

AMICAALL UGANDA CHAPTETR



AMICAALL Members during the 6th urban leader's forum and 14th AGA - Kawanda-Nasana Municipality, 1st march 2018

Annual Report 2017/18

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ACRONYMS

| AGM | Annual General Meeting/Assembly | | | |
|---|---|--|--|--|
| AMICAALL | Alliance of Mayors and municipal leaders' Initiative for Community Action on HIV&AIDs and | | | |
| | health at the Local Level | | | |
| CDC | Centre for Disease Control | | | |
| CDO | Community Development Officer | | | |
| CSW | Commercial Sex Worker | | | |
| GBV | Gender Based Violence | | | |
| HTS | HIV Testing Services | | | |
| IGA | Income Generating Activity (s) | | | |
| MAC | Municipality AIDS Committee | | | |
| MC | Municipal Council | | | |
| MEL | Monitoring, Evaluation and Learning | | | |
| МоН | Ministry of Health | | | |
| MWE | Ministry of Water and Enviroment | | | |
| NAFOPHANU | National Forum for People living with HIV and AIDS Network Uganda | | | |
| NCDs | Non Communicable Diseases | | | |
| РАСК | Prevention of HIV&AIDS in Communities in Karamoja. | | | |
| | | | | |
| PLHIV | People Living with HIV | | | |
| PLHIV SAC | People Living with HIV Sub-county AIDS Committee | | | |
| | | | | |
| SAC | Sub-county AIDS Committee | | | |
| SAC SDGs | Sub-county AIDS Committee Sustainable Development Goals | | | |
| SAC SDGs SRHR | Sub-county AIDS Committee Sustainable Development Goals Sexual Reproductive Health and Rights | | | |
| SAC SDGs SRHR TAC | Sub-county AIDS Committee Sustainable Development Goals Sexual Reproductive Health and Rights Town Council AIDS Committee | | | |
| SAC SDGs SRHR TAC TASO | Sub-county AIDS Committee Sustainable Development Goals Sexual Reproductive Health and Rights Town Council AIDS Committee The AIDS Support Organisation | | | |
| SAC SDGs SRHR TAC TASO TC | Sub-county AIDS Committee Sustainable Development Goals Sexual Reproductive Health and Rights Town Council AIDS Committee The AIDS Support Organisation Town Council | | | |
| SAC SDGs SRHR TAC TASO TC UAC | Sub-county AIDS Committee Sustainable Development Goals Sexual Reproductive Health and Rights Town Council AIDS Committee The AIDS Support Organisation Town Council Uganda AIDS Commission | | | |

Foreword



The post 2015 era marked the end of the Millennium Development Goals and the onset of the Sustainable Development Goals (SDGs). This is a major turning point in the global health development discourse. This period is also characterized by a shift in the resources allocation priorities adversely affecting health initiatives both globally and in Uganda.

Being at the center of the decentralized urban response to health and HIV/AIDS, AMICAALL Uganda strategic plan aligns AMICAALL Uganda programmes to the above trajectory. Our programme scope has expanded beyond HIV and AIDS to include other aspects including Governance, Water, Sanitation and Hygiene as well as Non-Communicable diseases.

As a leadership-focused organization, we would like to leverage, nature and develop our leadership to prioritize health programmes to ensure a healthy urban population. This way, we envisage to contribute to towards attainment of the sustainable and national growth and development.

For AMICAALL Uganda therefore, although this year has been characterized by limited programme activity and scarcity of resources among other numerous challenges, it is part of the period of transition into the sustainable development goals. It has become imperative that as urban leaders, the primary focus should be on building sustainability of our association programmes.

I would like to thank the urban authorities who are subscribed members, the Alliance Executive Council (Board), Management and staff for the great work accomplished this year. I also thank the Development partners who continue to provide financial and technical support for the implementation of our programmes.

HW. Godfrey Kabbyanga Baluku Kime CHAIRMAN, ALLIANCE EXECUTIVE COUNCIL

ACKNOWLEDGEMENT



On behalf of the Alliance Executive Council, I would like to thank all member urban authorities and the Secretariat for the great work and services extended to the urban communities during this year.

This year has been a period of constrained funding and scarcity of resources. We therefore heartily appreciate our development partners who supported our programmes. Special thanks go to Irish Aid for supporting our HIV and AIDS programmes in Karamoja region. We also appreciate Uganda AIDS Commission and Ministry of Health for the continued leadership and technical guidance.

