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USAID/UGANDA GENDER EQUALITY AND SOCIAL INCLUSION ANALYSIS

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3. ACRONYMS

ADS	Automated Directives System
OAG	Office of the Auditor General
CBO	Community-based organization
CEFM	Child Early and Forced Marriage
CDCS	Country Cooperation and Development Strategy
CEDAW	Convention on the Elimination of all forms of Discrimination Against Women
CLA	Collaborating, Learning and Adapting
CSO	Civil society organization
DEC	Development Experience Clearinghouse
DO	Development Objective
EG	Economic Growth
EPRC	Economic Policy Research Centre
EOC	Equal Opportunities Commission
GAPP	Governance, Accountability, Participation and Performance
GDP	Gross Domestic Product
GESI	Gender equality and social inclusion
GBV	Gender-based violence
GOU	Government of Uganda
GYSI	Gender, youth and social inclusion
HATO	Humanitarian Assistance and Transitions Office
IR	Intermediate Result
IP	Implementing partner
KII	Key informant interview
LARA	Literacy Achievement and Retention Activity
LGBTQI	Lesbian, gay, bisexual, transgender, queer, and intersex
MAAIF	Ministry of Agricultural, Animal Industry and Fisheries
MDAs	Ministries, Departments and Agencies
M&E	Monitoring and Evaluation
MEL	Monitoring, Evaluation and Learning
MFPED	Ministry of Finance, Planning and Economic Development
MGLSD	Ministry of Gender, Labor and Social Development
MoES	Ministry of Education and Sports
MoH	Ministry of Health
MTAC	Management Training and Advisory Center
NCPWG	National Child Protection Working Group
NDP	National Development Plan

NGE	National Gender Expert
NPA	National Planning Authority
OECD	Organization for Economic Co-operation and Development
OPDs	Organization of people with disabilities
OVAW	Online violence against women
PEP	Post-exposure prophylaxis
PFM	Public financial management
PMP	Performance monitoring plan
PWD	Persons with disabilities
RAJA	Rights and Justice Activity
RMNCAH	Reproductive, maternal, newborn, child and adolescent
SAU	Show Abilities Uganda
SDG	Sustainable Development Goals
SGBV	Sexual and gender-based violence
SNE	Special needs education
SRGBV	School-related gender-based violence
SOW	Scope of work
TL	Team Lead
UBoS	Uganda Bureau of Statistics
UGX	Ugandan Shillings
ULA	Uganda Learning Activity
UNAIDS	Joint United Nations Program on HIV/AIDS
UNEPI	Uganda National Expanded Program on Immunization
UNCRPD	United Nations Convention on the Rights of Persons with Disabilities
USAID	United States Agency for International Development
UNICEF	United Nations Children's Fund
UWONET	Uganda Women's Network
UWOPA	Uganda Women's Parliamentary Association
VAW	Violence against women
VC	Value chain
WASH	Water, sanitation, and hygiene
WEEGE	Women's economic empowerment and gender equality
WHO	World Health Organization
YLA	Youth Leadership in Agriculture
YWDs	Youth with disabilities

4. KEY TERMS AND DEFINITIONS

Femicide: Femicide is generally understood to involve intentional murder of women because they are women, but broader definitions include any killings of women or girls. Femicide is usually perpetrated by men, but sometimes female family members may be involved. Femicide differs from male homicide in specific ways. For example, most cases of femicide are committed by partners or ex-partners, and involve ongoing abuse in the home, threats or intimidation, sexual violence or situations where women have less power or fewer resources than their partner.¹

Gender analysis: an analytic, social science tool that is used to identify, understand, and explain gaps between males and females that exist in households, communities, and countries, and the relevance of gender norms and power relations in a specific context. Such analysis typically involves examining differences in the status of women and men and their differential access to assets, resources, opportunities and services; the influence of gender roles and norms on the division of time between paid employment, unpaid work (including subsistence production and care for family members), and volunteer activities; the influence of gender roles and norms on leadership roles and decision-making; constraints, opportunities, and entry points for narrowing gender gaps and empowering females; and potential differential impacts of development policies and programs on males and females, including unintended or negative consequences.²

Gender balance: Gender balance is generally agreed to be a male-female ratio of between 40 and 60 percent. McKinsey, a global consulting firm, analyzed data from 50,000 managers across 90 entities around the world and found that teams with a male-female ratio between 40 and 60 percent produce performance indicators that are more sustained and predictable than unbalanced teams, in terms of employee engagement, brand awareness, client retention, and financial metrics.³

Gender-based violence (GBV): An umbrella term for any harmful threat or act directed at an individual or group based on actual or perceived biological sex, gender identity or expression, sexual orientation, or lack of adherence to socially constructed norms around masculinity and femininity. It is rooted in structural gender inequalities, patriarchy, and power imbalances. GBV is typically characterized by the use (or threat) of physical, psychological, sexual, economic, legal, political, or social coercion, control, or abuse. GBV impacts individuals across the life course, and it has direct and indirect costs to families, communities, economies, global public health, and development. GBV takes many forms and can occur throughout the lifecycle. Types of gender-based violence include: female infanticide; child sexual abuse; sex trafficking and forced labor; sexual coercion and abuse; neglect; domestic violence; elder abuse; and harmful traditional practices such as early and forced marriage, honor killings, and female genital mutilation and cutting.⁴

Positive masculinities: A term used to characterize the values, norms, and practices that gender-based work with men and boys seeks to promote, to end violence against women and girls.⁵

Value chain: The full range of activities that are required to bring a product from its conception to its

¹ WHO. (2012). Understanding and addressing violence against women.

² USAID. ADS 205. Available at <https://www.usaid.gov/ads/policy/200/205>.

³ Landel, M. (2015), Gender balance and the link to performance. Available at: <https://www.mckinsey.com/featured-insights/leadership/gender-balance-and-the-link-to-performance>

⁴ U.S. Department of State (2016), United States strategy to prevent and respond to gender-based violence globally. Available at <https://www.state.gov/wp-content/uploads/2019/03/258703.pdf>.

⁵ USAID (2015), Working with Men and Boys to End Violence Against Women and Girls: Approaches, Challenges, and Lessons. Available at https://www.usaid.gov/sites/default/files/Sector-5-SocialDev_MenandBoys.pdf.

end use. These include design, production, marketing, distribution, and support to get the product to the final consumer. The activities that comprise a value chain can be contained within a single firm or many firms.⁶

Women's economic empowerment and gender equality (working definition): Women's economic empowerment exists when women can equitably participate in, contribute to, and benefit from economic opportunities as workers, consumers, entrepreneurs, and investors. This requires access to and control over assets and resources, as well as the capability and agency to manage the terms of their own labor and the benefits accrued. Women's economic equality exists when all women and girls have the same opportunities as men and boys for education, economic participation, decision-making, and freedom from violence. This requires collectively addressing barriers to commercial activity and labor market participation, such as restrictive laws, policies, and cultural norms; infrastructure and technology challenges; unpaid care work; limits on collective action; and poorly enforced protections. Women's economic equality is just one facet of gender equality more generally, which requires attention to the full range of gender gaps—economic, political, educational, social and otherwise.⁷

⁶ USAID (2005). microNOTE #6 AMAP BDS Knowledge and Practice Task Order - Lexicon. Available at https://www.marketlinks.org/sites/default/files/resource/files/ML1778_mn_6_lexicon_03_05.pdf

⁷ This is not an official definition of USAID or any other organization but rather a practical working definition that provides sufficient clarity in pursuing USAID's economic goals with regard to gender equality and female empowerment.

I EXECUTIVE SUMMARY

I.1 BACKGROUND AND PURPOSE

In line with the requirements of the United States Agency for International Development's (USAID) Automated Directives System (ADS) 201.3.2.9 and ADS 205, USAID/Uganda contracted the QED Group under the Uganda Learning Activity (ULA) to undertake a gender analysis to inform the mission's 2022 to 2026 Country Development Cooperation Strategy (CDCS). The purpose of this country-level gender analysis is to identify key gender issues and constraints to inform the development of the new CDCS and future programming. The gender analysis report offers recommendations for USAID/Uganda to integrate gender considerations in its strategy to achieve greater gender-focused results across the mission's five priority sectors, namely: Health; Education; Democracy, Rights and Governance; Economic Growth; and Humanitarian Assistance. Per the scope of work (see Annex F), this analysis builds on and updates information in the previous gender analyses, referencing but not repeating findings, and identifying emerging trends. It also refreshes the "14-year-old girl" framework (see Annex A) in the previous CDCS to help inform and operationalize gender-equitable programming rooted in the current reality of the average Ugandan. Finally, the report includes illustrative indicators and learning questions, and identifies recommendations to strengthen gender-sensitive monitoring, evaluation and learning (MEL) (see Annex B).

