WORLD VISION UGANDA STRATEGY
2016 - 2020

• Equip • Advocate • Empower
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## Acronyms

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<th>Full Form</th>
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<tr>
<td>ADP</td>
<td>Area Development Program</td>
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<tr>
<td>AIDS</td>
<td>Acquired Immune Deficiency Syndrome</td>
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<td>AR</td>
<td>Acute Respiratory Infections</td>
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<td>ART</td>
<td>Anti-Retroviral Therapy</td>
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<td>BCC</td>
<td>Behaviour Change Communication</td>
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<td>CBO</td>
<td>Community Based Organisation</td>
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<tr>
<td>CDPP</td>
<td>Community Disaster Preparedness Plan</td>
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<td>CFS</td>
<td>Child friendly Spaces</td>
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<td>CLTS</td>
<td>Community Led Total Sanitation</td>
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<td>CoH</td>
<td>Channels of Hope</td>
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<td>CPA</td>
<td>Child Protection and Advocacy</td>
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<td>CPIE</td>
<td>Children Protection in Emergencies</td>
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<td>CVA</td>
<td>Citizen Voice and Action</td>
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<td>CWB</td>
<td>Child Well-being</td>
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<td>CWBO</td>
<td>Child Well-being Outcome</td>
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<tr>
<td>C4D</td>
<td>Communication for Development</td>
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<td>EARO</td>
<td>East African Regional Office</td>
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<td>EMIS</td>
<td>Education Management Information System</td>
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<td>DRR</td>
<td>Disaster Risk Reduction</td>
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<td>ECaP</td>
<td>Empowering Children as Peace Builders</td>
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<td>ECD</td>
<td>Early Childhood Development</td>
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<td>EWAEA</td>
<td>Early Warning/Early Action</td>
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<td>FBO</td>
<td>Faith Based Organisation</td>
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<td>FMNR</td>
<td>Farmer Managed and Natural Regeneration</td>
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<tr>
<td>GC</td>
<td>Global Center</td>
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<tr>
<td>GER</td>
<td>Gross Enrolment Ratio</td>
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<td>GNOD</td>
<td>Global National Office Dashboard</td>
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<td>HIV</td>
<td>Human Immune Virus</td>
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<td>ICCM</td>
<td>Integrated Community Case Management</td>
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<td>ICT4D</td>
<td>Information and Communications Technology for Development</td>
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<td>LLIN</td>
<td>Long Lasting Insecticide Nets</td>
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<td>LVCD</td>
<td>Local Value Chain Development</td>
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<td>MAAIF</td>
<td>Ministry of Agriculture Animal Industries and Fisheries</td>
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<td>M&amp;E</td>
<td>Monitoring and Evaluation</td>
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<td>MNCH</td>
<td>Maternal New born and Child Health</td>
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<td>MoFPED</td>
<td>Ministry of Finance Planning and Economic Development</td>
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<td>NER</td>
<td>Net Enrollment Ratio</td>
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<td>NGO</td>
<td>Non-Governmental Organization</td>
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<td>OVC</td>
<td>Orphans and Vulnerable Children</td>
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<td>PDCs</td>
<td>Parish Development Committees</td>
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<td>RMNCH</td>
<td>Reproductive Maternal New born and Child Health</td>
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<td>SCALE</td>
<td>School Community Accountability for Literacy Enhancement</td>
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<tr>
<td>ttc</td>
<td>Timed and Targeted Counselling</td>
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<td>UBOS</td>
<td>Uganda Bureau of Statistics</td>
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<td>VSLA</td>
<td>Village Saving and Loan Association</td>
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<td>WVU</td>
<td>World Vision Uganda</td>
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<td>YRS</td>
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I am happy and rejoice with World Vision Uganda management upon completing development of the national strategy for 2016-2020 and I appreciate the rigor demonstrated. I also want to thank WVU management for the tireless efforts exhibited in the contributions being made to the sustained wellbeing of children in their families and communities. The approach used in consultation with key stakeholders locally, nationally and internationally provides a good footing for continued ownership at different levels. I also want to appreciate the involvement of all board members and the constructive feedback they provided towards completion of this strategy.

Board participation in the current and previous strategies has been one of our central and core objectives in providing direction to the national office but also ensuring strategies measure up on promises.

As a Board we have made major strides in the current strategic period that included among others the following: a) the Board actively got involved in the development of the strategy through its two ministry committee members, b) approval of the strategy through Board meeting and c) strategy performance monitoring. I am also happy that management ensured board recommendations are implemented and strategy performance reports shared in quarterly board meetings.

In order to provide sustainable leadership and succession, the Board has adopted a strategic approach to continuously review and match the skills and attributes of its members at any given time to the organisation’s needs.

In this strategy 2016-2020, the Board emphasizes the need to focus on lasting impact, increased resource mobilization and having an organization which is effective, innovative and the one which leads in integrity. The board also envisions a World Vision Uganda which leads to empowered communities that drive sustainable child wellbeing; with simplified systems and business processes that promote organizational effectiveness and efficiency and the one whose culture is trusted and expresses excellence in execution and staff exhibiting Christian values, norms, habits and actions.

The Board will continue to move and tactically challenge WVU management to ensure that staff: engages effectively and efficiently, exercises the highest level of accountability, passionate about children, committed and time conscious.

We also continue to assess our position in the local, national and global contexts and shall ensure extreme care and thought for the Board to be increasingly engaged in assisting management in resource mobilization (locally and externally), profiling WVU and organizational visibility, especially with local institutions (government and private sector). Likewise there will be increased engagement and participation of individual Board Members in international peer reviews, supporting and learning from other Governance Boards.

The Board is therefore committed to supporting World Vision Uganda management achieve its strategic goal of contributing to improved Household Resilience, Protection and Sustained Well-Being of 6,000,000 Children, especially the most vulnerable by 2020.

Looking forward to further engagement

Dr. Fred Muhumuza
Board Chairperson
I am happy to present to you World Vision Uganda National strategy for 2016-2020.

The strategy development process was guided by the World Vision International agreed seven-step process which provides a methodology that promotes consistency and alignment. The seven step process was also informed by many months of engagements in: review of progress on the 2013-15 strategy, casting strategy visioning for the next cycle and strategy formulation. I would therefore like to thank all staff that developed this strategy. I also appreciate the wider stakeholders including World Vision Uganda board, East Africa regional office, World Vision support offices and district partners for their contributions. Engagement of wider stakeholder community has ensured this strategy is aligned to World Vision global and regional priorities including responding to global and National trends including government of Uganda Vision 2040.

Reflecting on the strategy 2013-2015, we celebrate improvements in health services delivery, safe water coverage, household level food availability and nutrition security, access to education facilities and functional literacy of school going children and partner/community engagement in child protection.

The 2016-2020 strategy emanates from and builds on the achievements, lessons learnt from our past national strategies and also takes into account our key national level and program issues surrounding child wellbeing. Our presence in over 70 districts out of 112 districts in Uganda, with programs in 450 sub counties out of 1381, presents yet another opportunity for broader collaboration and engagement with central and local governments and other development partners in addressing specific child wellbeing issues identified in this strategy.

Amidst all achievements realised, to-date, children and families in World Vision’s operation context, still suffer from a range of complex vulnerabilities including; maternal and child health challenges, malnutrition, violence against children, hunger and poor quality education. Issues highlighted in the operating context call for drastic approaches in our programing and operations in a way that will have maximum impact on the wellbeing of children, especially the most vulnerable. We treasure concerted efforts and collaboration with our stakeholders locally, nationally and internationally.

Now, and in the years ahead, we will join our efforts in ensuring this strategy is owned by all and translated into concrete actions. Together, we can better devise the right approaches to tackling issues in the strategy for realizing greater depth and impact as a national office. The current world we live in requires us to do things differently, have an open mind, open heart and an organisational culture, practices and behaviours that help us realise our strategic goal and intent. Therefore, our development practitioners will need to facilitate development with a future in mind if we are to achieve lasting child well-being outcomes.

