



## **AMICAALL UGANDA CHAPTER**

*“Delivering Inclusive and Effective services to urban communities”*

# **STRATEGIC PLAN**

## **2022/23 -2026/27**

# VISION | MISSION | GOAL



**VISION**

A healthy, inclusive and productive urban population.



**MISSION**

To support the delivery of efficient, effective and inclusive services in urban communities



**GOAL**

To strengthen the capacity of urban authorities to deliver sustainable and inclusive services to the urban communities.

## Core Principles

-  Partnership & Networking
-  Rights-based approach to service delivery.
-  Transparency & accountability
-  Gender sensitivity
-  Community empowerment
-  Responsiveness to urban health needs
-  Social Inclusion
-  Teamwork

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## ACRONYMS

<b>AIDS</b>	<b>Acquired Immuno Deficiency Syndrome</b>
<b>AMICAALL</b>	<b>Alliance of Mayors and Municipal Leaders' Initiative for Community Action on AIDS at Local Level</b>
<b>ANTAC</b>	<b>AMICAALL National Technical and Advisory Committee</b>
<b>AEC</b>	<b>Alliance Executive Council</b>
<b>ART</b>	<b>Anti-retroviral Therapy</b>
<b>ARVs</b>	<b>Antiretroviral Drugs</b>
<b>BCC</b>	<b>Behavior Change Communication</b>
<b>CBOs</b>	<b>Community-Based Organizations</b>
<b>CLTS</b>	<b>Community-led Total Sanitation</b>
<b>CSF</b>	<b>Civil Society Fund</b>
<b>CSO</b>	<b>Civil Society Organization</b>
<b>CVD</b>	<b>Cardiovascular Diseases</b>
<b>DAC</b>	<b>District HIV&amp;AIDS Committees GF Global Fund</b>
<b>EMTCT</b>	<b>Elimination of Mother to Child Transmission</b>
<b>GoU</b>	<b>Government of Uganda</b>
<b>HBHCT</b>	<b>Home Based HIV Counseling and Testing</b>
<b>HC</b>	<b>Health Centre</b>
<b>HCT</b>	<b>HIV Counseling and Testing</b>
<b>HIV</b>	<b>Human Immuno -deficiency Virus</b>
<b>HMIS</b>	<b>Health Management Information System</b>
<b>HRH</b>	<b>Human Resources for Health</b>
<b>HSSIP</b>	<b>Health Sector Strategic and Investment Plan</b>
<b>ICASA</b>	<b>International Conference on AIDS &amp; Sexually Transmitted Diseases in Africa</b>
<b>IDU</b>	<b>Intravenous Drug Users</b>
<b>IEC</b>	<b>Information, Education and Communication</b>
<b>IGAs</b>	<b>Income-Generating Activities</b>
<b>JAR</b>	<b>Joint AIDS Annual Review</b>
<b>KP</b>	<b>Key Population</b>
<b>MARPs</b>	<b>Most at Risk Populations</b>
<b>MoGLSD</b>	<b>Ministry of Gender, Labor and Social Development</b>
<b>MoH</b>	<b>Ministry of Health</b>

## FOREWORD

AMICAALL has registered several achievements since the last Strategic Plan in building the capacity of Mayors and other urban leaders to deliver services to urban populations. AMICAALL has showed significant progress in the urban HIV and AIDS, NCDs response.

Despite a favorable legal regime and resources in Uganda, health challenges are still many including HIV and AIDS, and it is our wish as AMICAALL that we broaden our scope to cover environmental protection, public health, institutional capacity development, economic opportunities, governance, human rights, policy, advocacy and eventually sustainability of the Alliance that will see urban authorities deliver improved health services for the communities.

This new Strategic Plan 2022/23–2026/27 is centered on strengthening the capacity of urban authorities to deliver sustainable and inclusive health services to urban communities while consolidating the achievements of the previous strategic plan.

The Strategic Plan is informed by the UN development Agenda 2030, Uganda’s Vision 2040, the Third National Development Plan (NDP III). I am very optimistic that successful implementation of this Plan will play a vital role in enabling urban authorities to achieve their Development Plans.

I would like to acknowledge the contribution of all Partners and stakeholders who have supported AMICAALL all this time, DGF for financing the development of this Strategic Plan among other support, UNAIDS, UNFPA, UNDP and others for the financial and moral support and ensuring that AMICAALL grows to where it is to continue serving urban communities.

Lastly, I call upon partners to support and work closely with us as we endeavor to reach out to the urban leaders and build inclusive urban authorities.



**Her Worship Regina Bakitte Nakkazzi Musoke,  
Mayor, Nansana Municipality,  
CHAIRPERSON, AMICAALL Uganda Chapter**

## ACKNOWLEDGEMENT

The Strategic Plan 2022/23-2026/27 is designed to guide and steer AMICAALL in the implementation of its five-year development program towards Vision 2030. The Strategic Plan is aligned to the planning cycle of the Government of Uganda. The implementation of development projects over the years has provided AMICAALL the foundation to evolve and rebrand to fit emerging trends. The reviews of the previous Strategic Plan by the Board and staff offered useful lessons and revealed areas that needed further reforms and improvement. Since its inception in the year 2000, the organization has successfully delivered four strategic plans. The New Strategic Plan will enable AMICAALL mobilize resources, expand the programme and strengthen the capacity of the secretariat and urban authorities to deliver efficient, effective and inclusive services to urban communities.

We express sincere gratitude to all the Local Governments, particularly the urban authorities that have embraced the Alliance and continued to prioritize and mainstream HIV and AIDS in their respective plans and budgets. The Mayors, Town Clerks, Local Coordinators, and all leaders in the urban fraternity, have ensured that the ideals of AMICAALL continue to thrive.

We thank the relevant Government Ministries and institutions for nurturing and supporting AMICAALL. Special acknowledgements to the Leadership of the ministries of Local Government; Health; Gender, Labour and Social Development; and Uganda AIDS Commission. We also recognize the contribution of development partners especially DGF, UNAIDS, UNDP, Irish Aid, DANIDA, Civil Society Fund, among others, who have supported AMICAALL programmes over the years. The Alliance Executive Council (AEC), AMICAALL Technical and Advisory Committee (ANTAC), Management and Staff of AMICAALL Uganda have been the engine of growth for this noble organization. The strategic direction provided by the governance team and the technical input of management and staff largely explains the resilience of the organization.

AMICAALL quests for institutional and programme sustainability of the achievements made over the years. We also strive to effectively mobilize and engage all urban leaders in expanding the scope and focus of AMICAALL to address environmental protection and WASH, economic empowerment, and HIV and AIDS, and other health related challenges that continue to afflict urban communities. We thank the Consultants who led the Strategic Planning process; special thanks go to HOFODE led by Mr. Sam Wakubonah Shimanya, George Sempangi, and Enock Asimwe, whose guidance enabled us to develop this Strategic Plan.

*Nabwire*

**Restituta Nabwire**  
**Ag. Country Director**  
**AMICAALL Uganda Chapter**

## EXECUTIVE SUMMARY

The Alliance of Mayors and Municipal Leaders' Initiative for Community Action on AIDS at the Local Level (AMICAALL) Uganda Chapter is an association of Ugandan Mayors and other Urban Leaders formed to support sustainable solutions to the HIV and AIDS epidemic in Ugandan Cities and Municipalities. AMICAALL provides a strong voice and capacity building for urban authorities. AMICAALL's programmes are grounded on the following: advocacy, capacity building, research and documentation, resource mobilization, networking, partnership and economic empowerment.

These programmatic areas of focus have been implemented in four previous Strategic Plans (Strategic Plan 2005/06 – 2009/10, Strategic plan 2009/10-2011/12, Strategic plan 2012/13 – 2015/16, Strategic plan 2016/17 -2020/21: This Strategic Plan for 2022/23-2026/27 builds on the achievements made in previous strategic planning and operational periods and encompasses new challenges and opportunities facing urban health governance in Uganda. The major purpose of this Strategic Plan is to provide strategic direction to the organization's activities over the five-year period, and serve as the key tool both for mobilizing needed financial and other resources, as well as spearheading the necessary collaborations and partnerships in support of AMICAALL's work.

The AMICAALL Uganda Strategic Plan 2022/23–2026/27 is an expanded paradigm of service delivery in urban areas that comprehensively addresses environmental protection; public health, especially HIV and AIDS using a rights-based approach; and addressing other related health issues like malaria and non-communicable diseases afflicting urban populations in Uganda. It will tackle issues related to institutional capacity development to support urban leaders to provide effective and efficient services in urban areas.

The 20 years of experience working in urban areas as well as understanding of the ever-changing global, regional, national and local environment, calls for mindset shift in addressing socioeconomic issues like low incomes, food security and the policy changes in urban areas. Given the above concerns, AMICAALL is strongly committed to addressing them in partnership with other stakeholders.

The review and development of the Strategic Plan was done through a participatory process. This involved consultations with urban authorities (elected leaders, technical staff and beneficiary communities) during consultative workshops organized at regional level. Consultations were also made with the AIDS Development Partners, Civil Society Organizations at district and national levels, as well as AMICAALL governance and technical bodies during validation meetings. The process was also guided by the Alliance Executive Council (Board), AMICAALL National Technical and Advisory Committee (ANTAC) and the National Coordination Office (Secretariat). The new Strategic Plan defines the vision, mission and values that the organization will strive to achieve over the next 5 years. The AMICAALL Uganda programme will contribute to "A healthy and Inclusive productive urban population." This will be done to support effective and efficient inclusive services in urban communities.

From the above process, the Strategic Plan 2022/23-2026/27 was developed with the theme "Delivering efficient, effective, and inclusive urban health services."