I.2 FINDINGS: GENDER EQUALITY AND SOCIAL INCLUSION IN UGANDA

Women in Uganda continue to have less access to education and work opportunities, face barriers to certain markets and value chains, and have less access to finance and technology. The same is true for youth, persons with disabilities (PWDs) and refugees. There are gendered inequalities in asset ownership and in the use and control of productive resources. Women also face hurdles to meaningfully contribute to household, community, and national decision-making. These constraints are further compounded by the high prevalence of gender-based violence (GBV) that women and girls experience at home, work, in school and in public spaces. Maternal mortality, HIV prevalence, teenage pregnancy, early marriage, and school dropout rates also remain pervasive. Though Uganda has passed many laws and policies in support of gender equality and social inclusion (GESI) across sectors, implementation at all levels of government remains weak and consequently GESI transformation is far from realized. The following sections of this report provide detailed findings and analysis of these issues and more, while a brief overview of top level findings by sector is offered below.

1.2.1 HEALTH

Uganda has closed 95.7 percent of its gender gap in health (survival and life expectancy) (World Economic Forum, 2021). This notwithstanding, the average life expectancy is low for both women (60.4 years) and men (56 years), and some health indicators are still at unacceptable levels (Ibid.). For instance, despite progressive improvements, maternal mortality is still high at 375 per 100,000 live births (Ibid.) compared to a global average of 211 according to WHO estimates. About three in ten women who need or want family planning cannot access it, and about half of women experience GBV in their lifetime (World Economic Forum, 2021). In short, the macro statistics of gender parity in health risk masking these key deficiencies.

While gender and disability mainstreaming are mentioned in almost all health sector policies, they often fall short in terms of implementation and transformation. Limited attempts are made to transform harmful

cultural and gender norms (such as early and child marriage and polygamy) or relations that drive women's lack of agency in their reproductive health. About 5.4 percent of Ugandans aged 15 – 49 years live with HIV, however, the infection rate is notably higher among women (6.8 percent) compared with men (3.9 percent) (UNAIDS, 2021). **The gendered impacts of COVID-19 in the health sector:** Women constitute more than 50 percent of the health sector workforce (MoH, 2020), mainly in nursing-care roles where they are at greater risk of infection during pandemics such as COVID-19. Women are also the biggest users of health services for themselves and their households. The pandemic curfews and lockdowns have compromised women and youth's ability to access reproductive maternal, newborn, child and adolescent health services, antenatal care, neonatal care, post-violence clinical care, and adherence to HIV treatment in many instances. Women have also experienced a significant escalation of GBV during the pandemic, with some calling it "a pandemic within the pandemic" (OECD, 2021). This is reflected in the 29 percent increase in domestic violence cases reported to the police between 2019 and 2020 (Uganda Police Force, 2021). People with disabilities have likewise suffered from reduced access to health care and rehabilitation services.

1.2.2 EDUCATION

Uganda has closed 85.9 percent of its gender gap in education, compared with 84.5 percent for Sub Saharan Africa, and a 95 percent global average. Nevertheless, rapid population growth has placed extreme stress on the country's educational system, so that access, quality, and outcomes at almost all levels of education are poor. Although students fill classrooms and there is gender parity in enrollment, dropout rates are high for boys and girls. Learning facilities are often inadequate, with many schools lacking basic toilets and washrooms. Experts warn that graduates of Uganda's education system lack the skills needed for the modern economy – a problem that is even more pronounced in the country's outlying regions and among certain vulnerable populations, such as refugees, internally displaced persons, and the poor. At the root of many of these issues is chronic government underfunding.

The gendered impacts of COVID-19 in the education sector: Schools have been closed for almost two years due to COVID-19. Anecdotal evidence from the press and other development actors suggests that violence against children in their communities and online has since escalated. About 17,664 domestic violence cases were reported to the police in 2020 compared to 13,693 reported in 2019, showing a 29 percent increase. Of the victims of the cases reported, 1,133 were male juveniles, while 1,186 were female juveniles (Uganda Police Force, 2021). There is an almost equal level of violence against girls and boys. However, the impacts on girls include pregnancy, HIV infection, and early forced marriage, all of which will grossly impact their ability to continue with their education.

1.2.3 ECONOMIC GROWTH

At 0.692 (a gender gap of 30.8 percent), equality in economic participation and opportunity is still far from being achieved in Uganda, according to the 2021 Global Gender Gap Index (GGGI). Cultural and social norms dictate a gendered division of labor resulting in women's heavier time and work burdens. Women spend, on average, more than three times as many hours on unpaid childcare and housework compared with men, and almost half the time that men do per day on paid GDP work (EPRC, 2019). With high levels of income inequality and few women occupying senior management positions or running large businesses, the private sector has far to go in terms of gender equity and inclusion. Nevertheless, women are fundamental to Uganda's economic growth. One in three small businesses is owned by a woman and women comprise 75 percent of workers in the agriculture sector, which contributes almost one quarter of Uganda's GDP and 40 percent of export earnings (UBoS, 2018).

Yet, women's contributions are greatly constrained by a lack of access to capital, resources and markets. In the agricultural sector, value chains are gendered, ascribing higher value land, livestock, and crops to men, and lower value land, livestock, and crops to women: with men also controlling sales, pricing and marketing. These gendered constraints mean that women and female-headed households are more likely to be vulnerable to poverty, have a weakened voice in decision-making processes that affect them, and are less resilient to the impacts of economic shocks and other emergencies. Youth (especially young women), PWDs (especially youth with disabilities), refugees (especially women and girls), LGBTI individuals and the very poor all face numerous social and institutional barriers as both employees and entrepreneurs. These include access to infrastructure, capital, training and mentors as well as gendered stereotypes and social stigmas. Meanwhile, population growth is outpacing job creation, painting a bleak future for the burgeoning youth population. More than half of Ugandans (54 percent) are below the age of 18, and the majority (73 percent) reside in rural areas (UBOS, 2021), making agriculture the most likely first job for youth.

The gendered impacts of COVID-19 on economic development: The pandemic has had profoundly negative impacts on labor markets, poverty, inequality, and human capital formation across all populations in Uganda, but disproportionately affected women, youth, and vulnerable groups. Following a total lockdown in March 2020 that included restrictive measures on travel and access to non-essential services, the services sector – which employs more than 40 percent of women (UBoS, 2017) – was particularly hard hit, contracting by over three percent in 2020 (World Bank, 2021). Activities in key sectors like education and accommodation and food services were curtailed for most of the year (Ibid.). This adversely affected women employees and small, informal business owners, who tend to work in client-facing roles (compared with men who work more in logistics and security). Women suffered in tandem from a significant rise in violence at home and GBV in the streets and marketplaces (Nampewo, 2020). In rural areas, where the majority of the population resides, studies show a serious decline in household income, a drop in informal cross-border trade, and rising food insecurity (Muliika, 2020). Refugees, the majority of who are female and primarily work in informal and agricultural sectors, feel these impacts acutely. School closures have significantly increased women's unpaid care burdens, giving women less time to devote to economic activities and causing some to leave the labor market altogether (EASSI and SEATINI, 2020). Given the loss of jobs and closure of small businesses, many men and women have returned to agriculture activities to manage and survive the crisis.

1.2.4 DEMOCRACY, RIGHTS AND GOVERNANCE

According to statistics, Uganda has made tremendous progress in increasing opportunities for women, brought about by inclusive laws and policy reforms. More females are in decision-making positions and in school. Uganda even outranks Organization for Economic Co-operation and Development (OECD) countries like Australia, Canada and the United States with a higher percentage of women parliamentarians. However, an analysis of other sector statistics reveals discrepancies that indicate women remain far less empowered than men in every domain (see Table 2). And despite women's political inclusion, their meaningful participation in governance remains a challenge in the face of patriarchal norms and gendered patterns of power and decision-making. Per the GGGI, Uganda's gender parity scores are lowest in the political empowerment sub-index, with a score of 0.296 (a gender gap of 70.4 percent).