Despite the funding challenges, urban authorities have mobilized local resources and ensured the continuity of our programmes. For example, regional meetings, Mayors Campaigns and general assemblies have been fully funded by contributions from members. We strongly commend all the members who have contributed to the programme. We cordially welcome the leaders from the newly created urban authorities to AMICAALL Uganda family. I invite you to reach out to your secretariat and request for information about your association and how you can utilize it to serve your people.

In this reporting period, the organization has made a number of achievements. On behalf of the Alliance Executive Council in general and National Secretariat in particular, I would like to sincerely appreciate the commitment, resilience and mobilization of local resources by Mayors, Town Clerks and all other urban leaders.

The AMICAALL Uganda Strategic Plan 2016/17- 2020/21 is has diversified the scope our programme beyond HIV and AIDS to also include Water, Sanitation and Hygiene (WASH), Non-Communicable Diseases (NCDs) as well as aspects of Governance.

We encourage the leaders to take lead in implementing the strategic plan and in particular, supporting programmes in the above stated priority areas of our programme.

Titus James TWESIGE COUNTRY DIRECTOR

Executive summary

This report highlights the activities and achievements of the AMICAALL Uganda Programme for the period 2017/18. The activities are presented according to the three strategic objectives of the strategic plan namely;

- To enhance leadership capacity for effective community engagement, advocacy and social mobilization for disease prevention;
- ii) To strengthen technical capacity for enhanced and sustainable health and HIV&AIDS response in urban authorities and
- iii) To increase availability and access to quality prevention, treatment and care services for HIV & AIDS, Sexual & reproductive health services and other related diseases and conditions among urban communities.

The report also outlines the progress made in the implementation of the 14th Annual General Assembly resolutions, challenges, recommendations and lessons learnt.

In line with the objective of enhancing leadership capacity for effective community engagement, advocacy and social mobilization, AMICAALL Uganda secretariat in partnership with the Regional Coordinators, engaged urban leaders through regional meetings. The meetings were held in all the five regions and the leaders were provided with strategic information regarding national priorities in health and HIV/AIDS. The meetings also identified gaps and priorities for urban health depending on the regions and agreed on strategies for concerted interventions to address the existing gaps. Through the Mayors' Campaigns 2018, AMICAALL sensitized the 312 urban leaders and helped to promote public private partnerships in reaching out to the key populations and Young people on Sexual Reproductive Health and Rights (SRHR) and HIV prevention.

In the area of technical capacity strengthening for enhanced sustainable health and HIV/AIDS, the secretariat supported the urban authorities during implementation of service delivery interventions. In addition, the urban authorities were linked to implementing partners, especially in supporting service delivery interventions such as comprehensive HIV prevention camps.

During this period, AMICAALL Uganda Another key achievement was the launch of PACK II project for the Karamoja region. Through this project, a significant urban population were accessed HIV and AIDS services.

During this period, we noted increasing number of urban authorities, increased demand to engage with Municipal Divisions. It is therefore very imperative to strengthen the capacity of the secretariat to reach all members.

1.0 Background to AMICAALL Uganda Chapter

The Alliance of Mayors and Municipal Leaders' Initiative for Community Action on AIDS at the Local Level (AMICAALL) is an association of African Mayors and other Urban Leaders formed to support sustainable solutions to the HIV and AIDS epidemic in African Cities and Municipalities. The Alliance was launched on 9th December 1997 during the 10th International Conference on AIDS and Sexually Transmitted Diseases in Africa (ICASA) in Abidjan, Cote d'Ivoire. A coordination secretariat was set up in Windhoek, Namibia to support establishment of autonomous AMICAALL Chapters in all African Countries and coordinate mutual support, Information sharing, networking and advocacy.

Subscribing to AMICAALL Africa, AMICAALL Uganda Chapter was launched on 28th November 2000 at the Mayors' Parlour when Ugandan Mayors, under the leadership of Kampala Capital City signed the Kampala Declaration. The chapter has since registered and operated as a National Non-Government Organization bringing together Mayors and other urban leaders from the City, Municipalities and Town Councils across the country. AMICAALL was founded in recognition of the unprecedented magnitude of HIV & AIDS in Cities & Municipalities in Africa, and the need to respond to the complex social, HIV/AIDS, health and development challenges inherent in urban areas.