Thereafter six strategic focal areas were identified, under which related strategic objectives were defined. The strategic focal areas of the Strategic Plan and the objectives are summarised here below:

- i) Public Health (HIV and AIDS, Malaria, Non-Communicable Diseases): AMICAALL will continue to pursue a 95-95-95 strategy to ensure that interventions in HIV and AIDS prevention continue within the urban authorities, and that TB, Malaria, Non-communicable diseases, issues arising out of Sexual Reproductive Health are contained and gender sensitive

approaches are implemented.

- ii) Environmental protection and WASH: AMICAALL will put more emphasis on solid waste management, Water Sanitation and hygiene (WASH) and restoration of the urban vegetation.
- iii) Institutional Capacity Development: AMICAALL will focus on leadership development of urban authority leaders to deliver on their mandate and at the same time build the capacity of the Secretariat to be effective and efficient.
- iv) Greater Economic Opportunities: AMICAALL plans to walk with urban authorities on supporting economic opportunities for the marginalized urban dwellers within the respective urban authorities.
- v) Governance, Human Rights, Policy and Advocacy: AMICAALL will continue to deliver its programs using a rights-based approach to ensure that urban authorities are centers of excellence in promoting the rights of peoples within these urban authorities.
- vi) Sustainability: AMICAALL plans to do the following: a) establish a fundraising function in the organizational structure with a plan, b) strengthen its brand as a prerequisite for fundraising, and c) explore different fundraising opportunities and hold fundraising events.

The Board of Directors namely the Alliance Executive Council (AEC) and the AMICAALL National Technical and Advisory Committee (ANTAC), which are accountable to the supreme body of the Annual General Assembly, will ensure implementation of the new Strategic Plan in conjunction with the Secretariat. The AEC and ANTAC will ensure that the annual plans are prepared within the framework of the Strategic Plan and meticulously implemented, and report to the Annual General Assembly.

The total cost for the five year strategic plan is Seven Billion Eight Hundred Forty Three Millions, two hundred forty eight thousands eight hundred eighty three shillings (UGX 7,843,248,883).



# CHAPTER ONE: INTRODUCTION

## Background

During the International Conference on AIDS and Sexually Transmitted Diseases in Africa (ICASA) in Abidjan, Cote d'Ivoire, on 9th December 1997, Mayors and Municipal Leaders from Africa, in collaboration with UNAIDS, UNDP and other partners, signed the "Abidjan Declaration" in which they committed themselves to invest in the HIV & AIDS response and empower urban communities with capacity to cope with the effects of the pandemic. With the support of UNDP and within the framework of UNAIDS, the Alliance of Mayors and Municipal Leaders Initiative for Community Action on HIV&AIDS at the Local Level (AMICAALL) was formed. Subsequently, a clear strategy to address HIV&AIDS was developed and a regional secretariat established in Windhoek, Namibia. Over the years, the Alliance has expanded with the formation of national chapters in several African countries, including Uganda, Namibia, Swaziland, Cote d'Ivoire, Burkina Faso, Mali, Tanzania, Zambia, Malawi, Central Africa Republic and Kenya.

The AMICAALL Uganda Chapter was launched by the "Kampala Declaration" on 28th November 2000 under the auspices of UNAIDS and UNDP country Offices. AMICAALL Uganda is a registered National Non-Governmental Organization (NGO) constituted by urban authorities in the country. It is governed by the Constitution and coordinated through the National Secretariat which provides technical support, management and overall coordination of AMICAALL activities in the country. Owing to its mandate and strategic positioning, AMICAALL is recognized as one of the key partners in the national response as well as a key entry point to HIV and AIDS response in the Local Governments in general and urban Local Governments in particular.

## AMICAALL Strategic Planning

AMICAALL developed a Strategic Plan for the period 2016/17-2020/21. As the plan period came to an end, it was essential to develop a new forward-looking, aspirational, roadmap to build on the achievements so far made, considering the environmental changes. At the same time, the changing operating environment and growing stakeholders' expectations required AMICAALL to redefine its role and increase its effectiveness in working with urban authorities. AMICAALL also needs to give more focused attention to generating financial resources to sustain its operating expenses and development initiatives. Similarly, the new strategic plan built upon AMICAALL's achievements from the preceding strategic plan, and considered the vital lessons learnt. A strategic plan has been developed for the 2022/23-2026/27 period, the major purpose of which is to provide strategic direction to the organization's activities over the five-year period, serve as the key tool both for mobilizing needed financial and other resources as well as spearheading the necessary collaborations and partnerships in support of AMICAALL's work.

Against this background, AMICAALL commissioned the development of the Strategic Plan 2022/23-2026/27, and HOFODE was engaged as an external consultant to lead the process.

## The Process of Developing the Strategic Plan 2022/23- 2026/27

A participatory approach was used throughout the process of developing this strategic plan. Staff meetings, meetings with the Board of Directors namely AEC and ANTAC and other stakeholders, were conducted for purposes of receiving input from AMICAALL members and other stakeholders.

During the planning process, several meetings were held with members of the AMICAALL Board, management and staff, development partners, peer organizations, and government ministries to receive information on the organization's performance during the previous strategic planning period, the organization's strengths weaknesses, opportunities and threats and these stakeholders' expectations from the new strategic plan.

The status of implementation of the Strategic Plan 2016/17-2020/21 was also assessed, and lessons learnt from the implementation of the last Strategic Plan 2016/17-2020/21 documented and given consideration in the development of the new plan. The foundation factors informing AMICAALL's existence were reviewed to ensure that they are appropriate and remain relevant. AMICAALL's wider context was also analyzed, as well as a stakeholder analysis, and a comprehensive SWOT analysis also carried out.

A review of relevant international and national legal and policy frameworks was undertaken during the development of this Strategic Plan. The following documents were reviewed: SDGs, National Development Plan III, previous strategic plans, annual reports, capacity assessment, and activity reports from AMICAALL Staff.

## CHAPTER TWO: SITUATIONAL ANALYSIS

Today, 55% of the World's population lives in urban areas, and this is expected to rise to 70% by 2050, making urbanization one of the most significant trends of the 21st century. The global trend in urbanization has brought with it increased wealth as cities generate 80% of the world's economy. Yet, when poorly planned and managed, urbanization generates inequalities and has already left a billion people living in slums with inadequate services and often precarious living conditions. However, if steered and managed correctly, urbanization can help the world overcome some of its major challenges, including rural poverty and peripherally, inequality, environmental degradation, climate change, fragility and conflict. The 2030 Sustainable Development agenda commits to sustainable urban development. This can be achieved, among others, through policymaking, legislation, inclusive governance, planning, municipal finance and sustainable infrastructure development.

Africa is rapidly urbanizing (United Nations, 2020). Uganda, at 20% urban, is one of the fastest urbanizing countries in Africa and has one of the fastest urbanizing rates at 5.2%. Hence, Uganda is growing at a very fast speed; as of September 2022, Uganda had 11 Cities, 100 town councils and 10 Municipalities. This urban development has not only provided opportunities but also generated challenges requiring continued networking and partnership under AMICAALL.

This section presents a detailed analysis and literature review of key issues that require AMICAALL attention in the coming 5 years of the strategic plan implementation 2022/23- 2026/27.

1. Public Health
2. Environmental protection and Water Sanitation and Hygiene (WASH)
3. Institutional capacity development
4. Economic Opportunities
5. Governance, Human rights, Policy and Advocacy
6. Sustainability of AMICAALL

### Public Health in Urban Areas

According to the World Health Organization (WHO 2016), health is the urban authority's most important asset. "Health-focused urban design can roll back epidemics, communicable and Non-Communicable Diseases (NCDs), making cities a bedrock for healthy lifestyles – as well as climate-friendly and resilient. During the Staff Consultative workshop, it was noted that most urban centres are grappling with several health-related concerns.

### HIV and AIDS, TB, Malaria, NCDs and SRHR

The HIV and AIDS pandemic has continued to ravage urban populations despite increased awareness of the prevention mechanisms against the virus. The recently released results of the UDHS 2019/20 indicate that HIV and AIDS among adolescent girls stands at 64% compared to boys at 34%. HIV prevalence is higher among women living in urban areas (9.8%) than those in rural areas (6.7%). AMICAALL will continue to work with urban authorities to implement strategy 95-95-95 with urban authorities.

### Sexual Reproductive Health Rights (SRHR)

Information provided by the Uganda Demographic and Health Survey (2016) indicates that Uganda has an unmet need of family planning of 28%. According to UN's World Population Prospects

(2022), Uganda's population is expected to surpass 100 million people by 2050 and reach 167 million people by the end of the century. By 2100, Uganda's population is expected to surpass that of Egypt, 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 One 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, and inadequate infrastructure, among other things.

According to the UBOS statistical abstract (2020), urban population is projected at 10.6 million persons. According to Youth Policy (2011), Uganda has the world's youngest population with over 78 percent of its population below the age of 30. With just under eight million (8) youth aged 15-30, the country also has one of the highest youth unemployment rates in Sub-Saharan Africa. The contraceptive prevalence rate for modern methods is only 18% and the current unmet need for family planning is 28%. Delivery attended to by a skilled birth attendant is very low with many women delivering out of health facilities. Related to these behavioral challenges are unwanted pregnancies, sexually transmitted infections and cross-generational sex that are grossly exploitative, especially for the girl child. Gender disparities in almost all areas of development have continued to persist in Uganda. Sexual and Gender Based Violence (SGBV) in Uganda is high.

