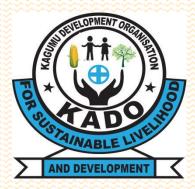
KAGUMU DEVELOPMENT ORGANIZATION (KADO)



STRATEGIC PLAN 2022/2023 – 2026/2027

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VISION:

A self-reliant and sustainable community

MISSION:

To improve the lives of communities by empowering them to participate in social and economic development initiatives

ORGANIZATION OBJECTIVES

- 1. To improve health care service delivery and systems strengthening
- 2. To contribute to increased food security and nutrition among malnourished households
- 3. To promote education of adolescent girls and young women (AGYW)
- 4. To contribute to increased household incomes of most the vulnerable households
- 5. To promote environment preservation, conservation and mitigate the impact of climate.
- 6. To promote Water sanitation and Hygiene among vulnerable Communities.

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LIST OF ABBREVIATIONS

AIDS Acquired Immune Deficiency Syndrome

ART Antiretroviral Therapy

CSO Civil Society Organization

IRS Insecticide Residual Spraying

HIV Human Immune-deficiency Virus

HH Households

KADO Kagumu Development Organization

SP Strategic Plan

LLIN Long Lasting Insecticide Treated Nets

NDP II National Development Plan II

OVC Orphan and Vulnerable Children

PEAP Poverty Eradication Action Plan

PLHIV Persons Living with HIV

SDGs Sustainable Development Goals

UAIS Uganda AIDS Indicator Survey

UDHS Uganda Demographic and Health Survey

UNAIDS Joint United Nations Program for HIV and AIDS

MOH Ministry of health

FORWARD

This document is KADO'S Vision of operations to improve the livelihood, house hold incomes and the quality of life of communities in Uganda particular in eastern and northern regions of Uganda for the financial year 2022/2023 to 2026/2027. It is the participatory product of members and personnel in relation to its mission, Vision and objectives after thorough review of the previous plan 2016/2017 to 2021/2022, citing achievements and challenges.

KADO is here by seeking support from various partners, individual members and member groups to effectively and efficiently support the implementation of this plan. In this document we present a detailed background of KADO, strength, opportunities, weakness and opportunities, target beneficiaries, guiding principles, operational arrangement, financial plan budget and work plan.

In this strategic plan we have put emphases on enhancing health service delivery, food security and nutrition management, economic support, environmental conservation and preservation, providing support to marginalized community members, strengthening the institutional capacity of the major actors to play a central role in the programmes and addressing raising awareness on some cross cutting issues.

This plan will also provide a clear frame work that will guide all stakeholders to the development programmes in the period. The interventions suggested in this document have been well thought out and carefully articulated to ensure that integrated and holistic approaches as out lined in the Second National Development Plan III 2021/2022- 2024/2025

Further thank the staff and the members who generated the ideas to simulate this strategic plan.

Dr Isabirye Daniel Fredrick

Chairman Board of Directors

ACKNOWLEDGEMENTS

The Board of Directors and staff of Kagumu Development Organization acknowledge appreciate the government of Uganda for the enabling environment that facilitated completion of 2016/ to 2021/2022 strategic plan, the district local governments and the partners for the enabling policies that enabled the realization of programme results result.

It is therefore, an appeal to development partners to come to the rescue by providing support both financially and materially to facilitate the implementation of this strategic plan intervention as this contribution to the realization to some of the objectives the National Development II1 2021/2022- 2024/2025 and vision 2040.

Namwoyo Samson

Executive Director

INTRODUCTION

Uganda remains committed to the pursuit of socio-economic transformation as envisioned in the country's long-term aspirations through the implementation of the third National Development Plan (NDPIII), whose goal is "Increased household incomes and improved quality of life",. This goal is to be achieved under the overall theme of "Sustainable Industrialization for inclusive growth, employment and sustainable wealth creation". This is in line with Uganda Vision 2040, EAC Vision 2050, Africa Agenda 2063 and the Sustainable Development Goals (SDGs).

Kagumu Development Organization (KADO) therefore, formulated this strategic plan 2022-2027 to contribute to the realization of the 2021-2022 to 2024-2025 third Uganda National Development Plan (NDPIII) goal and objectives.

SITUATION ANALYSIS

About 9.2% of the world, or 689 million people, live in extreme poverty on less than \$1.90 a day, according to the World Bank. In the United States, 10.5% of the population — 34 million people — live in poverty as of 2019. The proportion of people living on less than \$1.90 a day jumped from 2.3 per cent last year to 2.9 per cent in 2021, while the debt burden of countries increased amid slow economic recovery, shrinking fiscal space and weak resource mobilization.

Uganda 2020 population is estimated at 45,741,007 people at midyear according to UN data. Uganda population is equivalent to 0.59% of the total world population. Uganda ranks number 31 in the list of countries (and dependencies) by population. The population density in Uganda is 229 per Km² (593 people per mi²).

Uganda's population is expected to surpass 100 million people by 2050 and reached 167 million people by the end of the century. By 2100, Uganda's population is expected to surpass that of <u>Egypt</u>, the second-largest country by population currently in Africa

Uganda's population growth rate is currently 3.32%. The growth rate has remained around 3% for the past several decades in Uganda. This is influenced heavily by the

country's fertility rate of 4.78 births per woman. At this growth, over 1 million people are added to the population each year.

Uganda's rapid population growth is a cause for concern. Issues cited include rapid urbanization, poor waste management, high poverty, unemployment, environmental degradation, inadequate information.