In the next strategic period of five years, we will contribute to improved Household Resilience, Protection and Sustained Well-Being of 6,000,000 Children, especially the most vulnerable by 2020. As we operationalize the strategy, the following 7 areas will be among are priorities to be addressed: a) all children have birth certificates, b) there is no child Marriage, c) there are no maternal deaths, d) no child dies before age of two, e) no child drops out of school, f) all children read and write according to their age and g) farming is taken as a business.

Thank you so much for your support

Gilbert Kamanga
National Director
1.0 Introduction

This document presents the new World Vision Uganda strategy for the period 2016 – 2020. The strategic intent expressed emanates from and builds on the achievements, and lessons learnt from our past national strategies. The past performance and context analysis highlighted the following key areas that need to be prioritised in the current strategy: Maternal, Newborn and Child Health (MNCH) and Nutrition; Water Sanitation and Hygiene (WASH), Peace and Child Protection, Household Resilience and Livelihoods; increasing access to quality education; growing urbanization and the increasing youth population.

Uganda has a population of 34.9 million and half of this is below 15 years (UBOS 2014) indicating a heavy dependency burden on the households. 57.8% of the population are children (below 18 years) representing one of the youngest populations in the whole World. The Country is divided into District Local governments (112 of which WVU operates in 41) and Sub Counties (1381 of which WVU operates in about 450) and this is therefore a great opportunity for World Vision to collaborate and engage with central and local governments and other development partners in addressing specific child wellbeing issues identified in this strategy.

1.1 Strategy development process

The development of the strategy involved the following core aspects: review of progress on the 2013-15 strategy, casting strategy visioning for the next cycle in consultation with stakeholders in the country (including the WVU Governance Board, staff, children, community representatives and local government) and going through the seven steps of strategy development as guided by the WV Partnership strategy development process map. This strategy is therefore responding to global and national trends. It is aligned to World Vision global and regional priorities and to the government of Uganda Vision 2040.

Both Board and Management visioning emphasized the need to focus on lasting impact, increased resource mobilization and having an organization which is effective, innovative and the one which leads in integrity. They envisioned a World Vision Uganda that; leads to empowered communities, drives sustainable child wellbeing, has simplified systems and business processes, promotes organizational effectiveness and efficiency, whose culture is trusted and expresses excellence in execution.

1.2 Background to World Vision Uganda

World Vision is a Christian, relief, development and advocacy organization dedicated to working with children, families, and their communities to reach their full potential by tackling the causes of poverty and injustice. It is committed to working with girls and boys, families, and their communities worldwide to overcome poverty and injustice.

World Vision Uganda (WVU) is duly registered with the National NGO Board under the National NGO registration Act of Parliament of Uganda and has a well respected Local Governance Board. World Vision Uganda’s Mission and Vision are derived from World Vision International Mission and Vision.

WVU started operations in 1986 as a relief organization responding to the needs of the victims of 1981 – 1986 guerrilla war, which affected most parts of the Central Region of Uganda. WVU’s work significantly increased as it responded to the HIV/AIDS pandemic in the Southern Region, and the mounting demand for relief and rehabilitation in the war-torn areas in Northern Uganda (1988-91). During late 1990s WVU expanded to the Eastern Region helping communities to fight poverty and effects of cattle rustling and HIV/AIDS. The organization experienced a surge in its programming especially the relief portfolio in Northern Uganda in mid 2000s due to the devastating effects of the armed conflict by the Lord’s Resistance Army.
Long term development work begun with the initiation of Community Development Projects (CDPs) in central, southern, western and West Nile regions between 1987 and 1995. By end of FY 2014 WVU had 53 Area Development Programs (ADPs) and 65 grant funded projects being implemented in 41 out of the 112 districts of Uganda. The last three years of the strategy 2013-2015 anchored on four ministry priorities namely: Health and Nutrition, Food Security & Community Resilience, Equitable access to Education and Child protection. Advocacy and Social Accountability work has been foundational to WVU interventions. World Vision Uganda continued to respond to emergencies in the following areas: Sudanese refugees in West Nile, Congolese refugees in Kamwenge and to floods in Kasese as well as supporting recovery programs in Northern Karamoja.

1.3 Guiding Principles

The following guiding principles are key to the success of the strategy:

I. Addressing the Root Causes of Poverty: World Vision Uganda will continue to focus on empowerment of individuals and households. Programming will be based on addressing structural constraints and not in form of providing hand-outs that do not lead to sustainability. Household vulnerability assessment in the project areas will be conducted so that appropriate strategies are adopted.

II. External Engagement and Partnerships: The external engagement and partnerships will be for both resource acquisition and program delivery. It will include targeted proactive and reactive program resource acquisition (grants & GIK including food). Public and Private Partnerships including partnering with the Church and other faith groups will also be a key aspect.

III. Building Household Resilience: We recognise that greater impact on the wellbeing of children can be achieved when the focus is on building household resilience that includes economic empowerment. Organising farmers into groups for increased production, better value addition and improved access to markets is foundational to an agribusiness society like Uganda.

IV. Advocacy for sustainability: Local level advocacy, linked to national and global policy processes will lead to better governance and social accountability for improved service delivery as well as increased demand and utilisation of social services.

V. Child and Youth Participation: Uganda has one of the fastest growing youth population in the World and therefore effective age appropriate child and youth participation will be pivotal in achieving peace and protection.

VI. Evidence Building and Learning: This will focus on building solid evidenced programming to improve effectiveness, and also leverage for advocacy to enhance credibility in Uganda’s development sector. An automated M&E system will be developed for use by all programs.

VII. Streamlined Business Processes: This will require simplified and dependable business processes that promote organizational effectiveness and efficiency, like procurement, financial and P&C management systems.

VIII. TEECAP Culture: This will be a foundation for effective strategy implementation.
2.0 Strategy

2.1 Call and Aspiration

As a Christian organization, we heed the call to lead in facilitating empowerment of communities, working with partners, the government and other actors to contribute to children being protected, cared for and participating.

We aspire to a Uganda in which girls and boys are protected, cared for, participating and realize their full potential, in their families and communities.

We seek a World Vision Uganda where staff engage effectively and efficiently with the highest level of accountability, commitment and passion for the wellbeing of children, as well as leaders holding staff accountable.

The Goal:
To contribute to improved Household Resilience, Protection and Sustained Well-Being of 6,000,000 Children, especially the most vulnerable by 2020.

In the next strategic period (2016-2020) the four ministry strategic objectives for WVU are as outlined below:

I. Strategic Objective 1: To improve the health and nutrition status of 6,000,000 children 0-5 years, adolescents and women of reproductive age.

II. Strategic Objective 2: Improved livelihood resilience of 181,617 small-holder farmer and agropastoralist HHs and Youth, for economic empowerment by 2020 – “Farming as a business”

III. Strategic Objective 3: To improve the quality of education and life skills for 2,299,700 Children between 3 and 18 years.

IV. Strategic Objective 4: To contribute to improved Peace and Protection of 6,000,000 girls and boys from abuse, neglect, exploitation and other forms of violence.
Health and Nutrition

Although Uganda is making steady progress on improvement of child health, it has made limited progress on maternal mortality. Annual rates of reduction of under-5 mortality increased dramatically from 1.2% per year to 8.1% per year between 2006 and 2011 against a target of 10% reduction per year for MDG 4 (MDG Report, MoFPED, 2013).

Infant mortality rates followed a similar trend but Uganda’s neonatal mortality rates have remained largely stagnant. The country is off track for MDG 5 with maternal mortality reducing by a percentage decrease of 13.4% between 1995 and 2011 compared to the reduction of at least 75% needed to meet MDG 5 (MDG Report, MoFPED, 2013).

Poor nutrition accounts for 60% of deaths among children under-five years of age in Uganda with 14% of children being underweight and 33% stunted (UDHS, 2011). Micro-nutrient deficiencies also remain highly prevalent. Uganda has recently experienced a reversal in the gains made with regard to HIV prevention and control (UAIS, 2011).

While Uganda has strong policy frameworks for addressing maternal and child health and nutrition and HIV, there are still huge gaps in the way these frameworks are implemented.