## **Tuberculosis (TB)**

Uganda's young population is 52% of the total population and this is the age that is most affected by HIV&AIDS. AMICAALL will continue to invest in ensuring that the transmission rates of TB are checked in urban centres. The Stakeholders who attended the strategic planning process noted that TB spreads fastest in urban centers when infected droplets are released in the air by coughing, sneezing etc., by the affected individual. It usually spreads after a prolonged exposure with the infected individual. Urban areas are centres of slums, with poor hygiene and sanitation, with more than 6 people staying in a small dwelling with poor ventilation and aeration.

## **Malaria**

During the formulation of the strategic directions, it was noted that household expenditure on malaria treatment is very high for families in urban centres. Malaria treatment consumes a big proportion of the incomes for the majority households in urban places. A poor household in an urban centre spends almost 25% of the household income on malaria prevention and treatment. It is estimated that a single episode of malaria costs a family an average of Uganda Shillings 20,000. Malaria has a negative impact on overall economic development because of loss of workdays due to sickness, decreased productivity and decreased school attendance. Workers suffering from malaria may be unable to work for an estimated 5-20 days per episode; given that many people are infected multiple times a year, this has substantial financial consequences to families. Urban centres are known breeding places for Malaria-transmitting mosquitoes. AMICAALL will work with urban leaders to be ambassadors on Malaria prevention in their respective jurisdictions.

## **Non-Communicable Diseases.**

According to World Health Organization, of the 57 million deaths that occurred in 2008 globally, 63% (36 million) were due to Non-Communicable Diseases (NCDs)<sup>5</sup>. The most common NCDs are cardiovascular diseases, cancers, diabetes and chronic lung diseases. In the past these were believed to be diseases of the affluent, but are now reported to be on the increase in lower income populations. It was further reported that 29 million deaths (almost 80%) of the deaths due to NCDs occurred in low- and middle-income countries. Cardiovascular diseases accounted

for 17 million (48%) of the global NCDs death, while 7.6 million, or 21% of all NCD deaths were attributed to cancers. Respiratory diseases including asthma and chronic obstructive pulmonary disease accounted for 4.2 million, with diabetes causing another 1.3 million deaths.

In Uganda, non-communicable diseases (NCDs) are becoming increasingly major causes of morbidity and mortality in the population, and increasingly associated with PLWHIV who are on treatment. According to the WHO, 27% of the mortality is attributed to NCDs. Cardiovascular Diseases (CVD) account for 9% of the death, cancers 5%, chronic respiratory diseases are 2% while diabetes causes 1% of the death. The probability of premature death (30-70 years) attributed to NCDs in Uganda is estimated to be at 21%. The Uganda Heart Institute records have demonstrated a 500% increase in outpatient attendance due to heart-related conditions and an upward trend in cancer incidence, particularly among HIV-infection-related cancers over the years. In the strategic plan period 2022/2023- 20226/2027, focus will be on HIV/AIDS, TB and Non-communicable diseases.

## **Environmental protection and WASH in urban areas**

During the consultative meeting held at the AMICAALL boardroom in September 2022, it was noted that Urban Environmental Management (UEM) responds to the need to examine urban growth and environmental problems from management and planning perspectives to contribute to the development of sustainable, inclusive and resilient cities and towns in Uganda.

It was noted during the strategic planning workshop that most of the urban authorities are struggling with solid waste management. There is indiscriminate and open dumping of solid waste in almost all the urban areas, leading to sanitation and hygiene-related health challenges. In almost all urban authorities none is involved in separating waste. There are also problems of lack of work plans for managing solid waste in urban authorities, air pollution from solid waste (fumes), uncontrolled dumping of polythene bags and bottles, and limited resources for garbage collection in cities, municipalities, and towns.

Poor management of solid waste creates several environmental hazards including depreciation in the value of land within the dumping areas, because the air and water generally get polluted; public health threats like cholera; bad smells and malaria outbreaks. Poorly disposed solid waste acts as bleeding sites for vectors like mosquitoes and house flies which spread diseases, hence compromising people's health.

There is limited capacity by urban authorities to manage waste, which has led to indiscriminate dumping of solid waste in swamps and streets. In cities and towns, there has been indiscriminate cutting of trees to pave way for construction of houses/commercial buildings and industries, which compromises air quality.

The constitution of the Republic of Uganda (1995) places a lot of emphasis on building a healthy nation. The government is committed to fulfilling this goal of attaining good health, social and economic wellbeing and strives to meet Sustainable Development Goals.

In the coming five years AMICAALL will focus on three major outcomes: improving solid Waste Management; Improved urban vegetation; and better hygienic practices in urban areas.

## **Institutional Capacity Development**

The Uganda 2021 general elections ushered in new mayors, increased numbers of municipalities and cities, and this required recruitment of technical staff. The technical managers, such as Town Clerks, are often transferred from one urban authority to another.

Although new leaders have come in with new ideas and innovation, they require fresh orientation, sensitization and engagement to carry on with the work already started and to maintain the momentum for their active leadership role in delivering services for the urban poor. There is limited knowledge, among elected officials, about the Local Governments Act, their roles and responsibilities, how to develop ordinances or bye-laws, among others. There is no tailored manual to induct new leaders on their leadership roles.

AMICAALL has institutional capacity gaps that were identified during the organizational capacity assessment, including: absence of a membership charter for directing all matters of membership; absence of key functions like Communications, Human Resource management, M&E and Fundraising; absence of a Child Protection policy; and others. In order to implement the programmes effectively, it is essential that AMICAALL builds its own internal capacity that includes the development of new structures and policies, as well as enhancing the functions of the Board of Directors, management and staff, and the capacities of its member associations.

While AMICAALL principally intends to achieve its strategy of 2022/23- 2026/27 largely in collaboration with its member associations, there was an overwhelming expression of lack of institutional capacity at the Urban authorities. It therefore makes a strong case for AMICAALL to strive to build the capacities of its members during the same period, particularly focusing on leadership capacity building, financial management and resource mobilization, to enable them to make a strong impact on their members at the urban authorities. Therefore, these thematic areas will have two major outcomes at local level and at the secretariat level.

### **Economic Opportunities in the urban settings**

Urban authorities exist to deliver services to urban populations. Stakeholders, during the consultative meeting, highlighted the need for urban authorities to reduce unemployment rate, encourage formal startups, support the informal sector, support urban agriculture, bring marginalized urban communities into active labour force, and improve the lives of the excluded groups in urban communities.

Under the new mandate, AMICAALL will work with the urban authorities to ensure that groups that are economically disempowered are provided a mechanism for their inclusion in economic activities which will help drive economic growth in urban areas, as well as significantly improve the overall quality of urban life through provision of Business Development services.

### **Governance, Human rights, Policy and Advocacy**

According to the constitution of the Republic of Uganda, the current policy environment is conducive for strengthened urban councils to deliver services within their jurisdiction. Uganda government has developed a host of national policies, legislations, plans such as Vision 2040, NDP III, Local government Act 1997 as amended, Public Private Partnership, Gender policy, Persons with Disabilities Act 2020 among others.

However, these governance frameworks have not been translated in bye-laws or ordinances to deliver services to the people in urban councils. AMICAALL will work with the urban authority leaders in identifying and implementing appropriate policies representing the values, mission and objectives of the strategic plan, specifically in the development of requisite instruments (ordinances and bylaws) to operationalize national development commitments at the different urban-authority levels.

## **CHAPTER THREE: REVIEW OF THE PREVIOUS STRATEGIC PLAN**

### **Advocacy, Communication and Social Mobilization**

AMICAALL Uganda has cultivated and strengthened a sense of solidarity and commitment among the urban leadership to advocate and address HIV&AIDS issues. Both elected and technical leaders have actively been involved in the implementation of HIV&AIDS programmes. Through joint advocacy actions, such as the nation-wide “Mayor’s Campaign”, urban authority leaders have actively advocated for accelerated service delivery and mobilized communities and service providers and ensured increased provision and uptake of HIV&AIDS services.

Some urban authorities have developed byelaws and ordinances to address specific social-cultural practices fueling the spread of HIV infections in these communities such as Sexual and Gender-Based Violence (SGBV), and regulation of social and recreation activities like discos, bars, lodges. In addition, AMICAALL has supported the development and strengthening of community mobilization and sensitization structures to support urban Local Governments to implement HIV&AIDS activities. Community structures like drama groups, peer educators, have been formed and their members trained and facilitated and linked to the leadership to support the lower Local Government structures through divisions, wards, to cell level.

### **Access and utilization of HIV Prevention Services**

AMICAALL has also registered improved capacity of community structures to raise awareness, mobilize communities for services as well as collect data of people reached with services. There has been marked increase in the provision and uptake of HIV&AIDS services by key populations in urban areas. AMICAALL has established a mechanism for reaching out to key populations for the delivery of a package of HIV & AIDS interventions which include HIV Counseling and Testing (HCT), Safe Male Circumcision (SMC), Family Planning (FP), elimination of Mother to Child Transmission of HIV (eMTCT), and Behaviors Change Communication (BCC), among others. As a result, over 600,000 people have been reached with HIV prevention services in urban authorities across the country.

### **Improved capacity for Coordination, Partnerships, and Networking**

The capacity of urban leaders and Local Governments in general has been strengthened to spearhead and coordinate the decentralized HIV response in urban areas. AMICAALL Uganda has supported urban authorities to revitalize the multi-sectoral HIV&AIDS coordination structures in urban areas to ensure that they are functional. AIDS Committees have been set up and facilitated to meet on a regular basis, develop plans and coordinate implementation of HIV&AIDS-management activities. AMICAALL has fostered inter-urban partnerships especially through the AMICAALL Annual Urban Leaders Forum and regional meetings. These have fostered mutual support, sharing and learning. Partnerships between urban authorities and private sector and civil society entities have been fostered and continue to support urban authorities in ensuring sustainable and efficient delivery of services to urban communities.