HEALTH SERVICE DELIVERY AND HEALTH SYSTEMS STRENGTHENING

Uganda's burden of disease is dominated by communicable diseases, which account for over 50% of morbidity and mortality. Malaria, HIV/AIDS, TB, and respiratory, diarrheal, epidemic-prone and vaccine-preventable diseases are the leading causes of illness and death. There is also a growing burden of non-communicable diseases (NCDs) including mental health disorders. Maternal and prenatal conditions also contribute to the high mortality. Neglected Tropical Diseases (NTDs) remain a big problem in the country affecting mainly rural poor communities. Furthermore, there are wide disparities in health status across the country, closely linked to underlying socioeconomic, gender and geographical disparities:

Inadequate Human Resource for Health

The major challenges affecting the health system are the lack of resources to recruit, deploy, motivate and retain human resources for health, particularly in remote localities; ensuring quality of the healthcare services delivered; ensuring reliability of health information in terms of the quality, timeliness and completeness of data; and reducing stock-out of essential/tracer medicines and medical supplies. Tuberculosis is among the top five causes of death in Uganda. .

MALARIA:

Uganda's population currently stands at 44 million people with 95 percent of them at risk for malaria. Plasmodium falciparum is the parasite causing malaria in 97 percent of cases (Malaria Indicator Survey (MIS) 2018–2019).

Significant progress has been made in the scale-up of evidence-based malaria interventions in Uganda, leading to a substantial impact on malaria morbidity and mortality. Between 2009 and 2018–2019, insecticide-treated net (ITN) ownership

increased from 47 percent to 83 percent, ITN use in children under five years of age. Children who receive the appropriate treatment for malaria, an artemisin combination therapy (ACT), increased from 39 percent to 88 percent. As a result, malaria prevalence in children under five decreased from 45 percent in 2009 to 9 percent in 2018–2019, and child mortality decreased from 128 deaths per 1,000 live births in 2006 to 64 in 2016. However, these achievements are not uniformly seen across the country, with the East, North and Western Uganda carrying the highest malaria burden

HIV/AIDS AND TB

Uganda has made strides in the fight against HIV lowering prevalence from 18% in the early 1990s to 6.2% in 2019 (UPHIA 2019). However, there is still great need to scale up prevention efforts targeting adolescents and young people and key populations in order to achieve the country's commitment of ending HIV/AIDS as a public health threat by 2030 (President First track Initiative 2017). HIV prevalence is remarkably high among adult women and adolescent girls at 7.6% and 3.3% as compared to adult men and adolescent boys whose prevalence is at 4.7% and 0.8% respectively (UPHIA 2019).

Comprehensive knowledge about modes of HIV transmission and prevention is still low standing at 48% among women and 49% among men 15-64 years (UDHS 2016). Early sexual activity initiation among young people and multiple concurrent sexual partners among young adults 25 years and above and the reduced negotiating power for safer sex among transactional sex workers threaten the to wipe away all the gains in the fight against HIV/AIDS.

HIV and Youth out of school

In Uganda, out-of-school teenagers consist of over 50% of all youth between the ages of 15 and 19 years. Females are by far the majority in this group. They have little access to information, are often intimidated and lack self-confidence. They rarely have opportunities to learn about health issues and even in the rare instances where sensitization sessions are held, they are not specifically invited, they are not welcome or involved in the discussion

HIV and Youth in Schools

The Ugandan President's Initiative for AIDS Communication to Youth (PIASCY) requires schools to teach HIV/AIDS and sexuality. Since 2002, students have learned about reproductive health, life skills, and HIV transmission and prevention beginning in third grade through high school.

Non-Communicable Diseases

Non-communicable diseases such as high blood pressure, cancers, diabetes, injuries and disabilities, genetic diseases and others are on the increase. While some of these diseases are genetic in nature, majority of them are due to lifestyles. Mental illnesses are on increase mainly due to challenges of violence, alcohol and drug substance abuse.

Maternal and Child Health

Since the onset of the COVID-19 pandemic in Uganda (March 2020), routine analysis of service delivery data by UNFPA showed an increase maternal deaths by 10.4%, from 1,089 in 2019 to 1,202 in 2020, according to the Health Management Information System (HMIS). In the 55 districts that are supported by UNFPA, maternal deaths increased by 41.1% in the period January-June 2020 compared to the same period January-June 2019. With the national lockdown entering into force in April 2020, most maternal deaths increments were registered across the first six months of 2020, which coincides with the onset of the COVID-19 crisis and related restrictions in Uganda **Immunization.**

FOOD SECURITY AND NUTRITION

According to the Integrated Food Security Phase Classification for Karamoja, in North Eastern Uganda, 361,000 people are estimated to be experiencing high levels of acute food insecurity at crisis level or worse. Subsistence farming by smallholders in Uganda currently accounts for 96% of all farm production, a quarter of total GDP, employs over two-third of workers, and earns over 40% of household income. The

primary focus of Ugandan agricultural policy has been on increasing productivity and commercialization of staple foods and cash crops to raise the income of farmers. At the same time, stunting affects one in three children (over 2.1 million children) in Uganda—higher than its immediate neighbors, some of whom have lower per capita income. Under nutrition disproportionately affects rural areas, where rates of stunting are over 36% compared to 19% in urban areas. When malnutrition strikes children in the first 1,000 days of their lives, it stunts their bodies and minds, impairing human development potential and ultimately, their ability to contribute to the economic growth of their countries in adulthood. The annual costs associated with child under nutrition are estimated at 5.6% of GDP.