The focus will be on systems strengthening for the elimination of maternal death and deaths of children under age of five in the areas where we work, improved child nutrition and zero HIV transmission of mother to child.
### 2.2 Strategic Objectives

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<th>Sub-Objectives</th>
<th>Key Performance Indicator(s)</th>
<th>Core Project Models</th>
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<tr>
<td><strong>1.1</strong> To increase access to and utilization of nutrition-sensitive prevention and rehabilitation services for children 0-5 years and their mothers</td>
<td>1.1.1 Prevalence of underweight in under five children</td>
<td>1 Timed and Targeted Counselling (ttC)</td>
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<td>1.1.2 Prevalence of wasting in under five children</td>
<td>2 Positive Deviance Hearth</td>
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<td>1.1.3 Prevalence of stunting</td>
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<td>1.1.4 Proportion of children 0-6 months who are exclusively breastfed</td>
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<td><strong>1.2</strong> To increase access to and utilization of basic RMNCH and HIV services for children and their families.</td>
<td>1.2.1 Proportion of mothers whose last delivery was attended by a skilled provider</td>
<td>1 Timed and targeted Counselling (ttC)</td>
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<td>1.2.2 Proportion of New-borns who received postnatal care within 48 hrs of birth</td>
<td>2 Channels of Hope</td>
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<td>1.2.3 Proportion of infants born to HIV infected women who started on antiretroviral therapy (ART) within two months of birth</td>
<td>3 Expanded Prevention Model</td>
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<td>1.2.4 Percentage of children aged 12-23 months who are fully immunized</td>
<td>4 Integrated Community Case Management (ICCM)</td>
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<td>1.2.5 Proportion of children 0-59 months with diarrhoea who received appropriate treatment</td>
<td>5 CVA</td>
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<td>1.2.6 Proportion of adolescents that report early sexual debut</td>
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<td><strong>1.3</strong> To improve household and institutional access to safe water, sanitation and uptake of good hygiene practices</td>
<td>1.3.1 Proportion of households with year-round access to sufficient safe water.</td>
<td>1 Timed and Targeted Counselling (ttC)</td>
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<td>1.3.2 Proportion of households with access to inclusive and sustainable sanitation facilities</td>
<td>2 CLTS</td>
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<td>1.3.3 Proportion of households with appropriate hand washing behaviours</td>
<td>3 Sanitation marketing</td>
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*No child dies before the age of five.*
*No maternal death.*
Household Resilience and Livelihoods

Most households in Uganda, particularly in the areas where World Vision Uganda works, depend on agriculture and agri-business for their livelihoods. Agriculture (including livestock) is a core sector for food security, income enhancement and employment for more than 80% of Uganda’s population (FAO, 2013), majority of whom (68%) are small scale farmers.

Subsistence agriculture and more specifically crop farming remains the main source of livelihoods for small-scale farmers. However, the subsistence farming practiced is weather dependent and given the current weather unpredictability, most households face challenges of absorbing and adapting to shocks.

The factors that account for weak households’ resilience include; low agricultural production and productivity; low value addition to agricultural produce and limited market access. In addition, the inadequate implementation of agricultural laws and policies and the weak public agricultural institutions undermine household resilience (MAAIF, 2010).

The result of this is that most households in Uganda do not consider smallholder farming as a business and this increases their vulnerabilities. In the next strategic period therefore, the focus will be on building household resilience including economic empowerment.
Increasing agricultural production, value addition and access to markets.

Farming is taken as a business.

**2.3 Strategic Objectives**

**Strategic Objective 2:** Improved livelihood resilience of 181,617 small-holder farmer, agro pastoralist HHs and Youth, for economic empowerment by 2020 – “Farming as a business”

**Contributing to two CWB Targets:**

- i. Target 1 Children report an increased level of well-being
- ii. Target 3 Increase in children who are well nourished (ages 0-5)

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<th>Key Performance Indicator(s)</th>
<th>Core Project Models</th>
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| 2.1 Improve food production and productivity for nutrition for targeted 181,617 HHs by 2020. | 2.1.1 Proportion of households with year-round access to sufficient food for the family’s needs  
2.1.2 Proportion of children with minimum dietary diversity score  
2.1.3 Proportion of women with minimum dietary diversity score | 1 Farmer Field Schools  
2 Local Value Chain Development  
3 Farmer Managed and Natural Regeneration (FMNR)  
4 Citizens Voice and Action (CVA)  
5 Water Resource Management. |
| 2.2 Improve income by 10% from selected agricultural enterprises for 181,617 targeted HHs and youth by 2020. | 2.2.1 Proportion of HH where one or more adults are earning an income from selected enterprise  
2.2.2 % of Parents or caregivers providing well for their Children  
2.2.3 Poverty Rate amongst targeted HHs as measured by Progress Out Of Poverty Index (PPI) | 1 Savings Groups using VSLA methodology  
2 Cash-based programming |
| 2.3 Improve natural resource base for sustainable livelihood for 181,617 HHs by 2020. | 2.3.1 Proportion of HHs adopting recommended Climate Smart’ and/or environmentally sound principles and practices | Early Warning/Early Action (EWEA) |
| 2.4 To improve households and institutional capacities to manage natural and man-made shocks and stress | 2.4.1 Proportion of HHs who faced a disaster and were able to recover and now live at the level they did before | 1 Community Disaster Preparedness Planning (CDPPs),  
2 Early Warning/Early Action (EWEA) |
World Vision Uganda – Food Assistance

Background

Lack of food normally leads to hunger which can weaken the immune systems and stunts children’s cognitive and physical development. According to the Uganda Demographic and Health Survey (UDHS), 19 percent of the Ugandan population was malnourished in 2006, and 38 percent of children under 5 were stunted. This prevalence means that about 2.3 million young children in Uganda today are chronically malnourished. In addition, 16 percent of children under 5 are underweight while 6 percent are wasted, and 12 percent of women are malnourished. Chronic hunger and undernutrition result primarily from poverty: people who are poor simply cannot afford to grow or purchase enough food. Without enough food, adults struggle to work and children struggle to learn, posing severe challenges to sustainable, long-term economic and social development.
Food Assistance fall within WV Uganda strategy Objective 1 which seeks to improve the health and nutrition status of 6,000,000 children 0-5 years, adolescents and women of reproductive age by 2020. The National Office strategy acknowledges that greater impact on the well-being of children can be achieved when the focus is on building household resilience that includes economic empowerment. Specifically food assistance will contribute towards attainment of the following Child Well-being targets:

- Target 1 - Children report an increased level of well-being.
- Target - Increase in children who are well nourished (ages 0-5).

When the food and livelihood security of households is affected by shocks, family members normally employ different types of coping mechanisms some of which compromise the nutrition security of children and women as well as affect productivity of adult members. In addition, poor families often sell some or all of their productive assets to raise money for food which weakens the ability of their livelihoods to recover.

Food assistance will be used as a tool to address the immediate hunger, and avert acute malnutrition for children and women, loss of productivity for adult population and loss of productive assets. Different Food Assistance models will be employed depending on the needs and food market context.