### **Improved Governance and Institutional Capacity**

The AMICAALL Uganda Secretariat has grown significantly in the past three years with the staff size increasing from about 10 to over 35 professionals. The Alliance Executive Council and AMICAALL National Technical and Advisory Committee sits regularly to provide oversight and technical

guidance respectively. The Patron has also provided support to the organization, especially as regards linkages to partnership with the Private Sector and Government of Uganda.

## Resource mobilization

AMICAALL Uganda has attracted financial resources in form of grants from a number of Development Partners.

## Strength, Weakness, Opportunities and Threats (SWOT)

Through consultations, AMICAALL members, partners and stakeholders have assessed the strengths, weaknesses, opportunities and threats, and the following have been identified:

Strength	Weakness/Challenges
<ul style="list-style-type: none"> <li>■ Presence of key political leaders help in mobilization of resources.</li> <li>■ Ongoing programmes being implemented by AMICAALL which can be used as springboard for empowerment of urban councils to take charge of the epidemic.</li> <li>■ A Strong and functional AMICAALL Secretariat with capacity to provide leadership role and spearhead empowerment of urban authorities to take charge of the response and delivery of public health services.</li> <li>■ Established governance and management systems at AMICAALL Secretariat, which form the basis for prudent programme management. Presence of big network of membership</li> <li>■ Experience in working with multiple donors successfully over the years strengthens AMICAALL Uganda's bargaining power</li> </ul>	<ul style="list-style-type: none"> <li>■ Limited capacity building/ empowerment of urban councils to plan, mobilize resource and take charge of the response rather, depending on the Secretariat.</li> <li>■ Understaffing of the secretariat.</li> <li>■ AMICAALL Uganda depends almost entirely on external funding which creates sustainability challenges.</li> <li>■ Low payment of subscription.</li> <li>■ Limited resource to implement projects.</li> <li>■ Dependency on GOU funding for the financing of urban councils. Central Government resources are conditional and urban councils have very limited flexibility.</li> <li>■ Low revenue base of urban councils for financing of their operations.</li> </ul>
Opportunities	Threats
<ul style="list-style-type: none"> <li>■ The establishment of the AIDS Trust Funds presents an opportunity for urban councils to prepare and access funding once it becomes operational.</li> <li>■ Existence/ availability of the National HIV &amp; AIDS national policy.</li> <li>■ Presence of ANTAC for technical support.</li> <li>■ The development of national urban policy and the strategic urban development plan by the Ministry of Housing and Urban Development.</li> <li>■ AMICAALL Uganda can base on the established national policy on decentralized response to engage urban authorities to take lead in coordinating HIV and AIDS work.</li> </ul>	<ul style="list-style-type: none"> <li>■ Increasing urbanization and number of urban authorities with all associated challenges which may overstretch AMICAALL beyond its mandate.</li> <li>■ Conflict between the state and government e.g., DGF</li> <li>■ Unforeseen environmental and economic challenges.</li> <li>■ Epidemics like Covid and Ebola.</li> <li>■ Increasing rate of urbanization and associated population increase.</li> <li>■ Central Government resources are conditional and urban councils have very limited flexibility.</li> </ul>

The successful implementation of the previous strategic plan has enhanced awareness among urban council leaders. Structures and coordination mechanisms for the HIV & AIDS response in urban councils have been re-activated. These have informed the strategic plan 2022/23 – 2026/27. For sustainable impact of health and HIV&AIDS response, it is important to focus on empowerment and capacity building of urban authorities. Greater attention should be paid to ensuring that urban councils attain the capacity required for effective implementation and delivery of the urban HIV & AIDS and other health-related responses.

## CHAPTER FOUR: STRATEGIC DIRECTION 2022/23-2026/27

This chapter provides an outline of the AMICAALL Strategic Plan 2022/23-2026/27. The section is structured to rhyme with the priorities highlighted with context analysis. It builds on the AMICAALL Vision, Mission, Core Values and Goal.

### **The vision is:**

“A healthy, inclusive and productive urban population”

### **The mission is:**

“To support the delivery of effective, efficient, and inclusive services in urban communities.”

### **The Goal is:**

“To strengthen the capacity of urban authorities to deliver sustainable and inclusive services to the urban communities.”

### **The theme is:**

“Delivering Inclusive and Effective Services to Urban Communities”

### **The core values are:**

- Partnership and networking
- Rights- based approach in service delivery
- Transparency and accountability
- Gender sensitivity
- Community empowerment
- Responsiveness to urban health needs
- Social Inclusion
- Teamwork

### **Strategic Objectives**

To achieve the above-stated strategic direction, the following strategic objectives will be pursued:

1. To strengthen the technical capacity of urban authorities in prevention, care and treatment of HIV and AIDS, TB, Malaria and NCDs in their communities by 2027;
2. To enhance the capacity of Urban Authority Leaders to deliver on environmental management by 2027;
3. To build the leadership capacity of urban authorities to deliver effective and inclusive services by 2027;



4. To support urban authorities to deliver inclusive economic and livelihood opportunities in their communities by 2027;
5. To strengthen the capacity of urban authorities in governance, human rights, policy and advocacy for quality service delivery by 2027.

### **Strategic Outcomes**

- Increased knowledge on HIV prevention and treatment, Reduced malaria infection and NCDs for urban authority leaders and communities.
- Improved water, sanitation, and hygiene (WASH), urban vegetation, and Solid Waste Management in practises in urban areas.
- Better Management Practises of leaders in Urban authorities.
- Increased knowledge on Business Development services and better improved business environment in urban areas.
- Increased knowledge on policy and advocacy for the urban authorities.

## CHAPTER FIVE: STRATEGIC INTERVENTIONS

### Implementation Approach

Overall, AMICAALL's programme will be implemented through the following crosscutting strategies that also constitute the organization's major programme approach:

- I. Capacity Building
- II. Lobbying and Advocacy
- III. Partnership and Networking
- IV. Research and Documentation
- V. Resource Mobilization

The five overriding strategies above bring life to the objectives and activities within the strategic plan will be applied invariably across all the six strategic focus areas.

### Strategic Objectives, Activities and Performance Indicators

This section outlines the five strategic objectives, as well as the related activities and performance indicators

### Priority Programme Areas of Focus for the next 5 Years.

1. Public health
2. Environmental protection and WASH
3. Institutional capacity development
4. Economic Opportunities
5. Governance, Human rights, Policy and Advocacy.
6. Sustainability

### Programme Area 1: Public Health

In the last strategic plan, progress was made in addressing HIV and AIDS, sexual reproductive health, and other related health challenges. In the strategic plan 2022/23-2026/27, AMICAALL will continue to address HIV and AIDS, SRH, TB, Malaria and Non-Communicable Diseases in urban centers. These have been found to be on the increase due to several factors as stated in the situational analysis. Through capacity building, advocacy and policy influence, partnership and networking, AMICAALL will aim to achieve following strategic outcomes;

Increased knowledge on HIV prevention and treatment, reduced malaria infection and NCDs for urban authority leaders and communities.

#### Expected outcome:

- Increased knowledge on prevention, care and treatment of HIV and AIDS by 2027
- Increased knowledge on support for SRHR and gender related challenges by 2027
- Increased commitment and a framework on TB prevention and treatment by 2027
- Increased commitment and with a framework on Malaria prevention and treatment by 2027

- Urban authorities with a framework on Non-Communicable Diseases by 2027

## **Programme Area 2: Environmental Protection and WASH**

In the strategic plan 2022/23-2026/27, AMICAALL will aim at ensuring that there is increased knowledge among urban authority leaders on proper solid waste management, improved WASH practices in urban areas, and afforestation. Efforts will be geared at capacity building, developing of the necessary manuals, exchange visits, and awareness creation using different social platforms to address issues of environment. Effort will be made to work with schools in urban centers for their participation in environmental protection campaigns.

### **To enhance the capacity of Urban Authority Leaders to deliver on environmental protection and WASH by 2027**

#### **Expected outcome:**

- Improved solid Waste Management in 40 % of the urban centres by 2027
- Improved WASH practices in 40% of the urban centres by 2027
- Improved urban vegetation/afforestation in 40% of the urban centres by 2027

## **Programme Area 3: Institutional Capacity Development (ICD)**

AMICAALL has positioned itself as a capacity-building institution for urban authorities especially for the mayors and other related city and municipal leaders. The institutional capacity development component will focus on two areas: First at the Urban authorities given the fact that most of the mayors are recently elected and lack certain leadership skills. The Second focus under ICD will be strengthening the capacity of the AMICAALL Secretariat to deliver on its mandate as an efficient and effective Alliance for all the mayors in the Country. The approach will be leadership training, learning visits, peer to peer learning, partnerships and networking among others.

### **Better Management Practises of leaders in Urban authorities**

#### **Expected outcome:**

- Increased leadership capacities of urban leaders in service delivery
- An empowered, vibrant, efficient and effective AMICAALL secretariat reaching out to urban authorities.

## **Programme Area 4: Economic Opportunities**

AMICAALL's new mandate is to be an organization with a vision of "A healthy, inclusive and productive urban population." This cannot be achieved without addressing people's economic needs in urban areas. AMICAALL is positioning itself to ensure that capacities of urban leaders are strengthened to reach the marginalized and poor households within their communities. AMICAALL will seek to understand the situation through conducting research, linking urban authorities with partners to deliver on livelihood opportunities, encouraging urban farming and supporting the informal and formal sectors to operate in a coordinated way.

Increased knowledge on business management and sustainability.

#### **Expected outcome:**

- Urban population engaged in inclusive food security and livelihood options by 2027.

- Partnerships established to deliver on economic opportunities for the marginalized urban communities by 2027.