EDUCATION

More than 34% of girls are married before their 18th birthday every year in Uganda, and 1 in 10 is married before turning 15. Child rights organizations working within the *Girls Not Brides Uganda* National Partnership, warn that the rate of child marriage in the country is rising due to school closures, food insecurity, and economic uncertainty triggered by COVID-19.

Despite substantial progress over the last two decades, girls still have on average lower levels of educational attainment than boys at the secondary level in many countries. This is in part because many girls are married or have children before the age of 18, often before they may be physically and emotionally ready to become wives and mothers.

Educating girls, ending child marriage, and preventing early childbearing is essential for girls to have agency, not only as future wives and mothers, but also beyond those roles. It is also essential for countries to reach their full development potential.

Girls' educational attainment, child marriage, and early childbearing are closely linked. Ending child marriage and early childbearing would improve girls' educational attainment. Conversely, improving girls' educational attainment would help reduce child marriage and early childbearing. In addition, low educational attainment, child marriage, and early childbearing affect girls' life trajectories in many other ways.

Girls marrying or dropping out of school early are more likely to experience poor health, have more children over their lifetime, and earn less in adulthood. This makes it more likely that their household will live in poverty. Other risks include intimate partner violence and lack of decision-making ability within the household. Fundamentally, girls marrying, having children, or dropping out of school early are disempowered in ways that deprive them of their basic rights. This in turn affects their children. For example, children of young mothers often face higher risks of dying by age five, being malnourished, and doing poorly in school

Orphans and Vulnerable Children (OVC);

Uganda faces a growing challenge of care and protection of Children, whose population is estimated at 19.03 million children below the age of 18 years. Of these children, 11 % have been orphaned and 44 % either critically or moderately vulnerable.

According to the Social Development Sector Plan (SDSP)-2015/16-2019/20; vulnerability relates to lack of security, susceptibility to risk and/or exploitation. It is a measure of resilience of individuals, households and communities to withstand any shock that might result in increased poverty. According to the findings at household level, the distribution of the number of orphans per household gives an insight of the magnitude of the problem for appropriate intervention. Out of 8.5 million households in the country, 1.3 million had an orphan, constituting about 15 percent of all households. Overall, the total number of households with one orphan has slightly increased 10 from 53 percent to 55 percent. Between the 2012/13 and 2016/17, survey undertakings. On the other hand, those households with two orphans almost remained the same.

At regional level, Karamoja sub-region had the highest proportion of households with four or more orphans (24%) compared to other sub-regions. (UNHS 2016/2017) Orphan hood in Uganda have been slightly on the decrease across the three survey periods from15% (UNHS 2005/06) to 11% (UNHS 2016/2017).

Orphan hood in female headed households was at 25% compared to male headed households at only 6%. The death of a father has been a major explanatory factor for orphan hood for the different background characteristics compared to death of a mother or both parents.

Overall, a minimum of 2,048,000 (14%) of the children aged 5-17 years were in child labour. The findings also show that, close to half of the old persons (42%) had never been to school and these were predominantly females (57%) compared to their male counterparts (23%). The majority of the widows (86%) were household heads implying they were major decisions takers in the household, and probably playing a lead role as well in looking after other household members

ENVIRONMENTAL PRESERVATION AND CONSERVATION:

Climate change: Uganda is experiencing significant impacts of climate change, which include changing weather patterns, drop in water levels, and increased frequency of extreme weather events like floods, as well as drought, whose social economic impacts make communities very vulnerable. About 20% of global CO2 emissions are caused by deforestation. In LDCs, 62% of total emissions originate in land-use change and primarily deforestation. For Uganda's case, some of the causes of deforestation include conversion for agriculture, settlement and urbanization.

Uganda has mostly a tropical climate characterized by stable rainfall patterns. However, the effects of climate change have turned the seasons around with the country experiencing shorter or longer rains and harsher droughts – especially in the eastern and north-eastern Uganda. This is coupled with Burning fossil fuels, cutting down forests and farming livestock are increasingly influencing the climate and the earth's temperature.

WATER, SANTATION AND HYGINE

According to the Ministry of Water and Environment's sector performance report (2017) and the Ministry of Education and Sports' School WASH mapping (2016), the situation

of WASH in Schools in Uganda is not meeting Uganda's national standards. Meeting the national WASH in Schools' standards is critical to children staying in school, performing well in school and keeping healthy and well, among other benefits

ORGANIZATIONAL COTEXT

Kagumu Development Organization (KADO) in a national indigenous Civil Society Organization founded in 1998 with its principle offices in Kibuku District Uganda. The organization was initiated in 1998, registered in 1999 as a community based organization (CBO), as NGO in December 2004 and incorporated in 2006.