**Programming Models**

i. Emergency Food Assistance (General Food Distribution) - In cases where the food and livelihood security of families has been affected by shocks, World Vision will utilize food assistance in the form of General Food Distribution to address immediate hunger, and avert acute malnutrition for children, loss of productivity for adults and loss of productive assets.

ii. Supplementary Feeding - Supplementary feeding will be deployed to prevent and treat severe and acute malnutrition and avert stunting, wasting and death in children under the age of five where GAM and SAM rates far exceeds levels where regular food assistance will address. It will also be used to complement other maternal and child health intervention such micronutrient supplementation, immunization, de-worming, promotion and support for IYCF, and maternal nutrition and care, prevention and management of common illnesses, monitoring and surveillance. Supplementary feeding model will also be deployed to support treatment of chronic conditions such as HIV/AIDS patients in collaboration with Health facilities.

iii. Food for Education - Food for education will be implemented in context where household hunger and food insecurity undermines educational attainment. The model will be used to enhance school attendance and participation as good education is one of the key drivers to break the cycle of poverty for poor households.

iv. Food For works/ Assets - In relatively stable situations, food for asset will be used to support recovery of households emerging from shocks and stress to avoid a return to emergency phase. Moderate food-insecure households will be supported through Development Food Assistance to reduce immediate hunger while supporting longer term resilience development. Productive asset creation or vocational training catalysed by food assistance will be used to promote other resilience development models such as Farmer Managed Natural Regeneration (FMNR), Farmer Field Schools, Conservation Agriculture (CA), Soil and Water Conservation (SWC), Rain Water harvesting and Village Saving and Loan Association (VSLA).

v. Cash Transfer (CBP) - World Vision will substitute food with Cash transfers in early recovery context where markets are functional to support stabilisation efforts towards return and reintegration in case of displacement. Cash transfers provided to disaster affected communities expand their choices and achieve dignified life during and after displacement or shock. Cash transfers will also support households to rebuild their assets base replacing the losses communities incurred during flight or shock; stimulate the local markets and economy as well as help displaced communities to return to their normal livelihoods.
OKUMALAWO ENJALA

Oboaana bawulira bathyo nga enjala ebalu

Lumulum

Omwana enfala gwe

Lumo aba sunjira muki
Education

The introduction of Universal Primary Education (UPE) in Uganda has seen a surge in enrolment which has resulted in a Gross enrolment Ratio of 113% (F=113%, M=113%) and the Net enrolment Ratio of 92% (F=92%, M=92%) (EMIS 2013). There is however a big disparity between the primary school enrolment in grades 1 and 7, which points to the low survival rate for children in the education system in Uganda.

The other problem is the quality of education as shown in the UWEZO report of 2013 which shows that only 40% of children are able to read and write at P3 and P6. Building on the successes to-date and the on the fact that quality education is the prerequisite for achieving equity, the focus will be ensuring that children are able to read and write at all levels and that there is improved retention in schools.

The role of parents and family support for learning will also be an integral part of education programming.

The high school dropout rate and the high unemployment rate in Uganda demand the need for out of school programs. As a result the education programming will also include lifeskills.
## 2.4 Strategic Objectives

**Strategic Objective 3:** To improve the quality of education and life skills for 2,299,700 Children between 3 and 18 years by 2020

### Contributing to two CWB Targets;
- i. Target 1: Children report an increased level of well-being
- ii. Target 4: Increase in children who can read by age 11

<table>
<thead>
<tr>
<th>Sub-Objectives</th>
<th>Key Performance Indicator(s)</th>
<th>Core Project Models</th>
</tr>
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<tbody>
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<td>3.1 Improved literacy and numeracy for children of ages 6-11</td>
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<td>3.1.2 % of children who acquire numeracy functions and application skills by P6</td>
<td>Youth Ready for life skills</td>
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<tr>
<td>3.2 Increased essential life skills for children of 12-18 years</td>
<td>3.2.1 Proportion of adolescents who have a learning opportunity that leads to a productive life</td>
<td></td>
</tr>
<tr>
<td>3.3 Increased enrolment, retention and completion of basic education</td>
<td>3.3.1 Proportion of children (girls and boys) currently enrolled in and attending ECD centres</td>
<td>1. Child Friendly School model/2. The Safe School Model/Child friendly space</td>
</tr>
<tr>
<td></td>
<td>3.3.2 Proportion of parents and caregivers who promote reading readiness at home.</td>
<td></td>
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<tr>
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<td>3.3.3 Percentage reduction of drop out for girls and boys.</td>
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</tr>
<tr>
<td></td>
<td>Proportion of children who have completed basic education in a structured learning environment</td>
<td></td>
</tr>
<tr>
<td></td>
<td>3.3.4 Children currently enrolled in and attending a structured learning institution</td>
<td></td>
</tr>
</tbody>
</table>

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**All children read and write according to their age.**

**No child drops out of school.**
Peace and Child Protection

The 2013, Uganda Annual Crime Report showed that children continue to be vulnerable to abuse, neglect and exploitation. Child neglect, defilement and domestic violence were reported among the top 10 leading crimes in Uganda (Annual Crime Report 2013).

Child marriage continues to be a major problem with 12% of young girls getting married at 15 years of age while 57% are married by the age of 18 in Uganda (UNICEF 2014). On a sad note, the Adolescent Birth Rate is 156 per 1000 women (UDHS 2011, UNICEF 2012).

In rural areas, Children in rural areas are more affected by child marriage at 33.1% compared to their counterparts in the urban setting (UNICEF 2014). This makes child marriages one of the critical child protection issues in Uganda.

In Uganda, only 30% of the children are registered at birth and only 1 in every 5 children has a birth certificate (UNICEF 2014). Although government has ensured the legal framework to guide child protection programming is in place, implementation still remains a challenge.

This coupled with cultural norms that are harmful to children exacerbates the child abuse. The focus in this strategy will be the elimination of Child Marriage and that every child has a Birth Certificate.
### Strategic Objectives

**Strategic Objective 4:** To contribute to improved Peace and Protection of 6,000,000 girls and boys from abuse, neglect, exploitation and other forms of violence by 2020

#### Contributing to one CWB Target;

Children report an increased level of well-being

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<tr>
<th>Sub-Objectives</th>
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</table>
| 4.1 To empower children, youth and communities to prevent and respond to child sexual abuse, child marriage and other forms of violence against children. | 4.1.1 % of children and youth who feel that their community is a safe place  
4.1.2 % of girls and boys who have experienced sexual violence in the last 12 months  
4.1.3 % of girls or boys who are married or in union before age 18 yrs  
4.1.4 Proportion of children who feel that their community is a safe place  
4.1.5 Proportion of parents or caregivers who feel that their community is a safe place for children | 1. Child Protection and Advocacy (CPA)  
2. Community Change model;  
3. Reporting and Referral methodology;  
4. Homes Visitors model;  
5. Peace Road Curriculum Empowering children and Youth as Peace Builders (ECaP)  
6. Channels of Hope for CP, Gender and Barefoot  
7. Child Led DRR  
8. CVA  
9. Building Local Capacities for Peace  
10. Celebrating families |
| 4.2 To strengthen systems and structures for peace and protection of children | 4.2.1 % of children (0-18 years) with birth certificates disaggregated by age, sex and disability  
4.2.2 % of community members including boys and girls that feel confident that CP actors will take appropriate corrective and or punitive action against perpetrators of child abuse  
4.2.3 Formal and informal community structures identifying and responding to peace and conflict challenges and opportunities appropriately | 1. Citizens Voice and Action (CVA)  
2. CPA (Reporting and Referral methodology) |
| 4.3 To enhance capacity of children and youth for protection, peace and spiritual nurture | 4.3.1 % of children who grow in their awareness and experience of God’s love  
4.3.2 Proportion of caregivers who report that faith leaders participate in the promotion of child well-being activities in their community  
4.3.3 % of children who rank themselves as thriving on the ladder of life disaggregated by sex and disability  
4.3.4 % of children and youths groups who report taking action to strengthen protection from the main child protection risks in the community | 1. Empowering Children as Peace builders (ECaP)  
2. Peace Road Curriculum  
3. Basic DNH  
4. Integrating Peace Building and Conflict Sensitivity (IPACS)  
5. Community Change  
6. Channels of Hope |
### Target Beneficiaries for all WVU operational regions

<table>
<thead>
<tr>
<th>Target Beneficiaries</th>
<th>Health</th>
<th>Resilience and livelihood</th>
<th>Education</th>
<th>Peace and protection</th>
</tr>
</thead>
<tbody>
<tr>
<td>Boys and girls 0-59 months</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>Women of reproductive age (15-49 yrs)</td>
<td>✓</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Adolescent boys and girls</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>Orphans &amp; Vulnerable Children aged 0-18 yrs</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td></td>
</tr>
<tr>
<td>Parents and other caregivers such as grandparents</td>
<td>✓</td>
<td></td>
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</tr>
<tr>
<td>Organized small holder farmers (into strong producer groups/cooperatives)</td>
<td></td>
<td></td>
<td>✓</td>
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<tr>
<td>Agro-pastoralists</td>
<td></td>
<td></td>
<td>✓</td>
<td></td>
</tr>
<tr>
<td>Child headed households</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td></td>
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<tr>
<td>People Living with HIV/AIDS</td>
<td>✓</td>
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<td>✓</td>
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<tr>
<td>Disabled</td>
<td></td>
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<td>✓</td>
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<tr>
<td>Out of school youths</td>
<td>✓</td>
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<td>✓</td>
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</tbody>
</table>
## 3.0 Organisation Effectiveness