## **Programme Area 5: Governance, Human Rights, Policy and Advocacy**

Government of Uganda is committed to a human-rights-based approach to delivery of services. As such, several governance instruments have been enacted to ensure that duty bearers respond to the needs of rights holders. The leaders who were elected in 2021, need to be trained on the available legal framework to enable them to effectively deliver services to the urban population. The need for urban authorities to have a client charter and other related laws translated into ordinances and bye-laws cannot be overemphasized. At the same time, for effective running of urban cities there is need to include the marginalized people like refugees, people with disabilities, among others, to benefit from urban development processes.

Increased knowledge on policy and advocacy for the urban authorities

### **Expected outcome:**

- Enhanced advocacy and policy commitment to deliver services effectively and efficiently to urban communities by 2027.
- Relevant ordinances and bye laws developed in urban areas to support a rights-based development approach to the delivery of urban services.

## **Programme Area 6: Sustainability**

### **AMICAALL plans to do the following:**

- Establish a fundraising function in the organizational structure with a plan,
- Strengthen its brand as a prerequisite for fundraising, and c) explore different fundraising opportunities and hold fundraising events.

### **Expected outcome:**

- A fundraising strategy operationalized.
- A rebranded organization
- Social Enterprise identified, and operationalized.
- AMICAALL home acquired and commercialized.

## AMICAALL STRATEGIC PLAN IMPLEMENTATION AND MONITORING FRAMEWORK 2022/23- 2026/27

Program Area 1: Public Health												
Outcome	Increased knowledge on prevention, care and treatment of HIV and AIDS in Urban Authority											
Result	At least 90% of key and priority urban populations counselled, tested and received HIV test results, 95% of the key and priority populations tested positive, linked to care and treatment											
Activities:	Y1	Y2	Y3	Y4	Y5	Unit Cost	Y1 Budget Ush'000	Y2 Budget Ush'000	Y3 Budget Ush'000	Y4 Budget Ush'000	Y5 Budget Ush'000	Outcome
1.1.1		8	8	4		18,000	-	144,000	144,000	72,000	-	Urban authorities knowledgeable about 95-95-95
1.1.2		150	150	100		1,250	-	187,500	187,500	125,000	-	Urban leaders implement 95-95-95
1.1.3		25	30	25		2,000	-	50,000	60,000	50,000	-	Increased knowledge on 95-95-95
1.1.4			2	3		8,000	-	16,000	24,000	-	-	Visibility of the programme
1.1.5		5				200	1,000	-	-	-	-	Better advocacy for HIV
1.1.6		150				200	30,000	-	-	-	-	Urban leaders implementing quality urban projects
1.1.7						100	400	-	-	-	-	# of trained leaders who have raised resources for the urban authorities.
							<b>31,400</b>	<b>397,500</b>	<b>415,500</b>	<b>247,000</b>		
<b>Outcome:</b>	<b>Improved knowledge on transmission of TB in urban Areas</b>											

1.2.1	Hire a consultant to conduct a study to document barriers to access TB in urban authority	1 consultant hired	1					35,000	-	-	35,000	-	-	Better TB programming in urban councils
1.2.2	Conduct 20 awareness raising workshop for 100 each on TB prevention and treatment	2000 urban leaders trained	20	20	20	20	20	25,000	25,000	25,000	25,000	25,000	25,000	Increase knowledge on TB in urban areas.
1.2.3	Conduct one study on TB service mapping in urban authorities and link clients to service providers	One study conducted						30,000	30,000	-	-	-	-	Better referrals for TB clients
1.2.4	Train 25 mayors to be champions of TB campaign	25 Champions trained.	25					1,250	31,250	1,250	-	-	-	Role models reaching out to clients.
	<b>Subtotal</b>							<b>86,250</b>	<b>60,000</b>	<b>25,000</b>	<b>25,000</b>	<b>25,000</b>	<b>25,000</b>	
<b>Outcome: Reduced malaria infection in urban areas</b>														
<b>Result: Urban authorities with framework on Malaria prevention and treatment</b>														
<b>Activities:</b>														
1.3.1	Select and train 100 urban authorities' leaders as malaria Ambassadors	100 leaders trained as Malaria ambassadors	50	50				1,250	-	62,500	62,500	-	-	Increased knowledge on malaria prevention and treatment.
1.3.2	Develop a simple Malaria manual for the mayors	Malaria manual developed	1					20,000	20,000	-	-	-	-	Awareness on malaria created.
1.3.3	Print and Distribute 1000 Malaria manuals	1000 manuals distributed	1000					15	15,000	-	-	-	-	Increased awareness on malaria prevention & treatment.
1.3.4	Conduct 10 regional Malaria breakfast meetings targeting 40 ppts	10 breakfast meetings held	5	5				20,000	100,000	100,000	-	-	-	Inclusion of malaria prevention strategies in urban council plans.
1.3.5	Develop messages for different communication platforms on malaria prevention	Malaria messages developed	100					100	-	10,000	-	-	-	Behaviour changes towards malaria prevention
1.3.6	Conduct malaria awareness radio talks shows in 20 Urban Authorities	10 Radios shows conducted	5	5				2,000	-	10,000	10,000	-	-	Behaviour changes towards malaria prevention
	<b>Subtotal</b>							<b>135,000</b>	<b>182,500</b>	<b>72,500</b>	<b>72,500</b>	<b>-</b>	<b>-</b>	
<b>Outcome: Urban authorities with knowledge on non-Communicable disease (NCD)</b>														
<b>Result: Urban authorities with a framework on NCD</b>														
<b>Activities</b>														

1.4.1	Select and train 100 urban authorities' leaders as NCD Ambassadors	100 urban leaders trained as NCD ambassadors	50	50			1,250	-	62,500	62,500	-	-	Behaviour changes towards NCD
1.4.2	Hire a consultant to develop a simple NCD manual for the mayors	NCD manual developed	1				3,500	-	-	-	-	-	Increased knowledge on NCD
1.4.3	Print and distribute 500 copies of the NCD manual	500 copies distributed	500				15	-	7,500	-	-	-	Increased knowledge on NCD
1.4.3	Conduct 5 regional breakfast NCD meetings with 100 mayors	5 regional breakfast meeting held.		2	3		15,000	-	30,000	45,000	-	-	Urban councils with NCD budgets
	<b>Sub Total</b>												
<b>Programme Area 2: Environmental protection and WASH</b>													
<b>Outcome: Improved solid waste management in urban authorities</b>													
<b>Result: 40% of Urban Authorities with solid waste management systems</b>													
<b>Activities:</b>													
2.1.1	Conduct 20 trainings targeting 700 leaders on solid waste mgt	700 leaders trained on solid waste management.	5	5	5	5	10,000	-	50,000	50,000	50,000	50,000	Behaviour changed on SWM
2.1.2	Hire a consultant to develop a simplified training manual and guidelines on solid waste management	Training manual developed.	1				35,000	-	35,000	-	-	-	Awareness created on SLM
2.1.3	Print and distribute 400 copies the solid waste management manual	400 copies developed and distributed.	400				30	-	12,000	-	-	-	Awareness created on SLM
2.1.4	Conduct exchange 10 learning visits for Mayors solid waste management	10 exchange visits conducted	2	2	3	3	12,000	-	24,000	24,000	-	-	Better practices in program implementation
2.1.5	Support 20 Urban authorities develop Solid Management Plans	20 urban costed plans developed		20			18,000	-	360,000	-	-	-	Urban funding secured for SLM
2.1.6	Conduct 80 radio programs on Solid waste management	80 Radio programmes conducted	20	20	20	20	2,000	-	40,000	40,000	40,000	40,000	Better SLM methods in urban councils
	<b>Subtotal</b>							-	521,000	114,000	90,000	90,000	
<b>Outcome: Improved hygienic practices in urban areas</b>													
<b>Result: Reduced incidences of diseases in urban authorities' communities</b>													
<b>Activities:</b>													
2.2.1	Conduct 20 trainings targeting 700per year for urban authorities on unhealthy hygiene practices.	700 urban leaders trained on hygienic practices	10				15,000	-	150,000	-	150,000	-	Behaviour change practices in hygiene practices.
2.2.2	Support 20 local authorities to conduct awareness campaigns	20 local authorities conduct awareness campaigns.	6	8	6	6	14,000	-	84,000	112,000	84,000	-	Behaviour changes in urban authorities
2.2.3	Support 60 per urban school hygiene campaigns	Schools conduct hygiene campaigns	20	20	20	20	1,000	-	20,000	20,000	20,000	-	Children practices hygiene practices
	<b>Subtotal</b>							-	254,000	132,000	254,000	-	

