV/AIDS preventive actions</li> <li>- Number of beneficiaries provided life skills training</li> <li>- Number of beneficiaries establishing income generating activities</li> <li>- Number of children from HIV/AIDS affected families attending school</li> <li>- Percentage of PLWHA contributing to at least 20% of their daily food needs</li> </ul>	<ul style="list-style-type: none"> <li>- High default rates - some patients do not complete medication regime when discharged after intensive illness is over.</li> </ul>

<p><b>C. Food Aid Support to Families Affected by HIV/AIDS through the AIDS Support Organization, TASO (Development Project 10139)</b></p> <p><b>Goal</b> Improved quality of life of PLWHA and their families</p>		
<p><b>Purpose</b></p> <ul style="list-style-type: none"> <li>- Improved nutrition and community/home based care services for families of HIV infected persons enrolled in the NGO TASO;</li> <li>- Strengthen income generation capacity and coping mechanisms of TASO members and their families</li> </ul>		
<p><b>Outputs</b></p> <ul style="list-style-type: none"> <li>- Provision of dietary support to families of infected persons enrolled in TASO services;</li> <li>- Increased enrolment and participation of TASO beneficiaries and their in education, skills training and income generating activities;</li> <li>- Increased participation of family members of TASO</li> <li>- Beneficiaries in life skills training, peer counselling and preventive education activities as well as community oriented awareness;</li> </ul>	<ul style="list-style-type: none"> <li>- Persons registered in TASO receive daily family rations;</li> <li>- 50% of the daily food requirement of TASO beneficiary families is met by WFP food ration;</li> <li>- Infected and affected children among TASO families are enrolled and remain in schools;</li> <li>- Women TASO beneficiaries enrol in skills training and income generation activities;</li> <li>- At least one family member from all TASO registered beneficiaries participates in other TASO activities such as peer counselling, preventive education and community awareness campaigns.</li> </ul>	<p>The one year project began in June 2004. First deliveries started a few weeks before the field Evaluation mission took place.</p>
<p><b>Activities:</b></p> <ul style="list-style-type: none"> <li>- Assist TASO to develop distribution mechanisms and supervise capacity</li> <li>- Delivery of food commodities for distribution by TASO to its members</li> <li>- Sensitise TASO members on HIV/AIDS and nutrition</li> </ul>		

## Annex D School Feeding Programme Tables

**Table D1. Number of supported students - SFP PRRO 10121, 2002 to June 2004<sup>143</sup>**

Year	Male	Female	Total	% Female	% Achievement
2002	82,637	67,598	150,235	45%	58%
2003	118,145	102,378	220,523	46%	76%
2004 (June)	202,304	172,651	374,955	46%	128%
% Increase of 2002	245%	255%	250%		

Source: CO Self Evaluation Report

**Table D2. Numbers of enrolled children 2003 vs number of supported pupils 2004**

Districts	Total enrolled	WFP SFP bene	Coverage
	2003	2004	
Gulu	170,980	117,847	69%
Kitgum	107,233	43,126	40%
Arua	362,115	63,056	17%
Bundibugyo	62,415	39,396	63%
	702,743	263,425	37%
Pakelle	n.a.	58,906	
Pader	135,574	not yet covered	
Lira	241,982	not yet covered	
Soroti	126,297	not yet covered	

Source: MoES Enrolment Data 2003

<sup>143</sup>Please note: A question which needs to be clarified and should be looked at more precisely is the amount of food provided per pupil. While about 48kg to 51kg were programmed for a child per year, only 36% to 42% (18kg to 20kg) were actually distributed, still teachers and headmasters reported the delivery of the full allotment. The assumption is, that numbers of pupils actually fed is still much higher than headcounts reveal, quantity of food provided per meal less than planned, meals may be less in numbers and/or less feeding days than intended.

Table D3. Enrolment and attendance, CP Act II in Karamoja, 1999 and 2003 Source: (Okech 2003)

Year	Boys	Girls	Total
1999 (enrolment)	34,168	31,420	65,588
1999 (attendance)	23,556	22,138	45,694
% Attendance	69%	70%	70%
2003 (enrolment)	55,179	49,548	104,727
2003 (attendance)	27,437	23,737	51,174
% Attendance	50%	48%	49%
Increase enrolment up to	161%	158%	160%
Increase absolute attendance up to	116%	107%	112%