The organisation effectiveness objectives (OE) are organised under the four perspectives of the balanced scorecard: Funding and Donor Relations, Internal Processes, other Partners and Organisational Growth and Learning. They are key enablers and also strengthen WVU’s effectiveness, efficiency in pursuing sustainable CWBOs by 2020;

<table>
<thead>
<tr>
<th>Balanced Score Card Perspective</th>
<th>Strategic Objective</th>
<th>Key performance Indicators</th>
</tr>
</thead>
</table>
| Funding and Donor Relations     | Grow and diversify income | % growth grants portfolio  
% growth of local income  
% growth of annual budget (USD)  
% growth in revenues from gifts in Kind (GIK) |
| Internal Process                | Improve business processes to ensure efficiency, effectiveness and economy | % cost reduction in key business processes  
% improvement in turnaround time for key services  
Green GNOD score ratings on all KPIs  
Proportion of enterprise risks identified and mitigated within the required timelines  
Proportion of staff confirming that staff demonstrate Christian values at work place and in their personal lives |
|                                 | Strengthen results and accountability culture | Proportion of programmes consistently achieving acceptable monthly performance standard in Sponsorship.  
Proportion of programmes consistently tracking 100% of National level priority indicators |
|                                 | Position WVU as a highly performing organisation | Achieve staff engagement index target  
% of staff consistently achieving at least 90% of their key performance targets aligned to organisational priorities  
Proportion of staff completing talent management programme  
High performance retention rate |
| Other Partners                  | Strengthen mutual sustainable external engagements and partnerships | Proportion of key external and internal stakeholders aware of and able to articulate World Vision Work  
Proportion of coalitions and strategic partnerships in Health, Education, and Agriculture and Child protection sectors at National Level that WV is actively engaged in.  
Proportion of WVU programmes and sectors which demonstrate shared ownership and implementation with stakeholders/partners to deliver WV strategy.  
Number of partners with operational MOUs |
| Organizational growth and learning | Improved ability of staff to demonstrate and live out Christian values | Proportion of staff demonstrating Christian values at work place and in their personal lives  
% of capability building initiatives aligned to OCP  
Number of staff on disciplinary actions due to character issues  
Proportion of stakeholders who acknowledge that WVU is a Christian organisation and demonstrates Christian values in its work and engagements  
Number of publications in journals produced and shared |
|                                 | Strengthen corporate governance | Acceptable rating for the Board Critical Success Factors assessment  
Proportion of Board recommendations to Management that are related to NO Strategy implementation and performance, risk and critical emerging issues.  
Proportion of Board members that are leveraging their networks for resource mobilization and enhancing the ministry. |
### 4.0 Integration of ministry priorities, funding types and OE in different priority areas

<table>
<thead>
<tr>
<th>Ministry priorities</th>
<th>Health</th>
<th>Food security</th>
<th>Education</th>
<th>Child protection</th>
</tr>
</thead>
<tbody>
<tr>
<td>1) Maternal, Newborn and Child Health; 2) Maternal and Child nutrition; 3) HIV and AIDS; 4) WASH; 5) Adolescent Sexual and Reproductive health; 6) Advocacy</td>
<td>1) Crop and livestock production 2) Food security and nutrition especially among children under five and women of reproductive age 3) Economic development 4) Natural resource management; climate change adaptation; and disaster risk reduction 5) Advocacy 6) Household and Community empowerment</td>
<td>1) Enrolment and retention 1. 2) Literacy and numeracy 2. 3) Life skills</td>
<td>1) Prevention of harmful practices according to context (Sexual Abuse/Child marriage) 2) Life skills and resilience building for children and Adolescents; 3) Advocacy for Child Protection (Child Marriage and Child Sexual Abuse) 4) Children Protection in Emergencies (CPE); 5) Spiritual nurture of children; 6) Peace and Protection systems/structures for children</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Funding types/levels</th>
<th>Sponsorship; Grants; Private Non Sponsorship Funds; Government of Uganda funding; Private Sector financing and Gifts in Kind</th>
<th>Sponsorship, Private Non Sponsorship Funds, Grants, Resources In Kind, and Local Fund Raising,</th>
<th>Sponsorship; Grants; Private Non Sponsorship Funds; Governments Funding; Private Sector Financing and Resources in Kind</th>
<th>Sponsorship, Private Non Sponsorship Funds and Resources In Kind</th>
</tr>
</thead>
</table>

| OE dimension to be addressed | 1) External engagement and partner relations 2) Program quality and performance 3) Resource acquisition 4) Business processes and systems 5) Staff performance | 1) External engagement and partner relations – Ministry of Health, Ministry of Water and Environment, Technical Working Groups and Coalitions, Local Governments, NGOs, FBOs and CBOs. 2) Program quality and performance – ICT4D, M&E, MIS, Action Research and Innovations. 3) Business processes and systems – procurement and logistics 4) Staff performance – performance plans linked to program targets, recruitment and retention of technical staff | 1. Resource acquisition and mobilization for Children in Emergencies (CIE), Prevention, Protection and Response programming including advocacy 2. External engagement and partner relations - Ministry of Gender, Labor and Social Development; Child Protection Working Group and the related Thematic Groups, Child Protection Network and Coalitions, local governments, FBOs and CBOs. 3. Program quality and performance – M&E, Action research, Operations Research |
The 7 Steps Process

Core documents, Ministry Framework, Theory of Change and PMRA (Portfolio Management and Resource Allocation) filtered through the region

Partnership Strategy
Health and Nutrition

Technical Program

Sustained improvement in health and nutrition status for children and women of reproductive age in Uganda

- Reduced child and maternal under nutrition
- Reduced maternal, newborn and child morbidity
- Reduced risky behaviours among adolescents

Pathway of Change

- Improved access to basic, integrated health services and increased health seeking behavior among children aged 0 – 5 years, adolescents and women of reproductive age.
- Transformed attitudes and practices for sustainable behavior change (Demand)
- Improved delivery of quality and accessible health services at all levels (Supply)

Promising Practices

- Individual and household level mobilization and participation
- Improved local and national level partnerships for social accountability

Standard Indicators

- Under five mortality rate
- Maternal mortality ratio
- Prevalence of underweight in under five children
- Proportion of mothers whose last delivery was attended by a skilled provider
- Proportion of newborns who received postnatal care within 48 hours of birth
- Proportion of children aged 12-23 months who are fully immunized
- Proportion of adolescents who report early sexual debut
- Maternal and Child nutrition
- Essential RMNCH services
- WASH

Assumptions: Strategic coordination & integration, GoU ownership, Monitoring & Evaluation, Research and Innovation, community ownership

Partnerships:
- Government, Private Sector, NGOs, FBOs, communities.