Outcome: Improved urban vegetation														
Result: 60% of the urban vegetation cover restored														
Activities:														
2.3.1	Conduct a baseline on urban vegetation	One baseline conducted												Better planning on NRM
2.3.2	Procure and distribute 20,000 tree seedlings for Urban authorities	20000 trees procured and planted.	10,000				30,000						30,000	Better environment conservation
2.3.3	Conduct 20 awareness campaigns on urban areas wetland restoration targeting 100 leaders.	20 awareness campaigns conducted	8	4	4	4	15,000						60,000	Environmental Protection in urban authorities
2.3.4	Award 20 best Performing Urban Authorities in greening the authority	20 awards given out	10	5	5	15,000							75,000	Motivation for urban leaders enhanced
2.3.5	Develop and distribute 5000 IEC materials on the value of local wetland protection	5000 IEC materials developed and distributed	2500			2500							50,000	Awareness created
	<b>Subtotal</b>												<b>1,125,000</b>	<b>2,245,000</b>
Programme 3: Institutional capacity development														
Outcome: Increased knowledge of leaders in service delivery														
Result: Effective and efficient delivery of services														
Activities:														
3.1.1	Conduct one skills capacity assessment for the mayors	One capacity assessment conducted	1										20,000	Better service delivery
3.1.2	Develop a manual for training mayors and other urban authorities	Manual developed	1										25,000	Better service delivery
3.1.3	Print and Distribute 1000 training manual to Urban Councils.	1000 copies distributed				1000							10,000	Improved service delivery
3.1.4	Conduct 4 regional trainings in identified leadership and governance gaps for 500 leaders	500 leaders trained in governance	2	2			15,000						30,000	Improved management of urban councils
3.1.5	Conduct 4 Exchange learning visits for the mayors	4 exchange learning visits conducted	1	1	1	1	20,000						20,000	Better mgt.practices Urban councils
3.1.6	Train 200 urban authority in client charter development	200 leaders trained on the charter	100	100			350						35,000	develop charter.
3.1.7	Initiate social enterprise model as an alternative source of income to support AMICAALL operations	Social enterprises established					1,000						-	AMICALL a sustainable organisation
3.1.8	Participate in national, regional and international conferences to share AMICAALL Uganda best practices, success stories, raise the profile of the Organization, exposure of staff/urban leaders and mobilize new funding partners	Number of conferences attended	20				5,000						-	Increased visibility of AMICALL



3.1.9	Develop strategic partnerships (e.g., with CSOs and the media) to empower urban leaders and communities to demand accountability from duty bearers	Partnerships developed with CSOs	5															700	3,500	-	-	-	Increased visibility and support to AMICALL
3.1.10	Develop and disseminate appropriate IEC/BCC materials and messages specifically targeting urban communities	IEC/BCC materials produced and shared	10,000															5	50,000	-	-	-	Behaviour changes in delivery of services
3.1.11	Facilitate functionality of decentralized coordination structures and mechanisms for governance, HIV/AIDS, and WASH in urban authorities	Leaders understand decentralization	23															2,200	50,000	-	-	-	Improved service delivery in the communities
3.1.12	Induction of 528 elected leaders and technical staff from 10 urban authorities and conduct a TOT for 10 AMICALL staff on legislative function and roles of leaders.	528 leaders knowledgeable about their roles	132															1,250	-	165,000	165,000	165,000	Improved relationships with technical and communities in urban councils
3.1.13	Production and dissemination of 490 copies of the Standard Rules of Procedure (Sops) in the first quarter of year one.	490 copies produced	490															60	-	29,400	-	-	Improved service delivery
3.1.14	Facilitate 210 elected leaders and technical staff of 10 urban authorities to participate in one (1) Peer learning visit.	210 leaders participate in peer learning																1,250	-	131,250	131,250	-	Improved service delivery
3.1.15	Produce and disseminate 50 copies of compendium of national laws for elected leaders and technical staff from 6 Urban Authorities	50 copies of the compendium developed	50															60	-	3,000	-	-	Improved service delivery
3.1.16	Provide technical and logistical support to Planning units of 5 Urban Authorities.	Technical support provided	5															5,000	-	25,000	-	-	Value for money in procurement
3.1.17	Conduct a 2-day training of 280 Elected leaders and technical staff on development and enactment of byelaws in 8 Urban Authorities.	280 leaders trained in the enactment of byelaws	280															1,250	-	350,000	-	-	Byelaws enacted in urban council
3.1.18	Conduct 2 trainings for 2 days on Leadership and Conflict Management for 210 Elected leaders and technical staff in 6 Urban Authorities.	210 leaders trained in conflict management	105															1,250	-	131,250	131,250	-	Improved working relationship
3.1.19	Conduct one Project entry meeting with 40 urban authority leaders and Citizens in each of the 6 urban authorities.	40 urban leaders trained on project entry	40															1,000	-	40,000	-	-	Better urban project implementation
3.1.20	Facilitate 121 community meetings in 10 urban authorities at ward level in 2 years.	121 community meetings conducted	60															800	-	48,000	48,000	-	Improved service delivery

3.1.22	Training of 175 elected leaders and technical staff from 5 Urban Authorities on principles and practices of Democratic Governance	175 leaders trained in democratic governance	75	75	1,250	-	93,750	93,750	-	-	Improved management of councils
3.1.23	Conduct a 2-day training of 315 elected leaders and technical staff in 9 Urban Authorities on financial, planning, budgeting and procurement procedures	315 leaders trained in budgeting and procurement	78	79	500	-	39,000	39,500	-	-	Improved budgeting and procurement in urban councils
3.1.24	Conduct 2 trainings for members of DPACS on their roles and interpretation of Audit reports and other finance documents.	2 trainings conducted	1	1	15,000	-	15,000	15,000	-	-	Improved service delivery.
	<b>Subtotal</b>					<b>204,500</b>	<b>1,145,650</b>	<b>718,750</b>	<b>220,000</b>	<b>165,000</b>	
<b>Outcome:</b>	<b>Well Empowered AMICAALL secretariat</b>										
<b>Result:</b>	<b>Efficient and effective secretariat delivering the mandate to leadership</b>										
<b>Activities:</b>											
3.2.1	Conduct one AMICAALL capacity assessment	Capacity assessment conducted	1		10,000	-	10,000	-	-	-	Better programming
3.2.2	Hire a consultant to develop organizational safeguarding policy	Safeguarding policy developed	1		40,000	-	40,000	-	-	-	Child protection mainstreamed in urban councils
3.2.3	Conduct a workshop targeting 30 people to disseminate the safeguarding policy to Board of Directors and Staff	30 Body members trained in Safeguarding	1		12,000	-	12,000	-	-	-	Members knowledgeable on Safeguarding
3.2.4	Conduct a 2-day training to Mayors on safeguarding policy	Mayors trained in safe guarding		1	17,000	-	34,000	-	-	-	Mayors mainstreamed on safeguarding
3.2.4	Conduct annual trainings for staff on safeguarding policy	Staff trained on safeguarding	1	1	8,000	-	8,000	8,000	-	-	Child protection enhanced in urban councils
3.2.5	Conduct 4 staff trainings (resource mobilization, Policy etc.)	Staff trained in OD	1	1	7,000	-	7,000	7,000	7,000	-	Effective and efficient management of AMICALL
3.2.6	Conduct 2 review meetings for Institutional name	2 meetings conducted		2	5,000	-	-	10,000	-	-	Institutional Name changed.
3.2.7	Procurement of office equipment	Office equipment procured	1		75,000	-	75,000	-	-	-	Efficient organisation
3.2.8	Procure land for AMICAALL office	Land procured		1	300,000	-	-	300,000	-	-	Sustainability of AMICALL
3.2.9	Hire a consultant to develop a business plan & Architectural for AMICAALL	Business plan developed		1	50,000	-	-	50,000	-	-	Fundraising conducted
	<b>Subtotal</b>	<b>Output</b>					<b>226,000</b>	<b>395,000</b>	<b>27,000</b>	<b>-</b>	

Programme Area 4: Economic Opportunities													
Urban poor are mobilised and supported to grow their business													
Increased knowledge on business development services (BDS) for the Urban poor population													
Activities:													
4.1.1	Conduct a TOT for 50 Urban leaders on BDS	ToT conducted	25	25				7,000	-	175,000	175,000	-	Better business environment in urban councils
4.1.2	Hold engagement meetings with BDS regional centres to support with information/legal services relating to employment, work permits and business registration	# of engagement meetings held	4	4	4	4	4	1,500	-	6,000	6,000	6,000	Improved business environment
4.1.3	Hold quarterly meetings with partners and urban authorities on skilling urban population.	# of quarterly meetings held	4	4	4	4	4	3,000	-	12,000	12,000	12,000	Employment opportunities
4.1.4	Hold on quarterly partnership meetings with (Youth women & Male youth) key business players in the urban authorities	# of quarterly meetings held	4	4	4	4	4	4,000	-	16,000	16,000	16,000	Access to employment to youth and women
4.1.5	Hold quarterly engagement meetings with government/wealth creation Programmes	# of engagement meetings with wealth creation	4	4	4	4	4	4,000	-	16,000	16,000	16,000	Clear guidelines on wealth creation
4.1.6	Hold quarterly engagements with Private Business Entities & Youth	# of engagement meetings with private sector	4	4	4	4	4	4,000	-	16,000	16,000	16,000	Business entities working with urban councils.
<b>Subtotal</b>									<b>-</b>	<b>241,000</b>	<b>241,000</b>	<b>66,000</b>	<b>66,000</b>
Programme Area 5: Governance, Human rights, policy and advocacy													
Enhanced advocacy and policy commitment to effectively and efficiently deliver services to urban communities by 2027.													
Urban authority leaders knowledgeable about Advocacy													
Activities:													
5.1.1	Train 150 urban authorities on Rights Based programming and Inclusion 150 trained in RBA.	150 urban authorities trained	50	50	50	50		1,250	-	62,500	62,500	62,500	Improved knowledge on RBA
5.1.2	Conduct 10 advocacy trainings to the urban authorities 10 advocacy workshops conducted	10 advocacy trainings conducted	4	4	2	2		3,000	-	12,000	12,000	6,000	Advocacy skills gained
5.1.3	Hire a consultant to develop advocacy manual for the urban authorities	Advocacy manual developed	1					25,000	-	-	25,000	-	Knowledge increased
5.1.4	Print and disseminate 2000 copies of advocacy manual	2000 advocacy copies disseminated		2000				10	-	-	20,000	-	Knowledge increased
5.1.5	Organize the annual Urban Leaders' Forum and AGM as advocacy platforms for information sharing and learning.	Annual urban forum conducted	1	1				40,000	80,000	-	-	-	Democratic practices enhanced