Effective government responses to the growing population, educational deficits, and other challenges are hindered by weak democratic institutions, widespread corruption, increasing autocracy, and the state's

retreat from providing public services. As a result, Uganda's most vulnerable groups, notably women, children, youth, persons with disabilities (PWDs) and refugees are unable to participate meaningfully in civic life and politics; lack access to basic services and infrastructure; and face the threat of violence and harassment in multiple forms. Yet, legal frameworks that accord equal status to women and men, and guarantee freedoms for women and marginalized groups are in place – starting with the Constitution of Uganda, and reinforced through key legislation such as the Local Governments Act and the Public Finance Management (PFM) Act. Uganda also has a gender policy, disability policy, youth policy, children's policy, and other sector-specific guidelines to promote gender equality and social inclusion (see Annex D). Despite these legal frameworks for GESI, awareness and implementation remains weak across sectors, driven by: patriarchal norms and gender biases that foment a lack of commitment and political will; a policy disconnect between national and local level government; and a lack of capacity and resources for monitoring and enforcement.

The gendered impacts of COVID-19 on democracy, rights and governance: As a result of the pandemic, the Government of Uganda (GOU), like many countries, held hybrid digital elections during its last presidential elections. In its review of the 2021 hybrid digital election, the Uganda Human Rights Commission raised concerns over the ability of disabled persons to effectively participate in the electoral process, citing constraints PWDs face in access to information. The Commission also cited gendered barriers to women's access to technology and an increase in already high unpaid care burdens during the pandemic as key barriers to women's participation (UHRC, 2021). Gender biases and GBV have also manifested on the internet, with women leaders and politicians in particular facing a rise in online violence and sexual harassment. In addition, anecdotal evidence from multiple sources suggests that pandemic protocols that restrict movement and public gatherings have been leveraged by authorities to harass opposition groups (largely youth) and prevent them from organizing; meanwhile, human rights groups and NGOs are also coming under increasing scrutiny and hostility from authorities.

1.2.5 HUMANITARIAN ASSISTANCE

Uganda hosts about 1.5 million refugees (58 percent children below 18 years, 3 percent elderly above 59, 21 percent female, and 18 percent male aged 18–59 years) (UNHCR b, 2021). UNHCR recorded 4,297 cases of GBV in 12 refugee settlements between January and November 2019. In addition, the 2016 Uganda Demographic and Health Survey revealed a high prevalence of GBV across districts that host refugees (GOU and World Bank, 2020). Risk factors for GBV are economic hardship and alcohol abuse by both men and women. Other significant factors include marital conflict resulting from infidelity or contraceptive use, social norms that justify violence against women and girls, weak social support systems, and poor enforcement of laws. Such factors are also associated with psychosocial problems, including trauma (Ibid.). At the national level, the 2006 Refugees Act and the 2010 Refugee Regulations make strong provisions supporting GESI; however, there is no concrete guidance on implementation. This may result in little attention paid to vulnerable refugee groups in practice.

The Karamoja region, comprising seven districts in northeastern Uganda, is home to 1.2 million people, 65.7 percent of whom are poor (UBoS, 2021). The region is classified as one of the poorest areas in the world (USAID, 2017). Over 57 percent of the population aged 14 – 60 years have no formal education, compared with the national average of 7.9 percent (UBOS, 2020). The region has the highest total fertility rate, with women of reproductive age (15-49 years) giving birth to an average of eight children (UNFPA, 2018). In Karamoja, up to 53 percent and 13 percent of women have experienced physical and sexual violence since age 15 (UNFPA, 2018).

I.3 RECOMMENDATIONS

The following table presents a summary of select high-level recommendations for strengthening GESI in the upcoming USAID/Uganda CDCS and programing across sectors. These and additional recommendations are detailed in each sector-specific section of this report.

TABLE 1: SELECT TOP-LEVEL RECOMMENDATIONS
HEALTH
<ul style="list-style-type: none"> • Support the implementation of existing GESI guidelines, policies and laws. • Ensure that all health interventions are implemented with a gender transformative approach focused on equity, behavioral change and shifting of harmful social, cultural and religious norms • Encourage IPs to identify, implement and report on interventions that address access and utilization barriers by vulnerable groups.
EDUCATION
<ul style="list-style-type: none"> • Support back-to-school and stay-in-school campaigns/interventions to improve retention and completion by girls and boys, and return to school post-COVID.
ECONOMIC GROWTH
<ul style="list-style-type: none"> • Support women’s empowerment actors to: redefine GESI narratives; promote GESI reforms; generate/promote the evidence base for investing in women and youth; operationalize advocacy; sensitize relevant GOU officials; and improve women’s legal literacy. • Support GOU to strengthen social safety nets, gender-sensitive risk mitigation planning, and early warning systems. • Address patriarchal norms in agricultural communities through GESI training/sensitization of farmer groups, local traders, private sector actors, and others. • Provide comprehensive support to women and youth entrepreneurs to access markets, finance, mentors, training and resources, including spaces designed to support innovation in agriculture and entrepreneurship. • Using a GESI lens, tailor training, technology, infrastructure and environments to meet the specific needs, skills, preferences and constraints, notably that of young women and young persons with disabilities, and rural youth. • Provide quality childcare to alleviate women’s high unpaid care burdens; and engage men in equalizing care responsibilities.
DEMO CRACY, RIGHTS AND GOVERNANCE
<ul style="list-style-type: none"> • Engage in continuous sensitization and policy dialogue with GOU enforcement bodies on GESI laws and mandates. • Enable CSOs to sensitize citizens and LG councils on GESI laws, and put in place mechanisms to help improve enforcement; establish clear outcomes and GESI criteria. • Support the Ministry of Gender, Labor and Social Development (MGLSD) to mainstream and operationalize GESI policies and tools in MDAs in cooperation with the Ministry of Finance, Planning and Economic Development. • Work with policy makers to ensure a gender-lens in tax policy and formalization policies. • Support women candidates to run for office; support politically active female youth; track, report and combat violence against women leaders and politicians. • Empower women, youth, and PWDs to participate in LG councils and electoral processes.
HUMANITARIAN ASSISTANCE
<ul style="list-style-type: none"> • Adopt attitude and behavior change approaches to change harmful norms in Karamoja and among refugee communities • Support interventions to reduce GBV in refugee and host communities • Work with existing traditional power structures in Karamoja to improve the effectiveness of interventions

Organizational Cross-Cutting Findings and Recommendations

In addition to the sector-specific recommendations, two cross-cutting GESI issues were identified at the organizational level, based on converging information from USAID reports and staff interviews: (1) Although a high level of commitment and awareness around the importance of GESI exists at the broader mission level, a continued and more intentional integration of GESI is needed at the activity and IP levels; and (2) Despite successful GESI activities and strong M&E reporting, staff expressed that the full picture of GESI impact is not clear. Corresponding recommendations for strengthening GESI outcomes are provided in section 4.6.

I.4 CONCLUSION

The sectoral disparities described above and in the preceding sections of this report reveal women's precarious situation overall, as well as that of youth, PWDs and other vulnerable groups. The inequalities they face do not exist in only one sector but are interrelated, compounding their disadvantages along the life-cycle (see Annex A) in comparison to men. For example, the marginalization of girls and other vulnerable groups (e.g., YWDs, refugee youth) in education implies that they will not be able to compete equally with men for jobs or leadership positions later in life – both in the private sector and in government. This in turn leads to their long-term socio-economic disadvantage, impeding their ability to accumulate economic assets, to afford quality healthcare, and to influence policies that affect them both at the community and national levels. With high school dropout rates continuing to rise in the wake of the COVID 19 pandemic, women will marry young, have high levels of fertility and end up poorer. This illustrates the intersectional nature of gender and other parameters of marginalization, underscoring the need for USAID to continue its integrated cross-sectoral strategy for advancing gender equality and social inclusion.