UDHS

- Nutrition surveys
- Caregiver Surveys
- Youth Behavior surveys

Target Locations

- Kabale
- Kiboga
- Kyenyo
- Hoima
- Bulisa
- Bundibugyo
- Kumi
- Kibale
- Koboko
- Anka
- Kole
- Oyem
- Kiboga
- Rukungiri
- Rusinga
- Masale
- Butaleja
- Mpigi

Kabale
Kiboga
Kyeno
Hoima
Bulisa
Bundibugyo
Kumi
Kibale
Koboko
Anka
Kole
Oyem
Kiboga
Rukungiri
Rusinga
Masale
Butaleja
Mpigi
Household Resilience and Livelihoods Technical Approach

**Improved livelihood resilience of 181,617 small-holder farmer, agro pastoralist HHs and Youth, for economic empowerment by 2020**

"Farming as a business"

- HHs and Youth adopt and leverage change to develop sustainable economic wellbeing
- EE and Nutrition Security
- HH production capacity
- HHs and communities value, conserve their natural environment
- Communities capacity to resolve resource based conflicts
- HH capacity to respond and recover from disaster shocks
- HH and HHs and Youth access to income
- HH access to productive assets
- HH access to markets
- Community maintain healthy, safe, hopeful and nurturing environment
- HHs and Youth access to income
- Gender
- Disability
- Child protection and participation
- Environment
- Peace building

**Impact level**
- Progress out of Poverty Index (PPI)
- Proportion of Parents or caregivers provide well for their boys and girls

**Outcome level**
- Proportion of HHs with year-round access to sufficient food for their family's needs
- Proportion of women and children with minimum dietary diversity score
- Proportion of HH where one or more adults are earning an income from select agricultural enterprises
- Proportion of HHs using appropriate climate smart and environmental sound practices
- Proportion of households who employ appropriate coping strategy(s) in time of emergencies and / or other shocks

**Tools**
- Progress out of Poverty Index
- Caregiver Survey
- HH Food insecurity Access Scale
- Dietary Diversity Score
- Caregiver Survey

**Goal/Outcome**

**Livelihoods Zones**

- Economic Empowerment interventions
- Food for nutrition interventions
- NRM interventions
- DRRM interventions
**WORLD VISION UGANDA STRATEGY 2016 - 2020**

**Education and life skills**

**Technical Program**

- Improved quality of education resilience of 2,299,700 children aged 3-18 years

**Impact level**
- Improved skills for children
- Increased retention for children

**Outcome level**
- Improved literacy and numeracy for children aged 6-12 years
- Increased life skills for children aged 13-18 years
- Increased retention and completion of basic education

**TARGET LOCATIONS**

- **Northern Region**
  - Improved literacy and numeracy
  - Improved retention and completion
  - Increased life skills from 13-18 year old

- **Central Region**
  - Improved literacy and numeracy
  - Improved retention and completion
  - Increased life skills from 13-18 year old

- **Mid West Region**
  - Improved literacy and numeracy
  - Improved retention and completion
  - Increased life skills from 13-18 year old

- **Eastern Region**
  - Improved literacy and numeracy
  - Improved retention and completion
  - Increased life skills from 13-18 year old

- **Southern Region**
  - Improved literacy and numeracy
  - Improved retention and completion
  - Increased life skills from 13-18 year old

- **Semi pastoral**
  - Improved literacy and numeracy
  - Improved retention and completion
  - Increased life skills from 13-18 year old

**PATHWAY OF CHANGE**

- Improved literacy and numeracy skills for children aged 6-12 years
- Increased life skills for children aged 13-18 years
- Improved retention and completion of basic education

**PROMISING PRACTICES**

- Learning Roots, SIP, CVA, EGR, SCALE
- School community accountability for literacy
- Increased parents involvement in ECD activities

**STANDARD INDICATORS**

- EGRA/numeracy tool
- EMIS
- EGRA/numeracy tool
- DAP tool
- EMIS

**Core:**
- Empowering, Equipping and advocating
- Measure, document and scale up
- Addressing barriers to access through inclusive WASH, life skills, Youth Ready
- School community accountability for literacy

**Tools**

- EGRA and FLAT
- EMIS
- EGRA/numeracy tool
- DAP tool
- EMIS
Peace and Child Protection Technical Approach

To contribute to improved Peace and Protection of 6,000,000 girls and boys from abuse, neglect, exploitation and other forms of violence

**Pathway of Change**
- Youth, communities prevent and respond to child sexual abuse, child marriage and other forms of violence
- Capacity of communities and institutions for peace and spiritual nurture of children
- Effective CP policies & practices
- Prevention of harmful practices
- Community-based Monitoring
- Life skills and resilience building
- Children Protection in Emergencies (CPIE)
- CP committees
- Policy actors’ skills
- Peace building and conflict resolution

**Promising Practices**
- Peace Road Curriculum
- Community Change model
- Child-friendly Spaces (CFS)
- Homes Visitors model
- CP Committees
- Reporting and Referral methodology
- Civil Society Organizations (CSOs)

**Comprehensive Indicators**
- Proportion of Households that report a reduction in harmful practices such as child marriage and sexual abuse
- Proportion of children’s groups that are functional (e.g., children’s parliaments children’s clubs, children’s committees, etc) and children can articulate their impact on child wellbeing
- Proportion of community engagements that have resulted in improved child protection services
- Percentage of children aged 0-59 months with a birth certificate
- Proportion of youth who rank themselves as thriving on the ladder of life
- Proportion of functional sub county child protection structures preventing and managing child abuse incidents appropriately, disaggregated by type (formal e.g., OVC Committee or informal e.g., child protection committee)
- Proportion of communities that are conflict sensitive and know how to build peace
- Proportion of children in target communities who have an understanding of peace and awareness of God
- Proportion of communities that know the early warning signs and know what to do in case of conflict, emergency or disaster

**Goal/Outcome**
1. Children cared for in a loving, safe, family and community environment with safe places to play
2. Children are respected participants in decisions that affect their lives
3. Children celebrated and registered at birth
4. Children grow in their awareness and experience of God’s love in an environment that recognizes their freedom

**Protection = 18 ADPs**
- Buikwe, Bullisa, Busia Municipal, Busiriiba, Kalongo, Kamwenge, Kasitu, KIMU, Kizirianfumbi, Kyabigambire, Nabiswera, Ngogwe, North Rukiga, Ntwetwe, Kiryanga, Aber, Kitgum, Kachonga
## Strategic Objectives

### Strategic Objective 1: To improve the health and nutrition status of 6,000,000 children 0-5 years, adolescents and women of reproductive age by 2020

**Contributing to two CWB Targets:**

i. Target 2 Increase in children protected from infection and disease (ages 0-5)

ii. Target 3 Increase in children who are well nourished (ages 0-5)

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</table>
| **1.1** To increase access to and utilization of nutrition-sensitive prevention and rehabilitation services for children 0-5 years and their mothers | 1.1.1 Prevalence of underweight in under five children  
1.1.2 Prevalence of wasting in under five children  
1.1.3 Prevalence of stunting  
1.1.4 Proportion of children 0-6 months who are exclusively breastfed | 1 Timed and Targeted Counselling (ttC)  
2 Positive Deviance Hearth |
| **1.2** To increase access to and utilization of basic RMNCH and HIV services for children and their families. | 1.2.1 Proportion of mothers whose last delivery was attended by a skilled provider  
1.2.2 Proportion of New-borns who received postnatal care within 48 hrs of birth  
1.2.3 Proportion of infants born to HIV infected women who started on antiretroviral therapy (ART) within two months of birth  
1.2.4 Percentage of children aged 12-23 months who are fully immunized  
1.2.5 Proportion of children 0-59 months with diarrhoea who received appropriate treatment  
1.2.6 Proportion of adolescents that report early sexual debut | 1 Timed and targeted Counselling (ttC)  
2 Channels of Hope  
3 Expanded Prevention Model  
4 Integrated Community Case Management (ICCM)  
5 CVA |
| **1.3** To improve household and institutional access to safe water, sanitation and uptake of good hygiene practices | 1.3.1 Proportion of households with year-round access to sufficient safe water.  
1.3.2 Proportion of households with access to inclusive and sustainable sanitation facilities  
1.3.3 Proportion of households with appropriate hand washing behaviours | 1 Timed and Targeted Counselling (ttC)  
2 CLTS  
3 Sanitation marketing |

### Strategic Objective 2: Improved livelihood resilience of 181,617 small-holder farmer, agro pastoralist HHs and Youth, for economic empowerment by 2020 – “Farming as a business”

**Contributing to two CWB Targets:**

i. Target 1 Children report an increased level of well-being  
ii. Target 3 Increase in children who are well nourished (ages 0-5)