5.1.6	Conduct quarterly regional meetings targeting the urban leaders and other duty bearers as platforms for advocacy, capacity building, experience and information sharing	Regional meetings conducted	21								5,239	110,019	-	-	-	Information shared
5.1.7	Train elected urban leaders and selected technical staff in governance, advocacy and social mobilization	500 urban leaders trained in social mobilization	500								200	100,000	-	-	-	Increased knowledge on social mobilisation
5.1.8	Support urban leaders to conduct campaigns to promote human rights and reduce stigma and in urban communities	200 leaders trained on human rights	25								200	5,000	-	-	-	Increased knowledge on human rights
5.1.9	Conduct annual Mayors campaigns to promote good governance	25 mayors trained on good governance	25								5,000	125,000	-	-	-	Mayors promote human rights.
5.1.10	Participate in alliances/consortia/ technical working groups with influential groups and MDAs	# of engagement meetings with consortia	5								5,000	5,000	-	-	-	Partnership established.
	<b>Sub Total</b>											<b>425,019</b>	<b>119,500</b>	<b>68,500</b>	<b>687,519</b>	
<b>Program Area 6: Sustainability</b>																
<b>Outcome: Monitoring Evaluation Learning and Adaptation system in place</b>																
<b>Result: MEAL framework in place and updated regularly</b>																
<b>Activities:</b>																
6.1.1	Conduct quarterly ME support visits	# of ME visits conducted	4	4	4	4	4	4	4	4,000	16,000	16,000	16,000	16,000	16,000	Improved project implementation
6.1.2	Hold Annual General meeting	# of annual general meetings conducted	1	1	1	1	1	1	1	20,000	20,000	20,000	20,000	20,000	20,000	Improved project implementation
6.1.3	Hold quarterly Board Meetings	# of Body meetings held	4	4	4	4	4	4	4	8,000	32,000	32,000	32,000	32,000	32,000	Improved project implementation
6.1.5	Conduct Midterm and end term evaluation SP	# of evaluations conducted		1					1	50,000		50,000		50,000	50,000	Improved project implementation
6.1.6	Recruit the MEAL Officer	MEAL Recruited								5,000	5,000					Support to MEAL
6.1.7	Develop capacity of urban authorities in monitoring, evaluation and learning	# of support in ME conducted	11							5,000	55,000					Improved project implementation
	<b>Subtotal</b>										<b>193,000</b>	<b>73,000</b>	<b>123,000</b>	<b>73,000</b>	<b>107,000</b>	
<b>Outcome: AMICALL is a visible organization in country and internationally</b>																
<b>Result: Organization is sustainable</b>																
<b>Activities:</b>																
6.2.1	Hold a meeting to review AMICALL mission & vision	# of meetings conducted								5,000		5,000				Better organization mgt
6.2.2	Document and publish stories of change of Urban authorities	# of case studies documented	2					2		4,000		8,000		8,000		Replication of best practices

6.2.3	Conduct 10 media events to promote, publicize and communicate the AMICAALL brand over events, campaigns, launches and similar activities.	10 events conducted	1	2	2	2	2	2	8,000	16,000	16,000	16,000	16,000	16,000	16,000	16,000	Awareness created
6.2.4	Revamp AMICAALL Website and other social handles.	# of website redesigned	1	1	1	1	1	1	2,500	2,500	2,500	2,500	2,500	2,500	2,500	2,500	People visiting the website
6.2.5	Award the best performing Urban authority	# of urban councils awarded			1				20,000					20,000			Motivated councils
6.2.6	Disseminate the AMICALL Strategic Plan	# of events to disseminate SP		1					15,000	15,000							Support to in implementation of SP
6.2.7	Print and distribute the abridged version of the Strategic Plan	# of SP copies distributed		100					20	2,000							Support to SP achieved
6.2.8	Effectively manage various online media platforms for generating and sharing strategic information on good governance, HIV, WASH and NCDs.	# meetings to manage website							-	-							Visits to the website
6.2.9	Support urban authorities to establish systems and mechanisms for collection, analysis and reporting to inform advocacy and decision making			1	1	1	1	1	-	-							
	<b>Subtotal</b>		10						300	3,000							
<b>Outcome:</b>	<b>AMICAALL has a sustainable resource meeting the demands of its members</b>																
<b>Result:</b>	<b>AMICAALL meetings the needs of its membership</b>																
<b>Activities:</b>																	
6.3.1	Hold 8 partnerships meetings with the aim of raising financial, human and other material resources	# of partnership meetings held	3	3	3	3	3	3	4,000	12,000	12,000	12,000	12,000	12,000	12,000	12,000	Visibility of AMICALL
6.3.2	Hold a high-level fundraising meeting with President of Uganda on construction of the AMICALL house	# of fundraising meetings held							20,000					20,000			Increased programme delivery
6.3.3	Review and implement the AMICAALL resource mobilization strategy	# reviews held		1				1	-	-				-			Efficient running of the organisation
6.3.4	Construct AMICALL Uganda operation house	AMICALL house constructed		1					1,500,000					1,500,000			Efficient and effective organisation
6.3.6	Hold one on one meetings on payment of Subscription and Annual fees	# of engagement meetings held on payments	1	1	1	1	1	1	2,000	2,000	2,000	2,000	2,000	2,000	2,000	2,000	Effective organization
6.3.7	Lobby Gou for the subversion fund.	# of meetings held		1				1	-	-				-			Sustainable organization
6.3.7	Initiate and hold strategic partnership meetings with Urban authorities in Europe and America	# of strategic meetings held							15,000	15,000	15,000	15,000	15,000	15,000	15,000	15,000	Visibility of AMICALL
6.3.8	Review and operationalize AMICAALL policies, governance and management structures for improved organizational	# reviews conducted	7						1,430	10,007				-			Effective and efficient organization.

	performance																	
6.3.9	Develop capacity of urban leaders and AMICAALL management in governance																	
			# of governance sessions held	24														
6.3.10	Conduct quarterly AEC and ANTAC meetings																	
			# of quarterly engagements held	4														
	<b>Subtotal</b>																	
6.4.0	<b>Procurement of office Equipment</b>																	
6.4.1	2 Cars																	
6.4.2	Procurement of computers & office necessities and maintenance																	
	<b>Subtotal</b>																	
6.5.0	<b>Human Resource</b>																	
6.5.1	Staff salaries/NSSF, Gratuity, Medical, 13 month & others																	
6.5.2	Staff capacity building																	
	<b>Subtotal</b>																	
	<b>Grand Total</b>																	

## **CHAPTER SIX: MONITORING, EVALUATION AND LEARNING**

The implementation of the Strategic Plan will be subject to a well-defined Monitoring and Evaluation (ME) framework. Monitoring will involve periodic checking on progress to ensure that activities are being executed according to plan; and evaluation, on the other hand, will encompass the assessment of outcomes and impact on the beneficiaries for whom the interventions are intended.

AMICAALL will recruit a MEAL Manager under the supervision of the Country Director, and made functional by hiring one dedicated staff, as well as putting strong performance expectations in place. AMICAALL will conduct baseline surveys, collect data from the sources specified in the M&E framework at the defined frequencies, and analyze them to ensure that all activities are executed as planned.

In the event of any divergence from the course of the original plan, corrective actions required will be formulated and proposed by the Secretariat to the Board of Directors (AEC and ANTAC) for consideration and approval. M&E reports will be made and submitted by the Secretariat to the Board every quarter.

In order to subject the performance to an independent review, AMICAALL will periodically employ the services of external resource persons, subject to actual need and availability of funds for purposes of Midterm and End of strategic plan evaluation.

## **CHAPTER SEVEN: GOVERNANCE SYSTEMS FOR STRATEGIC PLAN**

This chapter outlines the allocation and levels of responsibility that will be specifically required for effective implementation of this strategic plan. To achieve the goal and objectives of this strategic plan, four (4) positions have been proposed to scale up the existing Human Resource team. These are: Communication and Outreach Officer; Fundraising Officer; Human Resource Management Officer; Monitoring and Evaluation Officer. The roles of respective organs are clearly spelt in the AMICAALL organogram.

### **Allocation and Levels of Responsibilities in Implementation**

#### **Annual General Assembly**

The Annual General Assembly (AGA), being the supreme body of the organization, will require the Alliance Executive Council Board of Directors to take overall responsibility for quality implementation of the Strategic Plan, and to provide strong leadership and support to the management team in the implementation process. The AGA will evaluate the proposals of the Board of Directors (BOD) for the implementation of the Plan, and the associated budget. The AGA will not only review progress made in the implementation of the SP, but also will seek any needed clarification from the BOD and provide any required advice. The AGA will review and approve any changes required in the course of the implementation of the SP.

#### **The Patron**

AMICAALL has a patron and the patron supports in resource mobilization and strategic decision-making and hence he/ she will be utilized effectively to promote the work of AMICAALL.

#### **AMICAALL National Technical and Advisory Committee**

AMICAALL National Technical and Advisory Committee - ANTAC (Composed of Officials from relevant line Ministries of Health, Local Government, Gender labor and Social Development, Lands, Housing and Urban Development and Uganda AIDS Commission. Also represented are CEOs of the sister Local Governments Associations (ULGA and UAAU), CEOs of Partner Civil Society umbrella organizations, and a representative of a key Development Partner).

#### **Alliance Executive Council (AEC) - Board of Directors**

The AEC is the policy-making organ of AMICAALL and has the power to conduct its affairs in reference to the provisions of the Constitution and the directives of AGA. The AEC will prepare Annual Plans based on the Strategic Plan in coordination with management and submit them to the AGA for review and approval. The Annual Plans will clearly spell out the activities planned, resource requirements and expected outcomes. The AEC will ensure thorough implementation of the Annual Plans, make periodic reports on progress made to the AGA, and provide sufficient explanation on any unachieved objectives.