Table D4. Net enrolment ratio for age 6 to 12 years - 2003

Area	Male Students	Female Students	Total Students	Total school aged Population	Male NER (%)	Female NER (%)	Total NER (%)
Kotido	27,230	24,150	51,380	151,363	35	32	34
Moroto	7,189	6,194	13,383	41,673	36	29	32
Nakapiripirit	7,809	9,174	16,983	37,943	41	49	45
Karamoja Total	42,228	39,518	81,746	230,979	37	37	37
National:	2,692,226	2,691,458	5,383,684	5,989,063	90	89	90

Table D5. Karamoja – Primary school enrolment by class and gender, 2003

	Primary 1	Primary 2	Primary 3	Primary 4	Primary 5	Primary 6	Primary 7	Total
Male	23,422	10,172	7,062	5,363	4,146	2,948	2,066	55,179
Female	25,536	8,732	5,297	3,972	2,953	2,061	997	49,548
Total	48,958	18,904	12,359	9,335	7,099	5,009	3,063	104,727
% Female	52%	46%	43%	43%	42%	41%	33%	47%
Proxy-Drop out - based on actual numbers of the year 2003								
	P1 to P2	P2 to P3	P3 to P4	P4 to P5	P5 to P6	P6 to P7	P1 to P7	Proxy completion
Drop Out-Male	57%	31%	24%	23%	29%	30%	91%	9%
Drop out Female	66%	39%	25%	26%	30%	52%	96%	4%
Drop Out Total	61%	35%	24%	24%	29%	39%	94%	6%

## Annex E. WFP Implementing Partners for the HIV/AIDS and OVC Components in 2004

Programme Category	Lead Agency	No. of CBO/NGOs	Location
<b>PRRO</b>	AVSI	7	Kampala
		1	Hoima
	World Vision	16	Mpigi + Wakiso
		Implements directly	Gulu
	Reach Out	Implements directly	Kampala
	St Joseph Hospital	Implements directly	Kitgum
	Meeting Point	Implements directly	Kampala
	Arua Hospital + MSF + NACWOLA	Implements directly	Arua
	GUSCO	Implements directly	Gulu
<b>Country Programme</b>	ICR	12	Jinja
		6	Mbale
		5	Busia
	Feed the Children	44	Kampala + Mukoni
<b>Development project (stand alone project)</b>	TASO	Implements directly	12 branches in urban centres

**Annex F. Logical Framework – Logistics**

<b>Logical Framework Hierarchy</b>	<b>Objectively Verifiable Indicators</b>	<b>Means of Verification</b>	<b>Risks &amp; Assumptions</b>
<b>Goal:</b> Effective Operational support	Actual tonnage moved, distribution cycles achieved, LTSH rate	SPRs. CTS reports. LTSH Analysis report.	Pipeline Breakdown Breakdown of services at Mombasa port. Restrictive Kenya Govt. transport regulations. Security deterioration. Low resources.
<b>Purpose:</b> 1. Timely Food deliveries to beneficiaries. 2. Minimal storage & post delivery loss.  3. Meet Enlarged throughput needs. 4. Achieve Transport Cost efficiency.  5. Optimum strategic fleet utilization 6. Increased transparency and accountability	1. Monthly Distribution cycles achieved. 2. %age of commodity losses by post delivery causes, program category and value per metric ton. 3. Planned vs Actual fig. 4. Percentage variation between actual cost and planned by program category and by cost component. 5. Asset utilization ton/km achieved 6. 100% Food accountability	SO Monthly Siterp COMPAS & WINGS reports  Throughput analysis chart. WINGS, COMPAS  SF unit reports COMPAS/WINGS	
<b>Outputs:</b> 1. MT food delivered.	Actual MT.	IP reports/WFP SPRs	
2. % of beneficiary receive full food basket on monthly basis.	All FRNs executed on time. All distribution cycles of SO/FO completed.	WFP CDP/EDP DSMR reports CTS reports	
3. MT food loss.	Actual Transit and storage losses MT.	CTS Stock loss reports	
4. LTSH/pmt rate maintained	LTSH. US\$ pmt . Planned vs Actual	LTSH Matrix & Cost Analysis report.	
5. Receipt and Storage of received quantities at planned trans-shipment cost of US\$	Actual trans-shipment cost	WINGS	
6. MT Food losses during storage 7. MT Food grains fumigated	% of Food stored Actual MT grains fumigated	COMPAS Warehouse QC reports.	
8. MT Primary trucking capacity created through contracts. 9. MT Secondary trucking capacity created through contracts and use of SF.	Carrying Capacity of Contracted transporters. Carrying Capacity of SF	Transport Contracts  SF records	
10. % utilization of Strategic fleet achieved.	MT food distributed Planned Ton/KM achieved High vehicle serviceability rate	SF Tonnage Moved Reports SF asset utilization report SF Maintenance logs	