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</table>
| **2.1** Improve food production and productivity for nutrition for targeted 181,617 HHs by 2020. | 2.1.1 Proportion of households with year-round access to sufficient food for the family’s needs  
2.1.2 Proportion of children with minimum dietary diversity score  
2.1.3 Proportion of women with minimum dietary diversity score | 1 Farmer Field Schools  
2 Local Value Chain Development  
3 Farmer Managed and Natural Regeneration (FMNR)  
4 Citizens Voice and Action (CVA)  
5 Water Resource Management |
| **2.2** Improve income by 10% from selected agricultural enterprises for 181,617 targeted HHs and youth by 2020. | 2.2.1 Proportion of HH where one or more adults are earning an income from selected enterprise  
2.2.2 % of Parents or caregivers providing well for their children  
2.2.3 Poverty Rate amongst targeted HHs as measured by Progress Out Of Poverty Index (PPI) | 1 Savings Groups using VSLA methodology  
2 Cash-based programming |
| **2.3** Improve natural resource base for sustainable livelihood for 181,617 HHs by 2020. | 2.3.1 Proportion of HHs adopting recommended Climate Smart’ and/or environmentally sound principles and practices | Early Warning/Early Action (EWEA) |
| **2.4** To improve households and institutional capacities to manage natural and man-made shocks and stress | 2.4.1 Proportion of HHs who faced a disaster and were able to recover and now live at the level they did before | 1 Community Disaster Preparedness Planning (CDPPs)  
2 Early Warning/Early Action (EWEA) |
Strategic Objective 3: To improve the quality of education and life skills for 2,299,700 Children between 3 and 18 years by 2020

Contributing to two CWB Targets;
   i. Target 1 Children report an increased level of well-being
   ii. Target 4 Increase in children who can read by age 11

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<td>3.3 Increased enrolment, retention and completion of basic education</td>
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<td>3.3.2 Proportion of parents and caregivers who promote reading readiness at home.</td>
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<td>3.3.3 Percentage reduction of drop out for girls and boys.</td>
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</tr>
<tr>
<td></td>
<td>Proportion of children who have completed basic education in a structured learning environment</td>
<td></td>
</tr>
<tr>
<td></td>
<td>3.3.4 Children currently enrolled in and attending a structured learning institution</td>
<td></td>
</tr>
</tbody>
</table>

Strategic Objective 4: To contribute to improved Peace and Protection of 6,000,000 girls and boys from abuse, neglect, exploitation and other forms of violence by 2020