2 BACKGROUND AND CONTEXT

2.1 USAID STRATEGY AND PROGRAMMING IN UGANDA

USAID/Uganda's strategic approach recognizes the need for i) deepening USAID's partnership with the people of Uganda and their institutions; ii) making more deliberate efforts to understand the evolving context in which USAID operates; and iii) helping Uganda build the capable, enlightened and accountable leadership at all levels of society and Government that will gradually allow Ugandans themselves to drive sustainable development forward (USAID, 2016). During the 2016-2021 Country Development Cooperation Strategy (CDCS) period, USAID has focused on addressing concrete and immediate needs in health, education, or market systems through implementation at local levels. The five-year goal of the CDCS (2016-2021) was to work towards ensuring that “Uganda’s Systems Are Accelerating Inclusive Education, Health and Economic Outcomes.” This was implemented through three integrated, mutually dependent Development Objectives (DOs):

- DO 1: Community and household resilience in select areas and target populations increased.
- DO 2: Demographic drivers affected to contribute to long-term trend shifts.
- DO 3: Key systems more accountable and responsive to Uganda’s development needs.

USAID/Uganda is in the process of developing a new CDCS for 2022-2026. It is envisaged that the mission will continue to focus on the above thematic priorities. However, the focus and implementation approaches may be adjusted in response to the outcome of the various analyses that USAID has commissioned to inform the CDCS. The mission commissioned this country-level gender analysis to provide a framework for the integration of gender equality and female empowerment in its new CDCS and programs, in accordance with Automated Directives System (ADS) 201.3.2.9 and ADS 205.

2.2 COUNTRY CONTEXT

Uganda has an estimated population of 41 million people (97 males per 100 females). More than half (54 percent) are below the age of 18 years, and the majority of the people (73 percent) reside in rural areas (UBOS, 2021). Approximately 13.6 percent of the population lives with a disability (UBOS, 2014). Preliminary estimates suggest that the COVID-19 pandemic could increase poverty incidence by 2.7 to 8.2 percentage points, resulting in 1.1 to 3.2 million additional poor relative to the latest official estimate of 8.7 million in 2016/17 (World Bank, 2020). These demographics make the integration of gender equality and social inclusion in development programs crucial.

Uganda currently ranks 66th out of 156 countries on the Global Gender Gap Index. With a score of 0.717⁸ (a gender gap of 20.9 percent), Uganda’s major gender parity successes are in health and survival (0.980) and educational attainment (0.859) (World Economic Forum, 2021). However, gender parity in these areas does not mean that human development indicators in health and education in Uganda are perfect. Maternal mortality, HIV prevalence, gender-based violence, teenage pregnancy, early marriages, and school dropout rates, for example, continue to be pervasive.

⁸ | = perfect parity/equality

Despite quotas, and progress on women’s political inclusion, Uganda’s gender parity scores are lowest in the political empowerment sub-index with a score of 0.296 (a gender gap of 70.4 percent)⁹. At 0.692 (a gender gap of 30.8 percent), equality in economic participation and opportunity is also far from being achieved. An overview of key gender and social inclusion (GESI) indicators is provided in Table 2. A contextual overview of the gender landscape in Uganda reflecting the ADS 205 domains follows.

TABLE 2. KEY GENDER AND SOCIAL INCLUSION STATISTICS BY SECTOR	
HEALTH	
<ul style="list-style-type: none"> • Life expectancy at birth = 63 years (65 years for women; 56 years for men) (World Bank, 2019) • Adults aged 15 – 49 HIV prevalence rate = 5.8% (7.1% (women); 4.3% men) (UNAIDS, 2019) • Total Fertility Rate = 5.4 (UBOS, 2019) • Modern contraceptive prevalence rate = 27.3 (UBOS, 2019) • Unmet need for modern contraception = 32.5% (FP2020, 2020) • Maternal Mortality Ratio (2015) = 343 (UNICEF, 2019) • Antenatal care, at least four visits (% women aged 15-49) = 60% (UBOS, 2016) • Percent of Births Attended by Skilled Health Personnel = 96% (UBOS, 2016) • Percent of Births Attended by Skilled Health Personnel among women with disabilities = 66% (UN, 2019) • Child marriage, % women 15-19 = 22.8% (World Economic Forum, 2021) • Prevalence of sexual violence in lifetime (women aged 15 - 49) = 22% (<i>Ibid.</i>) • Teenage pregnancy = 25% (UBOS, 2016) 	
EDUCATION	
<ul style="list-style-type: none"> • Literacy rate (population aged 10 years and above) = 73% (77% male; 70% female) • Primary school annual enrolment (000's) = 8,841 (50% girls, 49.7% boys) 2017 statistics (UBOS, 2020) • Primary 7 completion rate = 59.3% boys; 60% girls (UBOS, 2020) • Transition rates to S.I (first year of lower secondary school) (60.8% boys; 60.5% girls) (<i>Ibid.</i>) • S.4 completion and Transition rates to S.5 (first year of advanced secondary school) = 24.8% (28.4% boys; 21% girls) (UBOS, 2020) 	
ECONOMIC GROWTH	
<ul style="list-style-type: none"> • Proportion of poor people = 20.3% (national), 67.7% (Acholi region), 65.7% Karamoja (UBoS, 2021) • Labor force, million people = 4.33 female, 5.47 male (World Economic Forum, 2021) • Labor force participation rate = 69.2% women; 73.9% men (<i>Ibid.</i>) • Estimated annual earned income (int'l \$ 1,000) = 1.8 for women; 3.0 for men (<i>Ibid.</i>) • Legislators, senior officials and managers, % = 31.8% women; 68.2% men (<i>Ibid.</i>) • Professional and technical workers = 41.1% women; 58.9% men (<i>Ibid.</i>) • Firms with female top managers, % firms = 15.40% female; 84.60% male (<i>Ibid.</i>) • Wage equality for similar work, (1 best -7) = 5.04 (<i>Ibid.</i>) 	

⁹ Global Gender Gap Index

- Share of workers in informal sector (% workers) = 90.4% female; 88.5% male (*Ibid.*)
- Child labor = 28% (UBOS, 2021)
- Child labor before and during COVID-19 = 20% and 37% among girls; 22% and 35% among boys (*Ibid.*)

GOVERNANCE

- Women in parliament, % = 34.9% (World Economic Forum, 2021)
- Women in ministerial positions, % = 34.5% female, 65.1% male (*Ibid.*)
- Constitutional quotas for seats for women and marginalized groups in parliament and local councils = Yes

HUMANITARIAN ASSISTANCE

- Total population of refugees (May 2021) = 1,494,505 (21% female, 18% male aged 18 – 59 years; Elderly (above 60 years) = 3%; Children below 18 years = 29% girls, 29% boys) (UNHCR b, 2021)
- As of May 2020, out of 336,478 refugee children of the primary school age cohort (6-11 years), 78% were enrolled in formal education. For early childhood development (3-5 years), only 40% of the children were enrolled, and for secondary education, only 13% were in school (UNHCR a, 2021)
- Gross Enrolment Rate (GER) = 4% among refugee girls (*Ibid.*)
- Total Fertility Rate in Karamoja = 8 children (UBoS, 2018)
- Literacy rate in Karamoja (Aged 10 years and above who are literate) = 21% (women); 33.6% men (*Ibid.*)

Laws, policies, regulations, and institutional practices that influence the context in which men and women act and make decisions: Uganda has a number of GESI laws and policies, but gaps in implementation persist. Uganda is a signatory to several pivotal international conventions on gender equality, disability rights, and inclusion of marginalized groups. Among these are the Convention on the Elimination of All Forms of Discrimination against Women (CEDAW), the UN Convention on the Rights of Persons with Disabilities (UNCRPD), and the UN Convention on the Child’s Rights.

Uganda has also passed laws and policies that accord equal status to women and men. Key among these is the Constitution of the Republic of Uganda, which guarantees freedoms for women and marginalized groups. The key constitutional articles are Articles 21 and 32, which guarantee equality before the law and outlaw any laws, cultures, customs, or traditions that harm women’s dignity or status. The Constitution also guarantees that women and men shall have equal treatment and equal economic, social, and political opportunities. The Constitution commits the State to take affirmative action favoring groups marginalized based on gender, age, disability, or any other reason created by history, tradition, or custom to redress imbalances against them (The Republic of Uganda, 1995).

The Local Governments Act 2015 emphasizes these constitutional rights and promotes quotas to represent women and people with disabilities in local councils. Another recent progressive law to promote GESI is the Public Finance Management (PFM) Act, 2015. The Act introduced legislation requiring Government Ministries, Departments, and Agencies (MDAs) to obtain a gender and equity compliance certificate before approving their budgets (Government of Uganda, 2015). The Equal Opportunities Commission’s (EOC) compliance assessments focus on four key axes of social exclusion: gender, age, disability, and geography. Uganda also has a gender policy, disability policy, youth policy, children’s policy, and other sector-specific guidelines to promote gender equality and social inclusion.