KADO Vision

"A self-reliant and sustainable community life"

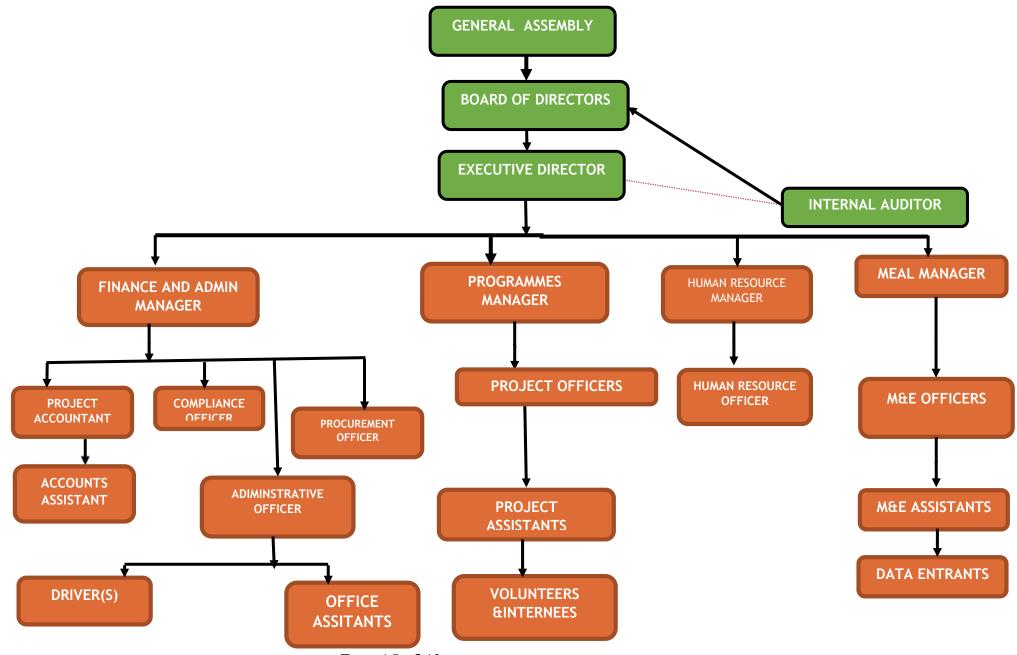
Mission statement:

KADO VISION:

To improve the lives of communities by empowering them to participate in social and economic development initiatives.

KADO Core Values

Timeliness, Teamwork, Accountability, Integrity and Transparence



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THE STRATEGIC PLAN

It is more important for those involved h the KADO's vision and mission. At its most simple, the Strategic Plan explains what KADO is planning to achieve and how it plans to do it. This then sets the direction for KADO and enables all those involved with the Organization particularly those in leadership and management positions – to review periodically how well the organization is performing and to take appropriate action. If there is no plan, there is nothing in writing against which a review can be carried out, and performance and impact are left to personal opinion.

Strategic planning has helped KADO formulates a strategy on how to best achieve its goals and how to define an operational plan to get there. It looks into the future and provides direction for the entire organization. As a management tool, strategic planning will aid KADO in its quest for excellence in attaining its goals.

GUIDING PRINCIPLES

The management, operations, and administration of the organization are guided by several agreed-upon principles. These will include the following:

Participatory;

This Stresses total participation of stakeholders at all levels to discuss issues, planning, implementation and provision of feedback through different stakeholders meetings. This will therefore, foster and enhance sustainability, ownership and stewardship within.

Empowerment;

Empowerment of the targeted groups of beneficiaries with skills and information within communities will be hold in order to achieve social economic transformation, improved governance, food security and community responding appropriately to HIV and other communicable diseases.

Partnership and Networking;

An effective and sustainable response requires a high degree of partnership between the Government departments/programs, other CSOs, of Uganda, civil society, and development partners and this will be fostered.

Value for Money,

Organization will promote its vision and mission by observing transparency and Accountability and this will strengthen systems and seek effectiveness, value for money, transparency, and accountability.

Building on the positive social cultural norms:

All programs to be implemented during this strategic plan will aim at recognizing the role of the positive and supportive socio-cultural beliefs, norms, and practices in addressing community issues. This will work to integrate context specific positive social cultural norms in all interventions.

Confidentiality and privacy:

In all programming issues of confidentiality and privacy shall be highlighted and/or promoted to ensure free and effective participation of the children and women in program activities.

Promoting equity:

This KSP 2022-2027 shall entail taking into account and examining the relationship between men and women, boys and girls as beneficiaries of services. These relationships shall be considered during planning, programming, monitoring and evaluation, with a special focus on OVC, women, PHAs, PWDS and communities to ensure neither gender is disproportionately marginalized nor excluded.

STRENGTHEN, WEAKNESSES, OPPORTUNITIES AND THREATS

Strength	Weakness
 Have got nationwide registration and operational permit. Has a good reputation among donors, district authorities in terms of transparency and accountability of grants. Have M&E systems with necessary data for planning. Has experienced and skilled staff. is Legally registered with NGO board and Ministry of Internal Affairs Opportunities Availability of donor funds: They 	 Limited office space: it is a hired office space accommodating even the health centre space Limited funding for programs: Limited resource mobilization skills Over dependence on donor grants Inadequate transport facilities Threats; Funds vulnerability: Most activities
advertise for funding on their website and local media Favorable policies and laws: NGO ACT the constitution of Uganda and others Availability of human resource Key human resource is available programs, finance and M&E Expansion ICT and social media in the rural communities	 are donor dependent hence not sustainable. Negative cultural practices: There are a number of negative social-cultural practices in Uganda. Environmental degradation: People are greatly involved in environmental degradation activities for living Poverty: most people are poor and work for the stomach rather than saving for the future

STRATEGIC DIRECTION

Future Trends

Prediction of the future trend shows that the services of Kagumu development organization remains very significant and need to be strengthened in Eastern Uganda, West Nile and Northern Uganda and any part of Uganda. Eastern Uganda, West Nile and Northern Uganda are among the major regions in Uganda with extreme poverty, hunger and diseases

In the view of the internal and external environment analyzed above and considering the predicted trends. KADO will implement the following key strategies:

STRATEGIC AREAS OF FOCUS

- 1) Health service delivery and systems strengthening
- 2) Food security and nutrition
- 3) Education
- 4) Economic Empowerment
- 5) Environmental preservation and conservation
- 6) Water sanitation and hygiene (WASH)

GOAL:

To contribute to Increased average Household Incomes and Improve the Quality of Life of Ugandans by 2027

STRATEGIC INTERVENTION 1: HEALTH

Strategic Objective 1: To improve health care service delivery and systems strengthening by 2027.