Contributing to one CWB Target; Children report an increased level of well-being

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<th>Core Project Models</th>
</tr>
</thead>
<tbody>
<tr>
<td>4.1 To empower children, youth and communities to prevent and respond to child sexual abuse, child marriage and other forms of violence against children.</td>
<td>4.1.1 % of children and youth who feel that their community is a safe place</td>
<td>1. Child Protection and Advocacy (CPA)</td>
</tr>
<tr>
<td></td>
<td>4.1.2 % of girls and boys who have experienced sexual violence in the last 12 months</td>
<td>2. Community Change model;</td>
</tr>
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<td></td>
<td>4.1.3 % of girls or boys who are married or in union before age 18 yrs</td>
<td>3. Reporting and Referral methodology;</td>
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<td>4.1.4 Proportion of children who feel that their community is a safe place</td>
<td>4. Homes Visitors model;</td>
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<td></td>
<td>4.1.5 Proportion of parents or caregivers who feel that their community is a safe place for children</td>
<td>5. Peace Road Curriculum Empowering children and Youth as Peace Builders (ECaP)</td>
</tr>
<tr>
<td>4.2 To strengthen systems and structures for peace and protection of children</td>
<td>4.2.1 % of children (0-18 years) with birth certificates disaggregated by age, sex and disability</td>
<td>6. Channels of Hope for CP, Gender and Barefoot</td>
</tr>
<tr>
<td></td>
<td>4.2.2 % of community members including boys and girls that feel confident that CP actors will take appropriate corrective and or punitive action against perpetrators of child abuse</td>
<td>7. Child Led DRR</td>
</tr>
<tr>
<td></td>
<td>4.2.3 Formal and informal community structures identifying and responding to peace and conflict challenges and opportunities appropriately</td>
<td>8. CVA</td>
</tr>
<tr>
<td>4.3 To enhance capacity of children and youth for protection, peace and spiritual nurture</td>
<td>4.3.1 % of children who grow in their awareness and experience of God’s love</td>
<td>9. Building Local Capacities for Peace</td>
</tr>
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<td>4.3.2 Proportion of caregivers who report that faith leaders participate in the promotion of child well-being activities in their community</td>
<td>10. Celebrating families</td>
</tr>
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<td>4.3.3 % of children who rank themselves as thriving on the ladder of life disaggregated by sex and disability</td>
<td></td>
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<tr>
<td></td>
<td>4.3.4 % of children and youths groups who report taking action to strengthen protection from the main child protection risks in the community</td>
<td></td>
</tr>
<tr>
<td>No</td>
<td>Terminology</td>
<td>Definition/description</td>
</tr>
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<td>-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>1.</td>
<td>Area Development Program (ADP)</td>
<td>It is a distinct geographical area where WV partners with local stakeholders to improve the well-being of children through multiple sector projects aimed at tackling the root causes of issues that negatively impact children.</td>
</tr>
<tr>
<td>2.</td>
<td>Channels of Hope (CoH)</td>
<td>An interactive mobilization and transformational process that engages community and faith leaders on Child Protection, HIV, Maternal Newborn &amp; Child Health and Gender.</td>
</tr>
<tr>
<td>3.</td>
<td>Child Protection and Advocacy (CPA) model</td>
<td>Is a set of specific interventions that focus on strengthening the child protection system (both formal and informal elements) at the community level.</td>
</tr>
<tr>
<td>4.</td>
<td>Child Protection System</td>
<td>Is a set of formal and informal elements working together to prevent and respond to abuse, neglect, exploitation and all other forms of violence against children.</td>
</tr>
<tr>
<td>5.</td>
<td>Child Participation</td>
<td>Is when children under 18 years of age contribute to decisions and take action on issues that affect their lives.</td>
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<tr>
<td>6.</td>
<td>Child Safe Organization</td>
<td>An organization that is committed to being safe for children.</td>
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<tr>
<td>7.</td>
<td>Child Friendly School Model</td>
<td>Educational environment that is safe, healthy and protective to children, endowed with trained teachers, adequate resources and appropriate physical, emotional and social conditions for learning.</td>
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<tr>
<td>8.</td>
<td>Child Friendly Spaces</td>
<td>Are safe places within a disaster-affected community where children’s unique needs can be met.</td>
</tr>
<tr>
<td>9.</td>
<td>Child Protection</td>
<td>All measures taken to prevent and respond to exploitation, neglect, abuse, and all other forms of violence against children.</td>
</tr>
<tr>
<td>10.</td>
<td>Child Well Being Outcomes</td>
<td>Child Wellbeing Outcomes define the impact World Vision would like to see in children as a result of the various programming interventions. These are; Children are educated for life, Children enjoy good health, Children are cared for, protected and participating and Children love God and Neighbor</td>
</tr>
<tr>
<td>11.</td>
<td>Citizen Voice and Action (CVA)</td>
<td>World Vision approach through which communities where world vision works are engaged and participate in influencing quality of service delivery by involving themselves in the supervision of services and holding duty bearers accountable to the set standards and policies.</td>
</tr>
<tr>
<td>12.</td>
<td>Climate Change Adaptation</td>
<td>Is defined as an adjustment in natural or human systems to actual or expected climatic stimuli or their effects, in order to moderate harm or exploit beneficial opportunities.</td>
</tr>
<tr>
<td>13.</td>
<td>Clusters</td>
<td>Cluster, for the purpose of this strategy, can be defined as a shared management and functional/technical hub that serves several Area Development Programs and provides services that would otherwise be provided by each Area Development Program separately. It does not imply that several Area Development Programs are combined into one, but rather that some duplicate activities are consolidated into one location for efficiency, cost saving and better coordination.</td>
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<tr>
<td>14.</td>
<td>Community Methodology Change</td>
<td>Is a community development approach that uses a series of tools and methods to facilitate community discussions about the social and cultural norms that underlie their development process.</td>
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<tr>
<td>15.</td>
<td>Community Led Total Sanitation</td>
<td>Community Led Total Sanitation (CLTS) is an innovative methodology for mobilizing communities to completely eliminate open defecation (OD). Communities are facilitated to conduct their own appraisal and analysis of open defecation (OD) and take their own action to become ODF (Open Defecation Free).</td>
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<td>16.</td>
<td>Disaster Risk Reduction</td>
<td>The concept and practice of reducing disaster risks through systematic efforts to analyze and manage the causal factors of disasters, including through reduced exposure to hazards, lessened vulnerability of people and property, wise management of land and the environment, and improved preparedness for adverse events.</td>
</tr>
<tr>
<td>17.</td>
<td>Disaster Risk Reduction Plan</td>
<td>A plan detailing activities and measures taken before hazard events occur; these include early warning, evacuation, mitigation and effective response in the event of occurrence.</td>
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<tr>
<td>18.</td>
<td>Expanded Prevention Model</td>
<td>EPM is an important vehicle for primary prevention of HIV and STIs as well as prevention of unplanned pregnancies. WV uses appropriate curricula and training manuals for in- and out-of-school children and youth to provide young people with reproductive health information and healthy problem-solving, decision making and communication skills, including how to prevent HIV infection and transmission.</td>
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<tr>
<td>19.</td>
<td>Exploitation:</td>
<td>The use of a child for the benefit of others. This includes, but is not limited to, child labour and sexual exploitation. Sexual exploitation targets children through an abuse of power or trust for sexual purposes; examples include child prostitution, child pornography and the trafficking of children for sexual abuse.</td>
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<tr>
<td>20.</td>
<td>Farming as a business</td>
<td>Farming as a business means farming for profit and in this strategy this will be realized by focusing on selected agricultural value chains, mobilizing organizing, and strengthening small holder farmer groups into business groups/cooperatives (rural producer cooperatives, marketing cooperatives, Savings groups/Savings and Credit Cooperatives) for bulking their produce, value addition, collective marketing and bulk purchase of inputs. The contribution of other organizations will be greatly recognized and a public private partnership approach will be adopted to ensure sustainability and long-term impact</td>
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<tr>
<td>21.</td>
<td>Farmer Managed Natural Regeneration</td>
<td>This is based on the regeneration of native trees and shrubs from mature root systems of previously cleared desert shrubs and trees. Regeneration techniques are used in agricultural cropland and to manage trees as part of a farm enterprise. By selectively protecting and pruning a number of these saplings in the fields, they regenerate into trees rapidly and provide a sustainable timber supply. Fallen leaves provide nutrients and offer moisture retention to the exhausted soils. Other benefits include their use as animal fodder, for wild foods and medicines, and as a harbor for birds and lizards that feed on crop pests.</td>
</tr>
<tr>
<td>22.</td>
<td>Gifts in Kind</td>
<td>Gifts-in-Kind (GIK) are strategic and well integrated resource that World Vision receives from the donors in Kind and are used to contribute to the achievement of our child wellbeing aspirations within ADPs and other programs</td>
</tr>
<tr>
<td>23.</td>
<td>Household Resilience</td>
<td>Capacity of household to anticipate, absorb, and recover from hazards and/or effects of climate change and other shocks and stresses without its long-term prospects.</td>
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<tr>
<td>24.</td>
<td>Integrated Community Case Management</td>
<td>Integrated Community Case Management (iCCM) is a strategy to extend case management of childhood illness beyond health facilities so that more children have access to lifesaving treatments. The iCCM package can differ based on particular contexts, but most commonly include diarrhea, pneumonia and malaria.</td>
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<td>25.</td>
<td><strong>Livelihood</strong></td>
<td>Activities and strategies that target farming families undertake and use in pursuit of a decent living and have a good quality of life given the environmental context and resources at their disposal. In this strategy, agriculture is the main livelihood activity and the economy of the districts where we operate depends on it.</td>
</tr>
<tr>
<td>26.</td>
<td><strong>Maternal Mortality Ratio</strong></td>
<td>The number of women who die as a result of pregnancy and childbirth complications per 100,000 live births in a given year.</td>
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<tr>
<td>27.</td>
<td><strong>Most Vulnerable Children</strong></td>
<td>Children whose quality of life and ability to fulfill their potential is most affected by extreme deprivation and violations of their rights. These children often live in catastrophic situations and relationships characterized by violence, abuse, neglect, exploitation, exclusion, and discrimination.</td>
</tr>
<tr>
<td>28.</td>
<td><strong>Neonatal Mortality Rate</strong></td>
<td>The number of deaths of infants under 28 days of age in a given year per 1,000 live births in that year.</td>
</tr>
<tr>
<td>29.</td>
<td><strong>Peace Road Curriculum</strong></td>
<td>Peace Road Curriculum is an approach that aims at mobilizing, training and empowering children and youth to develop their skills and character as peace builders. Using ECaP, children learn to reach beyond their comfort zone with others who are different from them and organize themselves to have an impact on their own families, communities and governing authorities. They experience and lead activities that enhance tolerance, develop mutual respect and contribute towards a more peaceful and just community.</td>
</tr>
<tr>
<td>30.</td>
<td><strong>Positive Deviance Hearth</strong></td>
<td>Positive Deviance Hearth is a community-based rehabilitation and behavior change intervention for families with underweight preschool children. The ‘positive deviance’ approach is used to identify behaviors practiced by the mothers or caretakers of well-nourished children from poor families and to transfer such positive practices to others in the community with malnourished children. The ‘Hearth’ or home is the location for the nutrition education and rehabilitation sessions.</td>
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<tr>
<td>31.</td>
<td><strong>School Community Accountability for Learning</strong></td>
<td>This is a World Vision Uganda Model of increasing community action for literacy both at school and at home. It creates a linkage between the home, community and the school to support processes that help children to read and write.</td>
</tr>
<tr>
<td>32.</td>
<td><strong>TEECAP Culture</strong></td>
<td>World Vision Uganda defined an enabling organizational culture of Teamwork, Excellence in Execution, Commitment, Accountability and Passion</td>
</tr>
<tr>
<td>33.</td>
<td><strong>Timed and targeted counseling</strong></td>
<td>Timed and targeted counseling (ttC) refers to a community based health model integrating MNCH, HIV, Nutrition and WASH and aimed at extending primary health care BCC counseling using a dialogue approach to the household level through the 1000 days critical window of opportunity. (This is the period from conception to when the child is two years)</td>
</tr>
<tr>
<td>34.</td>
<td><strong>Under 5 (U5) Child Mortality</strong></td>
<td>Probability of dying between birth and exactly five years of age expressed per 1,000 live births.</td>
</tr>
<tr>
<td>35.</td>
<td><strong>Underweight</strong></td>
<td>Low weight for age defined as below minus two standard deviations from median weight for age of reference population (moderate) or below minus three standard deviations from median weight for age of reference population (severe)</td>
</tr>
<tr>
<td>36.</td>
<td><strong>Violence</strong></td>
<td>The use or threat of physical force or power that harms a child. Although abuse, neglect and exploitation are forms of ‘violence’ it is included as a separate category in order to address additional threats from which children need to be protected, including gang violence, bullying, harassment and playground violence.</td>
</tr>
<tr>
<td>37.</td>
<td><strong>Wasting</strong></td>
<td>Low weight for height defined as below minus two standard deviations from median weight for height of reference population.</td>
</tr>
</tbody>
</table>
Vision:
Our vision for every child, life in all its fullness; Our prayer for every heart, the will to make it so.

Mission:
Our mission is to follow our Lord and Savior Jesus Christ in working with the poor and oppressed to promote human transformation, seek justice and bear witness to the good news of the Kingdom of God.

Core Values:
We are Christian
In the abundance of God’s love, we find our call to serve others.

We are committed to the poor
We are called to relieve their need and suffering, engaging a relationship between the poor and the affluent.

We value people
We regard all people as created and loved by God, each with a unique claim to dignity, respect and intrinsic worth.

We are stewards
We are faithful to the purpose for which we receive resources and manage them in a manner that brings maximum benefits to the poor.

We are partners
As members of the World Vision partnership, we accept the obligation of joint partnership, shared goals and mutual accountability.

We are responsive
We are responsive to life threatening emergencies as well as complex social economic situations requiring long-term development.

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