Vision: A healthy and productive urban population free from HIV&AIDS and related diseases

Mission: To support the building of an effective and coordinated urban HIV&AIDS and health response

Goal: To strengthen the capacity of urban authorities for an effective and sustainable HIV&AIDS and health response.

Strategic Objectives:

Objective 1: To enhance leadership capacity for effective community engagement, advocacy and social mobilization for disease prevention

Objective 2: To strengthen technical capacity for enhanced and sustainable health and HIV&AIDS response in urban authorities

Objective 3: To increase availability and access to quality prevention, treatment and care services for HIV & AIDS, Sexual & reproductive health services and other related diseases and conditions among urban communities.

1.1 Introduction

This report covers the period 2017/18. However, the report for the year 2016/17 covered up to February 2018. Therefore, this report focuses on the two quarters from April to September 2018. This includes resolutions from the 2016/17 Annual General Assembly which was held in March 2018 as well as the activities that the Secretariat and members have been involved in. The report will highlight activities according to the three strategic objectives of the organization.

2.0 Key interventions and achievements by objective

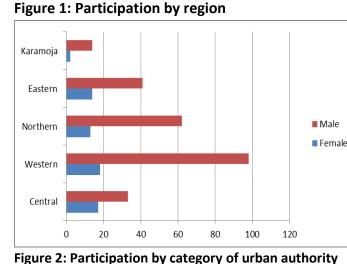
2.1 Objective 1: To enhance leadership capacity for effective community engagement, advocacy and social mobilization for disease prevention

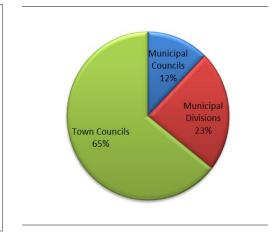
This objective covers activities that include leadership engagement in the health and HIV/AIDS response and the following was achieved:

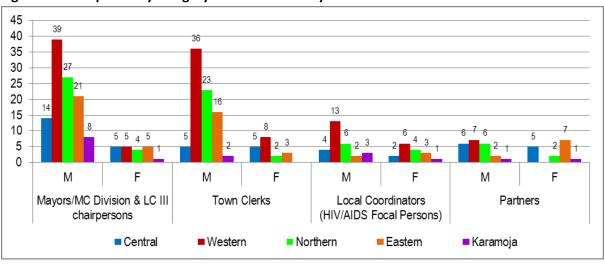
- a) Engagement and orientation of leaders from new urban authorities through Regional meetings: During the 15th Annual General Assembly (AGA), members resolved that, AMICAALL should organize regional meetings to reach out, sensitize urban readers on their role and mobilize them to engage in health and HIV response interventions (e.g. Fast Track Campaign, Sanitation improvement, HIV/SRH etc). AMICAALL has successfully conducted five (5) regional meetings in Eastern, Northern, Central, Western and Karamoja regions. The meetings were attended by 312 urban leaders from 104 Urban Authorities. The overall objective was to support the urban leaders and stakeholders to undertake informed programming on SRHR, HIV/AIDS, WASH, GBV and related health issues. The discussions raised a number of issues and the following were captured form members:
- Members recommended that the Regional Coordinators should follow-up on subscription payments.
- A request was made by members to create region specific forums to enhance effective communication.
- Members appealed to the board to advocate for a possibility by the Central Government to commit a percentage of unconditional grants towards HIV/AIDS.
- Members re -echoed the AGA resolution to move an amendment in the Constitution allowing Municipal Divisions to be incorporated as independent members of AMICAALL.
- The Secretariat was requested to prioritize three governance issues for possible support to the urban leaders and these include: skills and logistics for Legislative drafting, resource mobilization, information management, monitoring and reporting.

- Members recommended that the Secretariat schedules regular interactions with the urban authority leaders in their respective areas in order to enable the other leaders (other than Mayor and Town Clerk) to appreciate the organization and support its activities.
- On the subscription fees issues, the members held Town Clerks responsible for not prioritizing HIV/AIDS activities and AMICAALL subscription. The Secretariat was requested to send constant reminders to the Town Clerks so as to affect the payments on time.
- It was further clarified that the Ministry of Finance Planning and Economic Development had through budget call circular guided on the need to mainstream HIV/AIDS activities in Local Governments. It was therefore, recommended that the circulars should be sent in time to the urban leaders for action.