PROGRAME INTEREVENTIONS

- **1.1.** Mobilize resources to operate Kagumu health center III(a private **not** for profit health facility) and provide comprehensive services of OPD, Inpatient, deliveries. Immunization, antenatal, family planning, health education,
- 1.2. Conduct training of community health workers on Malaria/HIV/AIDS and TB
- **1.3.** Conduct in –school and out of school health education.
- **1.4.** Carry out targeted HIV testing outreaches
- **1.5.** Follow up HIV/TB positive, antenatal clients that lost to care to return them to care.
- **1.6.** Distribution of condoms
- **1.7.** Distribution of Long Lasting Insecticide treated Mosquito nets to Pregnant Mothers.
- **1.8.** Supervision, monitoring and evaluation

Expected output:

- 8500 patients received health services at Kagumu health center III
- 350 community health workers trained on Malaria/ HIV/AIDS and TB
- 15000 community members mobilized and sensitized on Malaria/ HIV/AIDS and TB.
- 15600 children immunized through reaches outreaches
- 18,000 Clients tested through targeted HIV testing outreaches
- 5400 HIV/TB positive, antenatal clients that lost to care to returned them to care.
- 690,000 Condoms distributed
- 2,000 Pregnant mothers receive LLINs,
- 12 Monthly Supervision and monitoring visits conducted.

STRATEGIC DIRECTION 2: FOOD SECURITY AND NUTRITION

Food security- i.e. having sufficient nutritious food at all times that meets the food requirements of the Household. In order to create impact in this field, this strategic plan will facilitate existing organizations to scale up their coverage of food security and nutrition interventions in malnourished households. The most affected are the OVC and the child headed households and children from very poor households due to the increase in the poverty levels in the community.

Strategic Objective 2: To contribute to increased food security and nutrition among malnourished households by 2027

2.1. Food security

- **2.1.1**. Provide Agricultural planting materials for OVC and the poorer households with children.
- **2.1.2**. Provide Agricultural tools for vulnerable households
- **2.1.3.** Training in less labour intensive technologies for OVC households
- **2.1.4.** Supervise, monitor and evaluate food security interventions

Expected outputs:

- 500 poorer households with children Provided with Agricultural planting materials
- 500 poorer households with children Provided agricultural tools and equipment
- 500 poorer households with children Trained in less labour intensive technologies
- 500 poor households Supervised , monitored and evaluated food security interventions

2.2. Nutrition:

- 2.2.1 Sensitize child care takers on feeding practices
- 2.2.2 Facilitate Provision of deformer, supplements to children 5-59 months by drug distributors
- 2.2.3 Train Volunteers to provide information on recommended Nutritional practices
- 2.2.4 Provide and disseminate balanced diet IEC Materials to the community
- 2.2.5 Facilitate Education/Trainings on Kitchen gardening for malnourished H/holds to ensure access to locally available nutritious foods.

Expected outputs:

- 6, 000 child care takers Sensitized on feeding practices
- 5700 children 5-59 months provided deformer supplements

- Train 7000 Volunteers trained to provide information on recommended Nutritional practices
- 8000 balanced diet IEC Materials disseminated to the community
- 500 malnourished H/holds Trained/facilitated on Kitchen gardening to ensure access to locally available nutritious foods.

STRATEGIC DIRECTION 3: EDUCATION

Objective 3: To promote education of adolescent girls and young women (AGYW) by 2027

PROGRAM INTERVENTIONS:

- 1.1. Mobilize resources to support education of orphan girl children in schools.
- 1.2. Provide adolescent girls with Scholastic Materials and re-usable sanitary pads
- 1.3. Mobilize resources to facilitate the reduction of child, early and forced marriages
- 1.4. Supervise, monitor and evaluate programme interventions.

OUTPUTS:

- 480 Adolescent girl's education supported
- 2500 Adolescent girls provided with scholastic materials and reusable sanitary pads
- 200 girls rescued from child, early and forced marriages
- · Quarterly supervision, monitoring and evaluation visits conducted

STRATEGIC DIRECTION 4: SOCIAL ECONOMIC EMPOWERMENT

Taking account of the various problems faced by OVC in Uganda, the interventions to support them including caregivers seem to be inadequate and hence requiring a broader based intervention to counter and provide for the underserved areas in order to realize impact. In order to scale the interventions, there is need for cohesion and harmonization of interventions by different partners. The target under this CPA is the

care givers for OVC, and the OVC Headed Households, children living in very poor households.

Objective 4: To contribute to household incomes of most the vulnerable households by 2027

PROGRAM INTERVENTIONS

- 1. Training of OVC caretakers on management of Income Generating Activities (IGAs) to cater for OVC needs.
- 2. Provide material support to start & maintain IGAs (Initiation of small scale Bank bee keeping, poultry, goats)
- 3. Monitoring interventions for OVC to assess Impact to the family Livelihoods

Outputs:

- 780 OVC caretakers trained in management of IGAs to cater for OVC needs.
- 780 OVC caretakers provided material support to start & maintain IGAs (Initiation of small scale Bank bee keeping, poultry, goats)
- Quarterly Monitoring interventions for OVC to assess Impact to the family Livelihoods conducted

STRATEGIC DIRECTION 5: ENVIRONMENT -CLIMATE CHANGE

Uganda has mostly a tropical climate characterized by stable rainfall patterns. However, the effects of climate change have turned the seasons around with the country experiencing shorter or longer rains and harsher droughts – especially in the eastern and north-eastern Uganda. This is coupled with Burning fossil fuels, cutting down forests and farming livestock are increasingly influencing the climate and the earth's temperature.