Institutionally, gender and social inclusion are housed under the Ministry of Gender, Labor and Social Development (MGLSD). However, all overarching and sector-specific policies have gender mainstreaming as a cross-cutting principle. This, alongside the provisions of the PFM Act, has compelled MDAs to set up internal institutional arrangements to promote gender and equitable mainstreaming in their respective policies, plans, budgets and procedures. The Ministries of Education and Health, for example, have gender focal point persons/desks to champion gender and equity.

However, an analysis of Uganda's gender and equity laws and policies reveals that most are at the low or middle end of the gender and equity transformative spectrum. Policies and programs are transformative if they foster critical examination of inequalities and gender roles, norms, and dynamics and recognize and strengthen positive norms that support equality. Transformative policies promote the relative position of women, girls, and marginalized groups; and transform the underlying social structures and norms that perpetuate gender and other inequalities (Uganda Health Systems Strengthening Activity, 2020). Most policies are lacking in these areas.

Cultural norms and beliefs: Negative cultural norms exist and affect women's access to services and their full enjoyment of human rights. Cultural norms are the agreed-upon expectations and rules by which a culture guides its members' behavior (Sociology, culture and societies, undated). Some cultural norms and practices are, however, detrimental to the rights and wellbeing of members. In Uganda, they include:

Child, early marriage and forced marriage: Child marriage contributes to low education attainment and higher total fertility. Women marrying earlier tend to have children earlier and bear more children over their lifetime than if they had married later. Although the minimum legal age for a woman to get married in Uganda is 18 years, the marriage of adolescent girls is common. Among women aged 20-49, 11.4 percent were married by age 15 (UBOS, 2016). About one in every ten female children (15-17 years) have ever been married. At the same time, the corresponding proportion for their male counterparts was less than one percent implying significant sex differentials of age at marriage (UBOS, 2020). However, in areas where the Singulate Mean Age at Marriage (SMAM) is low (e.g., in Otuke, Buyende, Namayingo, Mayuge, Buvuma, Kalangala, Kyegegwa, Kibale, Kakumiro, Bullisa, Nwoya, and Oyam), the pattern at first marriage is similar for both males and females (UBOS, 2019).

Preference for large family sizes: The average family size in Uganda is 4.6 (UBOS, 2021), and 30 percent of households are female-headed (UBOS, 2016). The latter is partly because some cultures prefer large family sizes as a reflection of strength, to compensate for high child mortality, and provide farm labor, among other factors. Men are generally more likely than women to want to have another child. One in 10 currently married men with six or more children want another child soon, compared with only 3 percent of women with six or more children (UBOS, 2016). In rural areas, having more children has the perceived advantage of providing more free labor for family enterprises, e.g., farming. Large family sizes have impacts on the health, nutrition, education, and overall well-being of members – especially children. They also affect women's participation in the national labor market and household savings (Economic Policy Research Institute, 2020).

Gender-based violence (GBV): The Uganda Demographic and Health Survey 2016 reported that 51 percent of women aged 15-49 years had ever experienced physical violence. About 22 percent of women

in Uganda aged 15-49 have experienced sexual violence, compared with 8 percent of men of the same age group. Five percent of women first experienced sexual violence by age 18, and by 22, 11 percent of women had experienced sexual violence. Only one percent and two percent of men first experienced sexual violence by aged 18 and 22, respectively (Ibid.). The prevalence of GBV is reported to have risen during the COVID-19 pandemic. According to UN Women, violence by an intimate partner was reported by nearly 30 percent of respondents in the past 12 months, and about 44.3 percent women, and 46.7 percent men reported that they know someone who has been affected by GBV since the onset of COVID-19 (UN Women and UNFPA, East and Southern Africa Regional Offices, 2021).

Similarly, GBV and, violence against children are key protection concerns for refugees and host communities alike, with women and girls disproportionately affected. The UNHCR, for example, recorded 4,297 cases of GBV in 12 refugee settlements between January and November 2019. UNHCR notes that host communities face similar challenges. Compared with a national average of 51 percent, 64 percent of women ages 15–49 in the refugee-hosting West Nile subregion, for example, report having experienced physical, sexual, or emotional violence perpetrated by their current or most recent spouse or partner (Government of Uganda and World Bank, 2020)

Gender roles, responsibilities, and time use: Women are more disproportionately represented in unpaid domestic and GDP work. Gender roles are typically divided into productive, reproductive, and community roles. Productive roles are those performed by men and women for pay. In contrast, reproductive roles are associated with childcare and domestic tasks required to ensure the maintenance and reproduction of labor regarding the continuity of the family – e.g., giving birth, nurturing and caring for children, and domestic chores. Community roles involve activities to improve or care for community resources and/or participating in groups or organizations, such as political organizations. These activities are often voluntary (Moser, 1999).

A study on gender time use done by the Economic Policy Research Centre (EPRC) among rural and urban communities in Uganda indicated that women typically spent fewer hours (2.3 hours on average) a day on paid GDP work than men who spent an average of 4.1 hours a day. Women spend over three hours daily on childcare and housework compared to less than one hour spent by men (Economic Policy Research Centre, 2019). This explains the high inequality in average earned annual income between men (USD 3,000) and women (USD 1,800) (World Economic Forum, 2021). Gender roles, responsibilities, and time-use also impact women/girls' education, health, and political participation.

Access to and control over assets and resources: Women's access to land is affected by unfavorable inheritance rights. The critical productive resources include land, finance, labor, and information. Land rights in Uganda are limited for women, stemming from cultural norms. Women generally have land-use rights through marital and clan ties. Uganda has four systems of land tenure: customary, *Mailo*, leasehold, and freehold. The customary system predominates, and it accords land control and management rights mainly to men. Under this system, a woman is not entitled to inherit land on the death of her husband, but the land is shared among male relatives and male children. This affects women's ability to use the land as collateral to access business finance and might explain why women typically receive loans of lower amounts than men. There is increasing ownership of mobile phones and mobile money accounts, which is helping to narrow the gender gap in financial inclusion. Mobile phone ownership offers immense

opportunities among the unbanked – 69 percent of women, compared with 84 percent of men, own a mobile phone. However, internet usage is still low at 24 percent by men and 13 percent by women (GSMA, 2020). Limited household assets and resources also affect the education of children in the households.

Patterns of power and decision-making: Political decision-making power in Uganda is predominantly held by men – who occupy more than 60 percent of electoral positions and ministerial appointments (World Economic Forum, 2021). Various reports indicate unequal bargaining power at the micro/household level, limiting women’s ability to control key decisions such as reproductive health rights, family size, education, and domestic expenditure, among others. The imbalance in power relations is also a significant driver of gender-based violence within households and in the public domain

Subsequent sections of the report examine the nature of gender equality/inequality in line with the domains of gender analysis and across USAID/Uganda’s thematic sectors (Health, Education, Governance, and Economic Growth, and humanitarian assistance) to identify potential actions to strengthen gender integration and promote parity where there are gaps.

2.3 PURPOSE AND QUESTIONS

2.3.1 PURPOSE

In line with the requirements of the ADS 201.3.2.9 and ADS 205, USAID/Uganda contracted the QED Group under the Uganda Learning Activity (ULA) to undertake a gender analysis to inform the mission’s 2022 to 2026 CDCS. The purpose of this country-level gender analysis is to identify key gender issues and gender constraints to inform the new CDCS and future programming. The gender analysis report offers recommendations for USAID/Uganda to integrate gender considerations in its strategy to achieve greater gender-focused results across the mission’s five priority sectors, namely: Health; Education; Governance; Economic Growth; and Humanitarian Assistance. Per the scope of work (SOW) (see Annex F), this gender analysis builds on and updates information in the previous gender analyses, referencing but not repeating findings, and identifying emerging trends. It also refreshes the “14-year-old girl” framework in the previous CDCS, to help inform and operationalize gender-equitable programming rooted in the current reality of the average Ugandan. Finally, the report includes illustrative indicators and learning questions, and identifies recommendations toward gender-sensitive MEL (see Annex B).