## **The Secretariat**

The Secretariat, headed by the Country Director (CD), will prepare detailed Annual Plans and submit them to the AEC for approval. The Annual Plans will consist of the details of both program and administration, specifying detailed activities, work plans, resource requirements and expected outputs under each strategic focal area. The Secretariat will take responsibility for the day-to-day implementation of the Strategic Plan, as approved in the Annual Plan by the AEC. The Secretariat will evaluate the progress and prepare periodic reports and submit them to AEC. The Secretariat will present any challenges in the process, and provide sufficient explanation for any objectives not achieved, as well as propose any corrective measures for the consideration and approval of AEC.

## **Multi-Stakeholder Coordination Committee**

A Mayor and Town Clerk in each of the member urban authority sets up a multi-stakeholder coordination committee in their respective authority and appoints an officer of the authority as AMICAALL Local Coordinator (e.g. Urban Authority HIV Focal Person) to coordinate programme activities and service interventions delivered through the existing health systems and structures. This will be useful in implementation of the strategic plan.

## **CHAPTER EIGHT: RESOURCE MOBILIZATION AND SUSTAINABILITY**

Sustainability has been a key challenge for AMICAALL. This partly emanates from the fact that nearly the entire operational budget is supported by funding from development partners, and no recognizable income is being raised locally. The only source of local revenue has been membership fees, but this generally makes a very minor contribution. The imminent phasing out of a major funder (development partner) has put the short and long-term sustainability of the organization into question. It is therefore essential that a clear plan should be developed to address these sustainability issues. AMICAALL will pursue the following sustainability strategies:

### **Submit concept notes for Grant Applications**

This is the primary anticipated source of funding for the Strategic Plan. Urban Authorities as well as AMICAALL Secretariat will write grant proposals to mobilize resources from development partners.

### **Unsolicited proposals and concepts**

The AMICAALL Secretariat will, under the different objectives of this Strategic Plan, come up with innovative unsolicited project proposals and concepts and market them to donors for financing to support targeted urban authorities. This will be based on the need in the urban authorities, on specific issues aligned to the strategic plan goals and objectives, as well as on donors' priorities.

### **Dedicated Officer and Resource Mobilization Function**

At the Secretariat, a dedicated Officer will be appointed to ensure continuous resource mobilization. In addition, a resource mobilization function (Unit) will be put in place for provision or brokering of technical assistance to the urban authorities that will express their desire and request for support to write proposals and apply for grants from possible funding sources.

### **Fundraising events**

In partnership with Urban Authorities and other partners, AMICAALL Uganda Secretariat will, from time to time, organize fundraising events, such as Mayor's Marathons, Bicycle races, fundraising dinners or raffles, to mobilize resources for sustainable health and HIV/AIDS programs. These events will be either at the national level or at local levels.

### **Government of Uganda Funding**

The Secretariat will continue to lobby for funding from government ministries and departments to provide funds for urban Health and HIV/AIDS programme activities under this strategic plan.

### **Public Private Partnerships**

The AMICAALL Secretariat, in partnership with urban authorities, will mobilize private sector partners to put in place social enterprise projects and investments for purposes of generating funds that will ensure sustainable urban health and HIV/AIDS programmes in line with this strategic plan.

## **Engaging urban authorities during budget conferences**

The Secretariat will also work in partnership with urban authorities and local partners to mobilize possible domestic resources to finance some of the planned activities in the strategic plan. This will be done through engaging urban councils during the budget conferences to ensure that health and HIV/AIDS activities are mainstreamed, and budgets allocated.

## **Construction of AMICAALL House**

AMICALL house will be constructed, and this will house the secretariat as well commercial premises. In the 5 years, SP provision has been made for the procurement of land and construction of the building.

## **CHAPTER NINE: RISKS AND MITIGATION STRATEGIES**

There are a number of risks and challenges anticipated in the implementation of this strategic plan.

AMICAALL Uganda will put in place mechanisms to mitigate the risks and ensure that the Strategic Plan achieves its intended outcomes. The following are some of the anticipated risks and the attendant mitigation strategies:

### **Inherent bureaucracy and procedures of Local Governments**

Urban authorities often have the requisite human and financial resources to implement programmes. However, rapid implementation and accountability of donor funds is often hampered by the elaborate Local Government procedures and bureaucracies, for example in procurement, reporting and decision making. These often result in delays in implementing donor-funded projects. AMICAALL Uganda Secretariat will work with urban authorities, through activity-based disbursements, to ensure quick implementation and reporting to donor countries.

### **High costs of technical support**

The approach of this strategic plan is empowerment of the urban authority to carry out implementation. Technical support in the form of consultants will therefore be required to plan, undertake research, monitoring and evaluation and strategic plan implementation. AMICAALL will, therefore mobilize a pool of technical and resource personnel who provide short term technical support, mentorship and empowerment.

### **Limited Financial Resources required.**

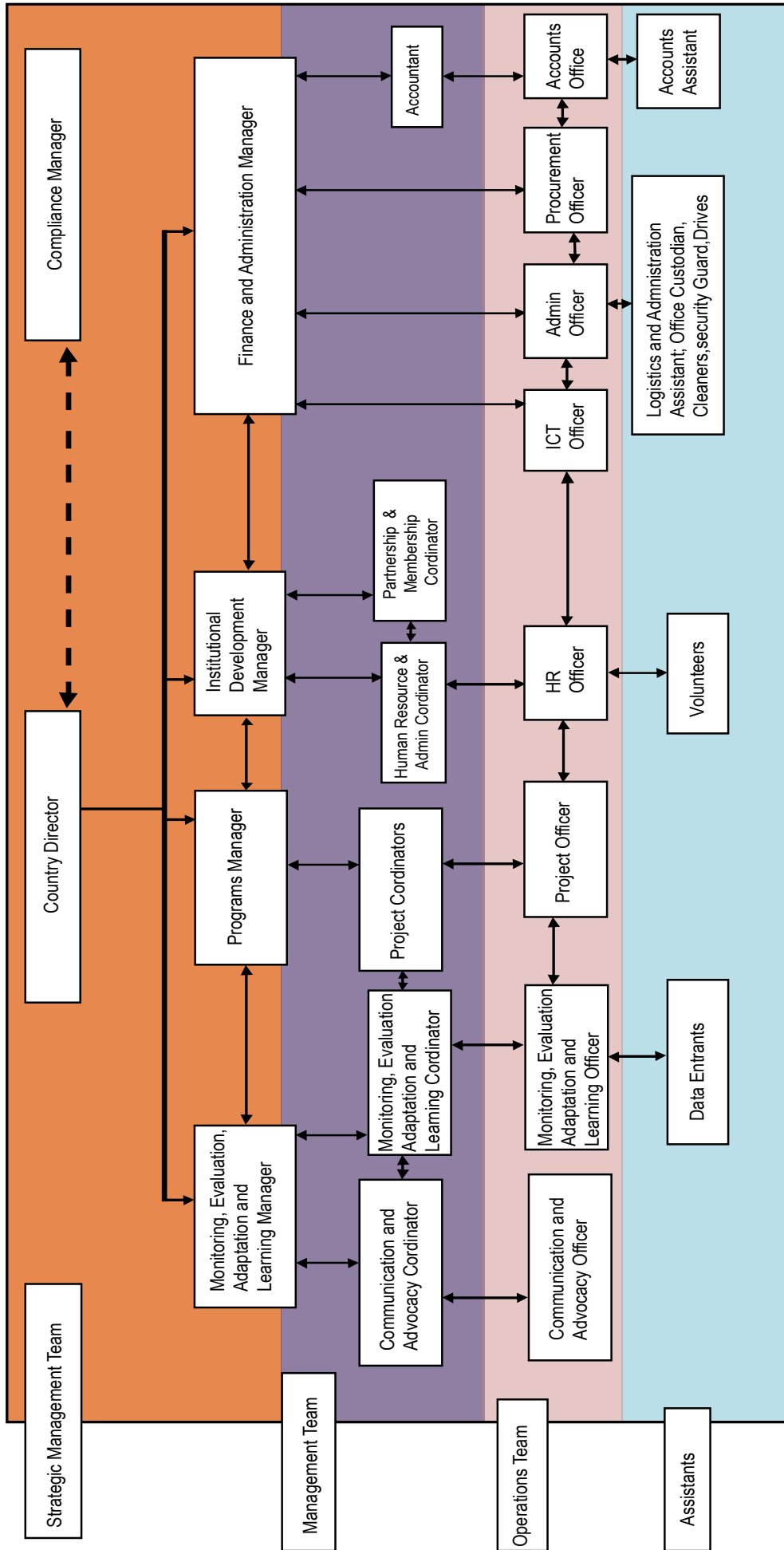
Significant financial resources will be required to implement this strategic plan. However, the revenue base in urban authorities is always inadequate to support their priorities. Besides this, Central Government grants to districts are limited and donor grants for health and HIV/AIDS programmes have significantly dwindled globally. This calls for continuous resource mobilization and putting in place a dedicated resource mobilization unit at the secretariat and in the urban councils.

### **High leadership turn-over**

The Local Government elections usually result into a significant turn-over of leaders like Mayors and Councilors, resulting in new leaders taking over offices as the implementation of this strategy commences. Although the new leaders may come in with renewed energy and innovation, they will require time to sensitize and orient for them to appreciate and be able to get on board. This is likely to result in loss of time in implementing this strategic plan.

AMICAALL Uganda will, however, ensure that this Strategic Plan is adequately disseminated, and new leaders are oriented in time to start implementing the strategic plan.

# AMICAALL Staff Structure



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10. **Annual Joint AIDS Review Report 2020/21**
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