Objective 5: To promote environment preservation, conservation and mitigate the impact of climate change among subsistence farming communities by 2027

Program interventions:

- 2.3 Establish tree nursery beds
- 2.4 Provide tree seedlings to farmers
- 2.5 Train subsistence farmers in commercial tree growing
- 2.6 Train farmers in water and soil conservation management

Outputs:

- One centralized Tree nursery bed established
- 59,000 tree seedlings germinated
- 2000 subsistence farmers trained in commercial tree growing
- 1000 subsistence farmers trained in water and soil conservation management

Strategic: Institutional Capacity Building

Activities

- 1. Procure land for the institution to construct office
- 2. Procure office equipment
- 3. Review policy documents
- Staff training

Output:

- At least an acre of land procured
- Permanent structures constructed
- Computers, web based accounting equipment procured
- Policy documents reviewed
- 5 KADO staff trained

Strategic Objective 6: To promote water, sanitation and environment by 2027

Programme Intervention

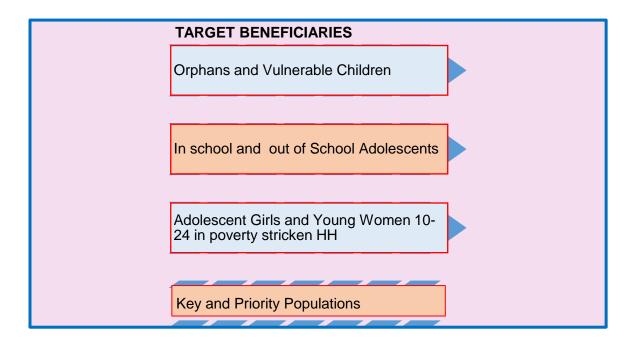
- 6.1 Hold training on WASH related behaviors
- 6.2 Facilitate formation school WASH clubs
- 6.3 Train adolescent girls on menstrual hygiene management
- 6.4 Monitoring and Evaluation

Outputs

- 10,000 Pupils and Students trained on WASH related behaviors
- 30 School WASH Clubs formed.
- 2,000 adolescent girls trained on menstrual hygiene management
- 3 Quarterly Monitoring visits Conducted

FRAME WORK OF STRATEGIC INTERVENTIONS

This section introduces the framework of interventions that are a priority under KSP 2022-2027 It also presents the most target vulnerable groups that are children, adolescent girls and young women, pregnant women and lactating and key populations.



The categories described above are meant to act as a guide during implementation in the selection of vulnerable target beneficiaries, households and communities in need of services. Comprehensive assessment of vulnerability shall be done in the communities and households by service providers before a beneficiary is enrolled on a program. Each program may develop specific selection criteria to identify beneficiaries of a particular intervention that is within the framework of KSP 2022-2027. However, the communities and local leaders shall be involved in determining the criteria.

FRAMEWORK OF STRATEGIC INTERVENTIONS AND RESULTS

Outcomes	Strategic Interventions	Key Milestones/Outputs in		
		5Years		
Strategic Objective				
	1.1. Mobilize resources to operate Kagumu health center III (a private not	8500 patients received		
	for profit health facility) and provide comprehensive services of OPD,	health services at Kagumu		
1. Improved health	Inpatient, deliveries. Immunization, antenatal, family planning, health	health center III		
service delivery	education,			
and	1.2. Conduct training of community health workers on Malaria/ HIV/AIDS	350 community health		
strengthened	and TB	workers trained on		
health systems		Malaria/ HIV/AIDS and		
		ТВ		
	1.3. Conduct in –school and out of school health education.	15000 community members		
		mobilized and sensitized on		
		Malaria/ HIV/AIDS and TB.		
	1.4. Carry out targeted HIV testing outreaches			
		through reaches outreaches		
	1.5. Follow up HIV/TD positive, antenatal clients that lost to care to return	2. 18,000 Clients tested		
	them to care.	through targeted HIV		
	testing outreaches			

Strategic Objective	 1.6. Distribution of condoms 1.7. Distribution of Long Lasting Insecticide Treated Mosquito New Pregnant Mothers 1.8. Supervision, monitoring and evaluation 2:To contribute to increase of food security and nutrition among 	distributed. 12 Monthly Supervision and monitoring visits conducted
Strategie Objective		ya
Improved food	2.1. Provide Agricultural planting materials for OVC and the	500 poorer households with children
security among	poorer households with children	Provided with Agricultural planting
vulnerable		materials
households	2.2. Provide Agricultural tools for vulnerable households	500 poorer households with children Provided agricultural tools and equipment
	2.3. Training in less labour intensive technologies for OVC households2.4. Supervise , monitor and evaluate food security interventions	500 poorer households with children Trained in less labour intensive technologies 500 poor households Supervised , monitored and evaluated food security
Improved nutrition among	2.2.1 Sensitize child care takers on feeding practices	interventions 6,000 child care takers Sensitized on feeding practices