The breakdown of the attendance of the meetings is below:







b) Advocacy and social mobilization through Mayors Campaign 2018: Out of the region meetings, urban authorities drew action plans to scale up the fast-tracking HIV/AIDS elimination. The urban authorities who managed to implement and report were Hoima MC, Bugembe TC, Kabale MC. Activities were carried out with locally mobilized resources from health partners as well as the private sector:



The Mayor of Bugembe, H.W Stephen Wante taking to youth about Sexual Reproductive Health in Bugembe

Secretariat staff exhibiting at the Hoima MC activities of the Mayors' Campaign 2018

c) Scaling up resource mobilization efforts: AMICAALL has continued to engage with its traditional partners especially Irish Aid (Funding PACK project in Karamoja), UAC (actively engaged in JAAR, members are Partnership Committee and National Organizing Committee, participated in regional meetings), MOH (NCDs national working group), MWE (National Sanitation Working Group), UNFPA (Participated in Regional meetings). Additionally, AMICAALL is engaging with new partners like DGF (a proposal has been submitted on governance project), GIZ/CUSP (on capacity building), CDC (engaging on urban data and other possible interventions).



d) Local Resource mobilization: Through the Mayors' Campaign 2018, AMICAALL has sensitized the urban leaders and helped to promote public private partnerships in reaching out to the key populations and Young people on SRHR and HIV prevention. The campaign activities were carried out with urban authority partners and the regional meetings were carried out with members' contributions.

During these campaigns, member urban authorities mobilized local resources by engaging with local implementing partners, private sector entities, in-kind contributions by communities and urban local governments as well as cash contributions by urban authorities. For example, Mayors campaign reports from Kabale, Hoima, and Bugembe urban authorities indicate that over Ugx 50 million was mobilized from partners. The key partners reported included Banks, Reproductive Health Uganda, Rugarama Hospital, Kamukira health unit, Marie stopes, KIHEFO, Rotaract club, KISH, NBS radio and TV, Baba FM and Radio, Ko TV, NTV, Nakanyonyi SACCO, DFCU bank, Standard Chartered bank, Siita Primary School, St. Joseph Secondary School among others. AMICAALL Uganda greatly appreciates these and all the partners that have supported our work.

- e) Building partnerships: AMICAALL Uganda continued to engage and participate in national initiatives organized government Ministries, Departments and Agencies (e.g. UAC, MoH, MWE e.t.c). For example, AMICAALL Uganda actively participated on the National Technical working group for the Presidential Fast Track Initiative and participated in the National Organizing Committee for the regional launches. As a result of the AEC engagement with UAC board and management, UAC has continuously facilitated urban leaders to participate in the launches too. Case in point was the Central launch in Masaka, Eastern launch in Namayingo and Western Launch in Isingiro. About 22 urban leaders have been facilitated to participate in the events.
- f) Governance and institutional capacity: During this reporting period, AMICAALL conducted two (2) Alliance Executive Council (board) meetings, two (2) AMICAALL National Advisory Committee (ANTAC), one (1) Procurement Committee meeting. The AEC and ANTAC board members were engaged in resource mobilization visits with partners like Irish AID and Uganda AIDS Commission. The Irish Aid visit resulted into the partner including money to clear some AMICAALL debt on staff arrears while the one of UAC resulted into facilitation of members and Secretariat staff to participate in the Presidential Fast Track Initiative activities as well as the decentralized HIV response evaluation meetings.
- **g) Staffing:** The Secretariat has recruited managed to recruit to staff members into Monitoring Evaluation and Learning Coordinator as well as the Finance Manager. They have been invaluable in bridging the human resource gap at the Secretariat especially towards resource mobilization.

h) Policies: AMICAALL has developed a number of policies to guide its operations and these include Child Protection Policy, revised the Human Resource Policy, Whistle Blower Policy, Board Manual.

2.2. Objective 2: To strengthen technical capacity for enhanced and sustainable health and HIV&AIDS response in urban authorities

This objective involves capacity building for the Secretariat staff, urban leaders and the urban communities. The following was achieved for the objective under PACK II funding from Irish Aid

- ✓ Approximately 3,000 people were mobilized and sensitized with HIV prevention and care messages. The dramas were conducted in Kaabong (2000 people) and Kotido (1000 people)
- ✓ About 4500 people received HIV messages through the mobile Public address system
- ✓ 34 AIDS Committee coordination meetings were conducted. These were attended by 438 (311M and 127F) members at sub-county, town authority and municipal authority level.
- ✓ 7 issue-based community dialogue meetings were conducted with a focus on vulnerability of young people and key populations to HIV infection. These were attended by 115 (76M, 39F) key populations and 60 (31M, 29F) young people.