<p>11. 100% use of COMPAS 2 data for Report generation at CO &amp; SO level.  12. 100% utilization of LTI for Primary transporter &amp; Secondary transporter invoicing</p>	<p>Actual usage %age   Actual Usage</p>	<p>CO &amp; SO reports based on COMPAS   COMPAS reports</p>	
<p><b>Activities:</b>  1. Timely Transport Contracts  2. Timely Call forwards from requisition units.  3. Transport market assessments  4. Maintaining adequate CDP and EDP warehousing capacity.  5. Proper handling &amp; storage  6. Fumigation of infested food commodities  7. Reconstitution of damaged food  8. Preparation of effective distribution plans  9. Maintenance of Strategic fleet.  10.Entry of daily stock movement in COMPAS  11.Preparation of LTSH Matrix &amp;cost analysis.  12. Utilization COMPAS for Monthly SO reports</p>			
<p><b>Inputs:</b>  1. 28 Strategic fleet trucks. 322MT carriage capacity.  2. Primary transport Contracts with 11 Transport Cos. Combined capacities of 416 trucks.  3. CDPs 30,000 MT Capacity. 25 EDPs with 19520 MT Capacities.  4. 9 CTS nodes.</p>			

## Annex G. Planned versus Actual - Nutrition

**Table G1:** Number of beneficiaries in Nutritional Support, 2002 to 2004, Planned versus Actual

Activity	Programme Category	2004 Beneficiaries			2003 Beneficiaries			2002 Beneficiaries		
		Planning	Actual	%	Planning	Actual	%	Planning	Actual	%
Nutritional support	PRRO	32,400	61,909	191%	3,028	13,050	431%	17,600	10,029	57%

**Table G2.** Tonnages of food in Nutritional Support, 2002 to 2004, Plan versus Actual

Activity	Programme Category	Tonnages 2004			Tonnages 2003			Tonnages 2002		
		Planning	Actual	%	Planning	Actual	%	Planning	Actual	%
Nutritional support	PRRO	1,754	747	43%	2,025	335	17%	453	259	57%

**Table G3. Food programmes and dispatched per beneficiary under Nutritional Support** (kg/beneficiaries)

Activity	Programme Category	2004 Quantity (in Kg) per beneficiary		2003 Quantity (in kg) per beneficiary		2002 Quantity (in Kg) per beneficiary	
		Plan	Actual	Plan	Actual	Plan	Actual
Nutritional support	PRRO	54	12	669	26	26	26

**Food rations:**

TFC child	Child approx. 80 g per day, if they attend 6 weeks they receive 3.4kg
TFC care taker	580g per person and day, if the child attends 6 weeks they should 24.4kg
SFC – Children	287 g per day for children under five, they would attend in average 2 months? 17 kg of food
SFC – mothers	Pregnant and lactating, total 12 months, 103 kg

## Annex H, Planned versus Actual - Education

### Table H.1 Number of beneficiaries for FFE, 2002 to 2004

Activity	Programme Category	2004 Beneficiaries			2003 Beneficiaries			2002 Beneficiaries		
		Planning	Actual	%	Planning	Actual	%	Planning	Actual	%
School feeding	CP Act II	63,600	53,920	85%	65,268	59,735	92%	70,000	77,767	111%
	PRRO	292,000	324,369	111%	258,000	220,523	85%	258,000	150,235	58%
	<b>Total</b>	<b>355,600</b>	<b>378,289</b>	<b>106%</b>	<b>323,268</b>	<b>280,258</b>	<b>87%</b>	<b>328,000</b>	<b>228,002</b>	<b>70%</b>
Non-formal education	CP Act II	35,100	4,308	12%	6,550	3,331	51%			

Beneficiaries: Changes from 2002 to 2004

SFP, CP beneficiaries decreased to 69% from 2002 to 2004

SFP PRRO increased to 216% from 2002 to 2004

SFP total increased to 166%

### Table H.2 Tonnages for FFE, 2002 to 2004

Activity	Programme Category	Tonnages 2004			Tonnages 2003			Tonnages 2002		
		Planning	Actual	%	Planning	Actual	%	Planning	Actual	%
School feeding	CP Act II	4,782	3,258	68%	4,392	5,466	124%	7,594	5,887	78%
	PRRO	9,930	7,572	76%	8,244	4,715	57%	13,098	2,733	21%
	<b>Total</b>	<b>14,712</b>	<b>10,830</b>	<b>74%</b>	<b>12,636</b>	<b>10,181</b>	<b>81%</b>	<b>20,692</b>	<b>8,620</b>	<b>42%</b>
Non-formal education	CP Act II	403	141	35%						