malnourished	2.2.2 Facilitate Provision of deformer, supplements to children 5	5- 5700 children 5-59 months provided		
households	59 months by drug distributors	deformer supplements		
	2.2.3 Train Volunteers to provide information on recommende	7000 Volunteers trained to provide		
	Nutritional practices	information on recommended Nutritional		
		practices		
	2.2.4 Provide and disseminate balanced diet IEC Materials to th	e 8000 lanced diet IEC Materials		
	community	disseminated to the community		
	2.2.5 Facilitate Education/Trainings on Kitchen gardening for	r 500 malnourished H/holds		
	malnourished H/holds to ensure access to locally availabl	e Trained/facilitated on Kitchen gardening		
	nutritious foods.	to ensure access to locally available		
		nutritious foods		
Strategic Objective	3: To promote Education of adolescent girls and young wome	n (AGYW) by 2027		
Improved girl	3.1. Mobilize resources to support Education of adolescent girl'	s 480 Adolescent girl's children education		
child education	children and young women in schools.	supported		
	3.2. Provide adolescent girls and young women with scholasti	2500 adolescent girls and Young women		
	materials and re-usable sanitary pads	provided with scholastic materials and		
		reusable sanitary pads		
	3.3. Mobilize resources to facilitate the reduction of child, earl	y 200 adolescent girls and Young women		
	and forced marriages	rescued from child, early and forced		
		marriages		
	3.4. Supervise, monitor and evaluate programme interventions	Quarterly supervision, monitoring and		

		evaluation visits conducted				
Strategic Objective 4: To contribute to household incomes of the most the vulnerable households by 2027						
Improved	4.1. Training of OVC caretakers on management of IGAs to	780 OVC caretakers trained in				
household incomes	cater for OVC needs. management of IGAs to cater for OVC					
of the most		needs.				
vulnerable	4.2. Provide material support to start & maintain IGAs (Initiation	780 OVC caretakers provided material				
households	of bee keeping, poultry, piggery and goats) as source of	support to start & maintain IGAs				
	income.					
	4.3. Monitoring interventions for OVC to assess Impact to the	Quarterly Monitoring interventions for				
	family Livelihoods	OVC visits conducted.				
Strategic Objective	5:To promote environment preservation, conservation and	mitigate the impact of climate change				
among subsistence	farming communities by 2027					
Improved	5.1. Establish tree nursery beds	1 centralized tree nursery beds				
management of	·	established				
environment	5.2. Provide tree seedlings to farmers	16,000 tree seedlings disseminated				
	5.3. Train subsistence farmers in soil and water conservation	500 farmers trained				
	management					
Strategic objective 6. To promote water sanitation and hygiene by 2027						
Improved WASH	6.1. Hold training of Pupils and Students on WASH related	10,000 pupils/Students trained				
among adolescent	behaviors					
girls in schools	6.2. Facilitate formation school WASH clubs	30 wash clubs formed				

	6.3. Train in school adolescent girls on menstrual hygiene management	2,000 girls trained	
	management		
	6.4. Monitoring and Evaluation	3 Quarterly Monitoring visits Conducted	
Strategic objective 7: To strengthen the capacity of KADO in terms of human resource and infrastructure			
	6.1. Procure land for the institution to construct office	atleast an acre of land Procured	
	6.2. Construct organization offices/structure	Permanent structures constructed	
	6.3. Procure office equipment	3Computers, one web based accounting	
		equipment procured	
	6.4. review policy documents	Policy documents reviewed	
	6.5. staff training	At least two KADO staff trained	

BUDGET ESTIMATES

The total budget estimates for activities detailed in this strategic plan amounts to Uganda Shillings (UGX) 7,967,887,450 for the five years. This is an equivalent of about US\$ 2,153,483 in accordance to prevailing open market foreign exchange rates as of UGX 3,700 per dollar. A detailed budget breakdown and projection will be done each year for the period of the plan.

	Budget projections				
Programme	Year1	Year2	Year3	Year4	Year5
Institutional development	134,560,500	134,560,500	134,560,500	134,560,500	134,560,500
Operational costs	132,675,500	132,675,500	132,675,500	132,675,500	132,675,500
Economic security	345,500,600	345,500,600	345,500,600	345,500,600	345,500,600
Food security and nutrition	580,000,000	580,000,000	580,000,000	580,000,000	580,000,000
Education support	134,560,500	134,560,500	134,560,500	134,560,500	134,560,500
Health service delivery and systems strengthening	136,780,350	136,780,350	136,780,350	136,780,350	136,780,350
Environmental preservation/climate change	120,000,000	120,000,000	120,000,000	120,000,000	120,000,000
Promotion of WASH in schools	130,000,000	32,5000,000	32,5000,000	32,5000,000	32,5000,000
Monitoring and evaluation	9,500,000	9,500,000	9,500,000	9,500,000	9,500,000
Total	1,723,577,450	1,918,577,450	1,918,577,450	1,918,577,450	1,918,577,450

IMPLEMETATION ARRANGEMENT

Implementation Considerations

The successful implementation of this strategic plan will require commitment from the entire family members of KADO i.e. council members, management, program staff, Community monitors, community multipliers, civil and local government leaders, collaborators and support from donor community. This plan is a tool that will be used to enable KADO to better serve her clientele by ensuring that all projects are conceived within specific strategic areas and implemented in a holistic manner. This strategic plan shall widely be disseminated to all relevant stakeholders at all levels.