2.3.2 RESEARCH QUESTIONS

Given the demonstrated link between poverty and gender inequality, this gender analysis examines gaps and differences between women and men in Uganda in terms of: health, education, DRG, and economic growth. Guided by the research questions below (in alignment with the SOW), the authors examined issues across the five domains of gender analysis defined in USAID ADS 205, namely: Laws, Policies, Regulations, and Institutional Practices; Cultural Norms and Beliefs; Gender Roles, Responsibilities, and Time Use; Access to and Control over Assets and Resources; Patterns of Power and Decision-making.

- I. What are the current gaps between men and women, girls and boys with low-socio-economic background as relates to the areas and sectors where USAID/Uganda works, namely: economic growth, health, governance, education, youth and child development, humanitarian assistance?

2. What are the key issues and constraints to equitable political and socio-economic participation, leadership/decision-making, and access to economic, political, and social opportunities for men and women in Uganda?
3. What are the opportunities for gender integration across the following themes:
 - i. Economic development, workforce development and job readiness, micro-, small- and medium-sized enterprise development, employment, fiscal reform.
 - ii. Governance, civic engagement and participation/leadership, human rights, rule of law.
 - iii. Family health, planning and population growth, maternal and child mortality, nutrition, water, sanitation and hygiene, access to and quality of health services, health financing and systems strengthening.
 - iv. Learning outcomes, learning environment, School-Related Gender Based Violence (SRGBV), disability-inclusive education and accessibility, teacher professional development opportunities.
4. What are the specific barriers to men and women with disabilities participating in society and the economy in Uganda? What do Disabled People’s Organizations think are helpful ways donors can support reducing barriers for persons with disabilities?
5. What is the legal and policy framework to support gender equality, including gender-sensitive policies both at the central and local level? What are the legal and policy frameworks that may hinder gender mainstreaming?
6. To the extent possible to determine for such an under-reported phenomenon, what might be the effects of gender-based violence (GBV) (for different populations, but also within the context of each priority sector listed above in question 3)?

2.3.3 METHODS AND LIMITATIONS

This gender analysis draws on a combination of primary and secondary data. Primary data collection comprised remote key informant interviews (KIs) with a dozen USAID Uganda senior staff representing the mission’s sector offices as well the Program Office and M&E team (see Annex E). Secondary data collection entailed an in-depth literature review and analysis focusing at the macro and sectoral levels to identify the gender and social inequalities or obstacles and opportunities for advancing empowerment and inclusion as relates to the mission’s priority focus areas. Sources were identified through a combination of snowballing, keyword searches and recommendations from interviewees. The literature review included more than 250 resources including: relevant national policies, laws, and regulations; sectoral analyses and grey literature conducted by national government entities, USAID, other donors or international organizations, civil society, universities and think tanks; international and national statistical databases; and literature relevant to the sectors and region.

A key limitation of this gender analysis is that it does not include extensive primary data collection with affected and vulnerable populations nor site visits, primarily due to safety issues and restrictions on movement due to the COVID-19 pandemic. The authors encourage USAID to commission more project-level, value chain-level and/or localized gender analyses during the design and implementation of new activities whenever possible to ensure maximum integration of GESI considerations. Another limitation is the quality and availability of current gender-sensitive and sex-disaggregated data for certain themes or stakeholder groups across the focus sectors. Some of the available national data is either old or and may

not provide an accurate reflection of the current situation, especially in light of the increasing impacts of the COVID-19 pandemic, which has disproportionately affected women. Meanwhile, some of the USAID activity-related data may not accurately capture the full scope of GESI gains and gaps (as noted during KIs). In other cases, there is an absence of quantitative data to corroborate the qualitative information provided by marginalized groups, such as PWDs and LGBTI individuals, because the magnitude of their social exclusion is not consistently documented.

2.3.4 FINDINGS AND RECOMMENDATIONS

2.3.4.1 HEALTH

FINDINGS

Uganda has closed 95.7 percent of its gender gap in health (survival and life expectancy) (World Economic Forum, 2021). This notwithstanding, the average life expectancy is low for both women (60.4 years) and men (56 years) (Ibid.), and some health indicators are still at undesirable levels. For instance, despite progressive improvements, maternal mortality is still high at 375 per 100,000 live births (Ibid.) compared to a global average of 211 according to WHO estimates. About three in ten women who need/want family planning cannot access it and about three in ten births are not attended by skilled personnel. About five in ten women experience gender violence in their lifetime (World Economic Forum, 2021). Therefore, the macro statistics of gender parity in health risk masking such deficiencies. More headline health equity statistics are highlighted in Table 2 and interwoven into the subsequent analysis. Unaddressed GESI issues at one stage of life have adverse knock-on effects at other stages of life, as illustrated in Figure 2.

Laws, Policies, Regulations, and Institutional Practices affecting GESI in the health sector: The health sector has a compendium of policies, laws, and regulations. Some of them, e.g., the Constitution, the NDP III, and the PFM Act are not health-sector-specific. However, they have GESI implications on health outcomes for women, men, people with disabilities, youth, children, and other groups. While gender and disability mainstreaming are mentioned in almost all health sector policies - indicating some degree of gender and disability responsiveness – they often fall short of the gender and equity-transformative ideal. For example, policy documents recognize gender inequality in decision-making and access to resources as barriers to women's health services (e.g., reproductive health). However, limited attempts are made to transform harmful gender norms, roles, or relations that drive women's lack of agency in their reproductive health. Actions to change masculinity norms that discourage men from seeking care are often lacking (Uganda Health Systems Strengthening Activity, 2020).

Relatedly, even when health policies include gender and equity, good intentions 'evaporate' when it comes to measurable indicators and actual implementation. This occurs because policy-makers often have limited capacity or knowledge about gender and inequities, limited financial resources to implement policy commitments, and little personal responsibility to ensure the implementation of commitments (Rottach et al., 2018). However, the situation is gradually improving due to the PFM Act.

Gender and social inclusion issues in USAID Uganda's health priorities

GESI in HIV/AIDS and TB: About 5.4 percent of Ugandans aged 15 – 49 years live with HIV. More women (6.8 percent) than men (3.9 percent) live with HIV (UNAIDS, 2021). Other groups particularly affected by HIV are sex workers (population size estimate 130,000, and HIV prevalence 31.3 percent), men who have sex with men (population size estimate 24,100, and HIV prevalence 13.2 percent), and people who inject drugs (population size estimate 7400, and HIV prevalence 17 percent). An estimated 98,000 children aged 0 – 14 years are also living with HIV (Ibid.). On the other hand, TB is four times more prevalent among men than women; and more among urban populations than rural. TB treatment success rates remain below national and global targets with high loss to follow-up and death rates. TB leads to loss of income during sickness, death and increases vulnerability of households (MoH, 2019).

Cultural norms play a role in predisposing women and girls, men and boys to HIV. About 11.4 percent of women aged 20-49 were married by age 15 (UBOS, 2016), and one in every ten female children (15-17 years) have ever been married. Child early and forced marriage is prevalent and leads to cross-generational sex. Crossing the threshold into marriage greatly intensifies sexual exposure via unprotected sex, which is often with an older partner who, by virtue of his age, has an elevated risk of being HIV-positive (Bruce, Judith and Shelley, 2004). This places girls who have limited agency over their sexuality at risk for HIV infection because they lack the power and tools to negotiate safe sex.

Relatedly, the age of sexual debut in Uganda is low, increasing the risk of HIV infection – especially for girls. The median age at first intercourse among women aged 20-49 is 17.1 years, and 18.4 years among men. About 18 percent of women aged 20-49 have had sex by age 15 and 62 percent by age 18. By age 20, 83 percent of women aged 20-49 have had sexual intercourse. In comparison, 11 percent of men aged 20-49 first had sex by age 15, and 43 percent did so by age 18. By age 20, 70 percent of men have had sexual intercourse (UBOS, 2016). Among participants of the Uganda Population-based HIV Impact Assessment 2016-2017 who reported sexual debut before 15 years of age, the proportion who were HIV positive was 7.2 percent (4.3 percent men and 10.1 percent women). Among those who reported sexual debut after age 25, the proportion who were HIV positive was lower at 5.9 percent (6.0 percent men and 5.6 percent women).