A Sub County meeting in Alerek in Abim

A dialogue on SRHR and HIV/AIDS in Napak

2.3 Objective 3: To increase availability and access to quality prevention, treatment and care services for HIV & AIDS, Sexual & reproductive health services and other related diseases and conditions among urban communities.

This objective includes health service delivery for urban and peri urban communities of Uganda. With Irish Aid funding under PACK project (a consortium of four national Civil Society Organizations namely; AMICAALL, NAFOPHANU, Straight Talk Foundation) with an aim of reducing the new HIV infections among the adolescents and young people (10-24 years) in Karamoja sub region. In this project the following were achieved during this year:

- ✓ A total 889 (723M,166F) key populations who included Commercial Sex Workers (CSWs), Boda boda riders, truck drivers, and youth out of school were reached with different HIV and AIDS messages through peer to peer education in various urban authorities.
- ✓ 14 Integrated HIV outreach camps were conducted, where a total of 2,809 (1,640M and 1,169F) were tested for HIV and received test results. Of the 2,809 tested, 32 (16M, 16F) tested HIV positive and were referred to other HIV service providers to be initiated into HIV care
- Distributed 20,997 (105F, 20,692M) condoms during HIV Testing Services (HTS) outreach camps. Thirteen (13) women were provided with family planning services.

It should be noted that during this period, AMICAALL interventions contributed towards provision and access to integrated and comprehensive services to a significant number of urban populations. The table below summarizes the number of people reached with the different services during the Mayors' Campaign 2018.

| Service | Number |
|--------------------------------------|----------------------|
| HIV Testing services | 3338 |
| Blood sugar screening | 146 |
| Blood pressure checks | 667 |
| Family planning methods | 816 |
| Breast and Cervical Cancer screening | 570 |
| Prostate cancer screening | 230 |
| TB screening | 48 |
| Nutrition assessment | 147 |
| Immunization | 56 |
| Deworming | 770 doses |
| Blood donation | 190 units |
| Safe Male Circumcision | 26 |
| Male condoms | 30,448 pieces |
| Female condoms | 279 pieces |
| Media engagement | 1,509 people, 7 TV |
| | and radio talk shows |
| General town cleaning | 3 |
| Garbage collection | 3 |

Table 1 : Shows Health services offered during the Mayors' Campaign 2018

3.0 Financial Report

This Financial report is for the period July 2017 to June 2018. The objective of the report is to give an overview of the organization's current financial status. The content of this report consists of the following;

Statement of Income 2017/18

| | 30 June 2018 | 30 June 2017 |
|---------------|--------------|---------------|
| | Actual | Actual |
| | Ushs | Ushs |
| Income | | |
| | | |
| Grants | 79,120,195 | 1,324,605,979 |
| Subscriptions | 59,700,000 | 89,500,000 |
| Other Income | 19,859,061 | 167,977,719 |
| Total Income | 158,679,256 | 1,582,083,698 |

4.0 Challenges

- Limited subscription that has continued to affect office operations.
- Overwhelming workload on the lean team at the Secretariat has continued to affect the performance of the staff.
- The staff are owed salary arrears of four (4) months and this affected staff motivation
- Low participation of Municipal Mayors in the regional meetings and Mayors' Campaigns
- Increasing number of urban authorities and related lack of orientation by both the line ministry and AMICAALL.

5.0 Lessons learnt

• With increased sensitization and commitment, the AMICAALL members are able to locally mobilize resources and fund health service delivery activities. This was illustrated by the over UGX 16,000,000 raised by Kabale Municipality in the Mayors' Campaign 2018.

6.0 Recommendations

• The Municipal Divisions have been very active in the AMICAALL regional meetings and it is recommended that they be included as ordinary members to enable them attend even the AGMs.

• There is need to increase staffing at the Secretariat so as to reach out to the increasing number of members.

7.0 Conclusion

While the organization is still facing funding challenges, there is hope to mobilize resources both locally and from development partners to improve the performance of the programme and the association as a whole. Therefore, members are urged to continue providing leadership in reaching out to the urban communities, continue supporting the secretaria through compliance with subscription and actively participating in its programme activities.



Artistic impression of proposed AMICAALL Uganda house