Plans for Reviewing and Refining the Plan

Continuous improvement in regard to organizational quality and performance focuses on improving client satisfaction through continuous and incremental improvements to processes. The strategic plan through the process of monitoring and evaluation will be regularly improved by changing or modifying activities and variations taking into consideration emergent strategies, and changes affecting KADO intended course.

KADO will implement this strategic plan with development partners. These include multi nationals, international NGOs and global health initiatives like Uganda Protestant Medical Bureau, Baylor College of Medicine and Children's Foundation-Uganda, Aids Health Care Foundation. These stakeholders provide funding and material support to KADO programmes. KADO will endeavor to attract and maintain the support of a number of donors to its programmes. Its sustainability strategies rely on the diversification of the funding base so that more donorsare attracted

Financing of the Plan

In a more practical term, a fund raising strategy will be formulated and implemented to meaningfully mobilize the required resources for the plan. This is expected to provide the organization with a more robust focus on how, where and how much resource can be attained. The organization will make deliberate move to identify, create and maintain

strategic partnership with potential donors in and outside the country. As a means to finance the plan, KADO will be patterned towards the following:

- Endeavour to maintain the current donor partners to ensure continuity of the interventions pursued.
- Enhance board members commitment towards fundraising
- Respond to call for proposals as advertised in gazette and through g search among others
- Tapping into the current national level competitive funding opportunities by bilateral agencies and government.
- Running health center III on a cost sharing basis.
- Offering consultancy services in the areas of our expertise.
- Publication and dissemination of the strategic plan using various means i.e. webbased, hard and soft copies.
- Establishing and widening income-generating activities both at organization and community levels.

Streamline Procurement Processes

The organization should seek to reduce the total time and cost to procure partnerships by streamlining the process, eliminating unnecessary red tape and reducing dependency on external advisors. In particular they should seek to reduce the time from notice to contract award.• Manage relationships as well as the contract Rethinking Service Delivery contains important guidance on the building and management of relationships with suppliers, which is a vital ingredient to the successful delivery of services within the framework of a partnership. This docket will aim to continuously improve the quality of goods and services delivered by KADO

Monitoring and Evaluation System (M&E)

The sector shall strengthen the knowledge and information management through developing and operationalizing an organizational wide M&E plan. The management

information system will be strengthened by redesigning the thematic area databases, training of the staff and realigning the reporting and feedback mechanisms. In all cases, efforts shall be geared towards creation of user-friendly ICT systems for access by the different stakeholders within the organization. A strengthened monitoring and evaluation system shall be the basis upon which strategic plan implementation will be tracked to specifically focus on the objectives and the set targets. It shall also be a management tool for performance measurement over the next five years. Harmonized internal and external communication will be enhanced through the public relation function. This will aim at ensuring correct information flow within and outside the organization.

Monitoring and Evaluation

Monitoring and evaluation Systematic monitoring is important to track and analyze activity implementation and provide feedback on performance. KADO will monitor and evaluate its programs through a reliable and functional M&E system to capture achievements of its interventions. The monitoring and evaluation system shall be strengthened through development of a comprehensive management information system to bring together the various directorates. Evaluation of this strategic plan will be carried out to make a comparative assessment of the results (outcomes and impacts) of the interventions at mid and end term. Annual reviews and experience sharing shall be conducted to provide regular updates.

Regular review meetings

Essentially a review is an opportunity to have a discussion with a team member about their work, their personal development and their future career. Successful reviews benefit the team member, the team, the department and the organization as a whole. Review meetings provide an opportunity for the team member to have time with the project implementers to discuss their performance and development, to discuss and agree future targets and objectives, to discuss personal and career development, to consider past performance and recognize successes and to identify where

improvements/changes could be made. Therefore, Activity, quarterly, bi annual and annual review meetings shall be hold by the staff and all stake holders to ascertain the progress of all organization projects and programmes.

Sustainability of KADO

This will mainly be at three levels namely: Institutional; Programmes; and Financial sustainability. Each of the levels is described in detail as follows: Institutional Sustainability during the strategic planning period. KADO will set into motion processes to establish and strengthen most of the elements required for a sustainable organization. To achieve this, KADO will restructure the organogram, retool and re-skill the human resource in line with the strategic plan mandate.

Programmes sustainability will involve venturing into new programmes to address emerging needs particularly people living with Malaria, HIV/AIDS and TB; lack of health services, economic security, promotion of sexual reproductive health and rights, adolescent girls and young women youth out of school, youth in schools, young girls and women and application of an evidence-based approach across all its programme areas.

Financial Sustainability Resources will be mobilized to implement this strategy through engaging more development partners and strengthening internal revenue generation. Cost containment strategies and risk management interventions will be developed to sustain the organization.

Plans for Reviewing and Refining the Plan

Continuous improvement in regard to organizational quality and performance focuses on improving client satisfaction through continuous and incremental improvements to processes. The strategic plan through the process of monitoring and evaluation will be regularly improved by changing or modifying activities and variations taking into consideration emergent strategies, and changes affecting KADO intended course.

Evaluation

Mid-term evaluation will be undertaken to assess the progress and outcomes made. The purpose here is to determine what needs to be strengthened or reinforced in order to consolidate the gains made. At the end of the strategic plan in 2020, an external evaluation will be conducted with all strategic stakeholders and implementers. This will be done through a workshop to examine the Strategic Plan, contribution to the Vision, Mission, the Goals and Objectives of the Centre and to redesign the way forward. In all, a comprehensive M&E system will be developed immediately to guide the process of tracking the Organization performance and evaluate the outcomes realized.