Polygamy and multiple concurrent unprotected sexual partnerships are also highly prevalent. The Uganda Population-based HIV Impact Assessment 2016-2017 found that, among all adults, the prevalence of HIV was 14.3 percent among women who reported having two or more sexual partners in the 12 months preceding the survey, compared to 5.5 percent among men. The prevalence of HIV among those who had one partner during the same period was estimated at 5.6 percent among men and 7.3 percent among women (MoH, 2019). Engaging in multiple sexual partnerships is driven by a desire for increased sexual pleasure, cultural norms, partner infidelity, and economic necessity (Ssekamatte, et al., 2020).

GBV, especially sexual violence, also exposes women and girls to HIV infection. According to the Uganda Demographic and Health Survey 2016, about 22 percent of women in Uganda aged 15-49 have experienced sexual violence, compared with 8 percent of men of the same age group. Five percent of women first experienced sexual violence by age 18, and by age 22, 11 percent of women had experienced sexual violence. Only one percent and two percent of men first experienced sexual violence by age 18

and 22, respectively (Ibid.). SGBV (rape) and exposure to HIV infection has spiked due to COVID-19 (Apondi, et al., 2021). Economic GBV also leads women to risky sexual behavior, which in turn increases their exposure to HIV infection.

Unequal gendered patterns of power and decision-making also affect HIV prevention and care. Many women and adolescent girls do not have full control over decision-making about their sexual and reproductive lives and their health care. Adolescent girls and young women who are married or in union tend to have the least decision-making control. In addition, harmful masculinities encourage men to take risks in their sexual behaviors and keep them away from HIV services (UNAIDS, 2020).

HIV issues among people with disabilities: Persistent discrimination against and exclusion of PWDs, particularly women and girls with disabilities, increases their vulnerability, including their risk of HIV infection. Women and girls with disabilities also experience barriers to accessing HIV services and are left behind in HIV policy planning, program development, service delivery, and data collection. People with disabilities face stigma and discrimination in families and communities, lack transport to healthcare facilities, and face poor attitudes of health workers while seeking health care (UNAIDS, 2021).

HIV among LGBTI: Men who have sex with men are less likely to have access to the HIV testing, treatment, prevention and care services that could keep them healthy and well, in part because of the stigma and discrimination they face in health-care settings and throughout society (Ibid.).

GESI in malaria control: Uganda has the third-highest global burden of malaria cases (5 percent) and the 8th highest level of deaths (3 percent). It also has the highest proportion of malaria cases (23.7 percent) in East and Southern Africa. There is recurrent malaria transmission in 95 percent of the country (Severe Malaria Observatory, 2020).

Gendered dynamics of malaria disease burden: Pregnant women are more prone to malaria partly because of their reduced immunity to the disease and their vulnerable social and economic status (Malaria Consortium). Compared with those who are not pregnant, pregnant women are more likely to suffer from severe malaria and die from the disease. Malaria also causes severe anemia, exacerbating the risk already present due to the pregnancy. Anemia is associated with an increased risk of pre- and post-partum hemorrhage, a significant cause of maternal death (Severe Malaria Observatory, 2020) (Malaria Consortium).

Gendered power and decision-making: Health-seeking decisions are often taken by male family heads, which could lead to delays in seeking treatment, late diagnosis, and fatal outcomes. In addition, there are instances where only men are sleeping under Insecticide Treated Nets at the expense of children or pregnant women (Severe Malaria Observatory, 2020).

Gendered roles and burden of care: Women are the primary caregivers to sick family members as part of their reproductive gender roles. They have to juggle this alongside a multitude of other domestic and economic activities. It constrains their physical and mental health and also impacts their time for productive work. Related to gender roles still, women's domestic work, including cooking the evening meal outdoors or waking up before sunrise to prepare the household for the day, may put them at greater risk of malaria than men (UNDP, 2020).

Gendered poverty impacts of malaria: While malaria treatment is available free of charge at public health facilities, in some instances, the associated out-of-pocket costs are debilitating. A single malaria episode costs a family on average nine US dollars or three percent of their annual income (MoH, 2021). Costs include travel to the health facility, purchasing the medicine in case of stock-outs at public facilities, and nutrition. This disproportionately affects women because they are the most significant users of health services. Yet, they have limited access to and control over resources/money for these expenses.

GESI in emerging pandemic threats: While preparedness and interventions focus on bio-medical approaches, pandemics are not GESI-neutral. Diseases spread due to behavioral practices and have different impacts on women/girls, men/boys, people with disabilities, and other categories of people. The subsequent analysis focuses on GESI issues in the COVID-response, but is generalizable to other pandemics and epidemics.

Gender roles and exposure to COVID-19 infection: Women are at the heart of care and response provided at institutional and household levels. Women constitute 53.9 percent of Uganda’s health workforce (MoH, 2020), mainly in nursing-care roles. Therefore, during pandemics such as COVID-19, women are at increased risk of infection (UNWomen, 2021).

Related to the above, women are the biggest users of health services for themselves and their households. Women’s reproductive roles do not cease due to a pandemic. The COVID-19 pandemic has compromised women’s access to reproductive health services. Curfews and lock-downs affected access to antenatal care, neonatal care, and adherence to HIV treatment in many instances. The overwhelming demands of the COVID-19 pandemic have resulted in resource and staff diversion from routine health care services. Infection of health care staff has also led to the reduction or suspension of essential services in some health facilities (UNFPA, 2021).

Escalation of GBV: The COVID-19 pandemic has particularly led to an escalation of domestic and gender-based violence, with some terming GBV “a pandemic within the pandemic.” (OECD, 2021). About 17,664 domestic violence cases were reported to the police in 2020 compared to 13,693 reported in 2019, giving a 29 percent increase (Uganda Police Force, 2021). As previously highlighted in the GESI issues in HIV care and treatment, there has also been an increase in SGBV, not matched by an increase in PEP uptake (Apondi, 2021).

COVID-19 impacts on people with disabilities: Pandemics are associated with an increased risk of poor outcomes from the disease itself, reduced access to routine health care and rehabilitation, and the adverse social impacts of efforts to mitigate the pandemic (Shakespeare, et al, 2021). Lock-downs have disrupted access to rehabilitation and other health services by people with disabilities. For some who were on the road to recovering their functioning, disruption of rehabilitation could lead to permanent disability/total loss of functioning.

GESI in maternal and child health: At 343 maternal deaths per 100,000 live births and 43 infant deaths per 1000 live births (UNICEF, 2019), Uganda’s maternal and infant mortality rates remain one of the highest globally. Although childbirth and care is a typical reproductive role of women, men too have a role to play in ensuring the health of mother and child. Some men participate in these functions – e.g., by accompanying

their wives to antenatal check-ups, sharing workloads, and avoiding violence against women. However, as discussed below, gender barriers exist that undermine maternal and child health.

Decision-making power and maternal health: Women have limited power to negotiate condom use, age of marriage, timing, and spacing of pregnancies. This results in unwanted pregnancies and Sexually Transmitted Infections (STIs), both of which are associated with low birth weight and pre-term birth. Early pregnancy increases the risk of maternal mortality and obstetric fistula. Teenage pregnancy, for instance, contributes up to 28 percent of maternal deaths in Uganda (UBOS, 2019).

GBV: Gender power relations that assign greater power and dominance to men increase women's risk of gender-based violence. This can contribute to poor maternal health outcomes. Intimate partner violence (IPV) during pregnancy does not only affect the women's reproductive health but also imposes adverse health outcomes on the growing fetus due to the direct trauma of abuse to a pregnant woman's body, as well as the physiological effects of stress from current or past abuse on fetal growth and development (Berhanie, et al. 2019). It is also associated with decreased use of antenatal care. Women's experience of intimate partner violence may increase or even begin in pregnancy.

Access to and use of maternal and child health health services: The Government of Uganda's policy is to provide access to a public or private health facility within a five-kilometer radius. About 86 percent of the population access healthcare within this radius. The pattern of access to healthcare is not uniform across the sub-regions – 34 percent of the people in Acholi, and 17 percent in Karamoja, Tooro, and Kigezi still have to travel more than five kilometers to access health care (MoH, 2021). Therefore, some pregnant women and lactating mothers in rural settings have to walk long distances to access a health facility. This may be burdensome and preclude their adherence to the four recommended antenatal visits, immunization visits for their babies, and other check-ups. The situation is more precarious for pregnant women with disabilities and adolescents.