Tonnages: Changes from 2002 to 2004

SFP CP: decrease to 55% from 2002 to 2004

SFP PRRO: from 100% to 277%

SFP total: from 100% to 126%

### Table H.3 Quantity of food programmed and dispatched per beneficiary for FFE (kg/beneficiaries)

Activity	Programme Category	2004		2003		2002	
		Quantity (in Kg) per beneficiary		Quantity (in kg) per beneficiary		Quantity (in Kg) per beneficiary	
School feeding	CP Act II	75	60	67	92	108	76
	PRRO	34	23	32	21	51	18
	<b>Total</b>	<b>41</b>	<b>29</b>	<b>39</b>	<b>36</b>	<b>63</b>	<b>38</b>
Non-formal education	CP Act II	11	33				

Food rations:

SFP-wet feeding

280 g per child and day (breakfast and lunch), 53.2kg per year

SFP-GTHR

approx. 6 kg maize meal per months, or 25 kg CSB, 10 months: 60 kg maize meal or 250kg CSB

**Annex I Table 1 Key events and programme response**

	1999	2000	2001	2002	2003	2004	2005
<b>Key events</b>	An escalation in LRA attacks since the mid nineties culminates with 320.000 IDPs . There are 150.000 refugees in the North-west).	Due to violent attacks on civilian populations in Gulu and Kitgum, the number of IDPs doubles. However, reconciliation talks with Khartoum and a declaration of amnesty for LRA rebels encourage IDPs to return and farm during daytime.	Most of 2001 is relatively calm, but due to sporadic attacks the IDPs do not return home.	Since June RLA attacks on civilians is intensifying in Gulu, Kitgum and Pader and now also affects Lira and Apac.	By April the numbers of IDPs have increased to 812.000. In Gulu, Kitgum and Pader 70% of the population is now displaced. Jan Egeland (OCHA) puts the humanitarian crisis on the international agenda after a visit to the region.	Due to intensifying violence in the north, the number of IDPs increase to 1.6 million people by May. In September Kofi Annan mentions the atrocities committed by the RLA in his opening of the GA and urges GoU to increase efforts to solve the conflict	
<b>Country Programme (Development)</b> -Support to Orphans and vulnerable children -School feeding -Support to agricultural Marketing.	CP approved by the EB based on GoU Poverty Eradication Plan (PEAP) for post conflict areas. It is to support 350.000 beneficiaries for a total cost of \$20 million					A budget revision is approved to extend the CP 18 months to Dec 2005 to harmonize with the UNDAF cycle. No. of beneficiaries increased to 531.000 and the total cost to \$29 million	
<b>Development project 10139 (HIV/AIDS)</b>			Approved in November.	No implementation due to lack of funding + delay in negotiation with partners	Beneficiary numbers are revised down from 92 000 to 46 000. Tonnage remains the same.	Implementation starts late (August) due to lack of funding and delay in negotiation with partners	
<b>PRRO</b> -GDF to IDPs, refugees and drought affected populations -School Feeding -HIV/AIDS/TB -FFA -Social Support (Formerly abducted children) -Nutritional Support		<b>PRRO 6176</b> approved by EB in Feb. 2000 to support 500.000 beneficiaries for a total cost of \$24 million, of which 30% is for recovery through resettlement packages for IDPs, refugee settlement and FFA.		<b>PRRO 10121</b> approved by the EB in February to support 1 million people for a total cost of \$103 million of which 34% is for recovery principally through returnee packages and school feeding	A budget revision is approved in April due to the increased no. of IDPs, and high malnutrition rates among under fives. Beneficiaries increase to 1.6 million. Total cost is \$179.000 of which 22% is for recovery	A BR is approved in June due to the increased no. of IDPs, high malnutrition rates among under fives, and increased support to PLWHA. Beneficiaries amount to 2.3 million people. Total cost is \$249 million of which 20% is for recovery.	<b>PRRO 10121.1</b> submitted to the EB in Feb. 2005 for 36 months.

**Figure 1 Areas and Projects visited**