In addition, the Government outlawed traditional birth attendants (TBAs) in 2010 arguing they cannot handle pregnancy related complications including hemorrhaging in women, which contributes to 42 percent of maternal deaths and is the leading cause of death in maternal mortality in the country. The ban, however, has not eliminated TBAs. Many expectant mothers, especially in rural areas, say they prefer TBAs to skilled health workers because of their proximity, politeness, care and comfort during labor and childbirth.

Interaction between gender roles and child immunization: The Ministry of Health and WHO recommend taking a child for immunization five times before their first birthday. The immunizations aim to prevent diseases such as polio, diphtheria, whooping cough, tetanus, hepatitis B, Haemophilus influenza type B illnesses, meningitis, pneumonia, and measles (MoH, WHO, UNICEF, 2017). The WHO also recommends maternal vaccination against tetanus, pertussis, influenza, and pneumococcus. More women than men take on the responsibility of taking their babies for immunization. Long distances and waiting times at immunization clinics may also deter some women with competing domestic and commercial duties.

GESI in family planning: Uganda's total fertility (5.4 children per woman) and teenage pregnancy (25 percent) (UBOS, 2019) is due to gender issues and deficient family planning practices among others, as elaborated below.

Gender norms driving high fertility: Child marriage, polygamy, and large family sizes are still prevalent. The prevalence of child marriage in Uganda is at 22.8 percent among 15 – 19-year-old girls (World Economic Forum, 2021). The adolescent birth rate is at 113 per 1000 women ages 15 – 19 (UBOS, 2019). These practices contribute to the high Total Fertility Rates (TFR).

The average family size in Uganda is 4.7, and 30 percent of households are female-headed (UBOS, 2016). This, in part, is because some cultures prefer large family sizes as a reflection of masculinity and strength. Men are generally more likely to want another child than women, regardless of how many children they already have. One in 10 currently married men with six or more children want another child soon, compared with only 3 percent of women with six or more children (UBOS, 2016). *Access to and control over assets and resources:* Access to resources (education, information, skills, income, employment, services, benefits, time, land, and social capital) influences women's reproductive health choices. Women's education and economic status are a predictor of many reproductive health outcomes – including fertility choices. Research shows that a one-year increase in schooling in Uganda lowers the probability of first childbirth at 15 years or younger by 8.2 percent (UBoS, 2018). Relatedly, better-educated women tend to have better jobs and earn higher incomes – the foregone earnings from taking care of children would be higher for these women. Women with primary education tend to have 0 - 30 percent fewer children than uneducated women. The differential, if any, tends to widen as income increases. Further, women with secondary education tend to have 10 - 50 percent fewer children than those with primary education, narrowing gaps as income increases (Jungho, 2016).

Patterns of power and decision-making: Most married women indicate that decisions on the use of contraceptives are taken jointly. In the Demographic Health Survey (UBOS, 2016), 62 percent of married women who were using family planning reported that the decision to use contraception was usually made jointly with their husbands. However, a study by UNFPA highlights that women in rural areas who have low levels of education and agency are much more likely to be subjected to unequal power relations and have little or no communication with their partner or spouse on sexual and reproductive health-related matters. Therefore, decisions reported as being taken jointly are often likely to include a substantial percentage of decisions in which men overridingly won (UNFPA, 2019).

Gender time-use: Although family planning has the potential to create a balance between women's childbearing and care roles on one hand and economic activities on the other, if poorly managed, it can be counterproductive. A study by Pathfinder International under the USAID-funded Family Planning Activity found that women complained about the debilitating side effects of various contraceptive methods. The side-effects increase the sick-days for women, affecting their ability to conduct their domestic and economic work efficiently. Women in this study reported that they would rather be pregnant than sick. Yet, the same study revealed that service providers were more concerned about the number of women taking up long-acting family planning methods than the number of women supported to manage resultant side effects. (Among, 2020)

Parenting practices and youth access to family planning services: There is limited cultural space to discuss sex and sexuality between parents/guardians and children. This situation means that young people are often left to seek information on sexual matters on their own or experiment with risky sexual behavior. This increases the probability of teenage pregnancy, early marriage, and early childbearing. Male youth

particularly lack positive role models and mentorship to shape their reproductive health choices (Ibid.). Due to limited awareness and availability of family planning options, adolescents in rural areas start using contraceptives at age 23.8 years, yet their first sexual intercourse happens at 16.8 years (national average is 17.1 years). This implies a woman living in a rural area spends seven years after her first sex before starting contraception, compared with her urban counterpart, who spends only 3.6 years (UBOS, 2019b).

GESI in nutrition: Malnutrition in childhood and pregnancy has many adverse consequences for child survival and long-term wellbeing (USAID, 2019). Malnutrition includes three broad conditions (undernutrition, micronutrient-related deficiencies, overweight, and diet-related non-communicable diseases) (WHO, 2021). It also has far-reaching implications for human capital, economic productivity, and national development. About 2.2 million children under five years (29 percent) in Uganda suffer from stunting (low height-for-age). Stunting results from growing under the limited provision of food and health care (USAID, 2019). Anemia, which is a leading cause of maternal mortality, is also directly linked to micronutrient deficiency. The prevalence of anemia among pregnant women in Uganda is estimated at 38.9 percent (World Bank, 2019).

Women have a higher risk of undernutrition than men due to biological and socio-economic factors (Sserwanja et al. 2020). Women's limited incomes affect their ability to purchase nutritious food items (for themselves and their children) to supplement what they produce on a subsistence basis. A study analyzing 2016 UDHS data found that children whose mothers engaged in agriculture and manual work (associated with lower incomes) had higher stunting odds than those whose mothers engaged in professional work. Also, children whose mothers had a secondary education had lower odds of stunting and being underweight than children whose mothers had no formal education. This is partially explained by increased health knowledge, autonomy, and empowerment among educated women (Nankinga, et al., 2019) and access to more nutrient-diverse food.

From a disability perspective, undernutrition can lead to conditions such as brittle bones, intrauterine growth retardation and compromised vision. This may lead to loss of mobility and eyesight. Maternal malnutrition can affect the development of the fetus, cause intrauterine growth delay and increase the risk of the infant developing impairments. For example, low maternal folate is associated with an increased risk of neural tube defects, one of the clearest examples of a micronutrient-specific, often severe, and yet largely preventable disability (Groce, et al., 2014).

GESI in water and sanitation: Water is a significant input for women's domestic work. Water and sanitation are therefore affected by a range of gender issues, some of which are described below.

Gender roles, time-use, and water-use: Domestic work is predominantly done by women. This means that women need water for the preparation of food, cleaning, and washing. Unfortunately, many women, especially in rural areas, have to haul water by head over long distances. Modes of transport, e.g., bicycles and motorcycles, are predominantly owned by men and hardly used for unpaid domestic work. This constrains their physical health and takes up a lot of women's time – reducing the time available for economic activities. On Average, women and girls spend up to six hours every day fetching water, which may expose them to threats of violence and health hazards (Ministry of Water and Environment, 2018).

Gender and access to sanitation: Women and children are the most affected by lack of sanitation and inadequate safe water supply. One in every three women in Uganda risks shame, disease, harassment, and attack due to lack of access to a safe sanitation place. About 4,435 million hours are spent by women and girls in Uganda each year looking for a safe sanitation place (Ibid.). Poor sanitary facilities or lack of them puts women and children at a high risk of contracting water-related diseases like diarrhea, dysentery, and cholera.

Incomes and access to water: In some locations, especially urban areas, users need to pay a fee to access water. In Uganda, the urban poor pay as much as 22 percent of their income (Water.org, 2021) to access water from vendors. This reduces overall household income, limiting opportunities to build savings and break the cycle of poverty. This financial burden usually rests with women.

GESI in health systems strengthening USAID's Vision for Health Systems Strengthening 2030 aims to achieve three interrelated outcome goals (equity, quality, and resource optimization) (USAID, 2021). Achieving high service coverage is insufficient and even harmful if it does not meet minimum quality standards for all populations. Similarly, resources are not optimized if equity is sacrificed in the process (Ibid.). A few gender and social determinants and their interaction with selected building blocks of health systems are highlighted below. A detailed analysis of gender and social inclusion in Uganda's health system was done by the USAID-funded Uganda Health Systems Strengthening Activity (Among I. UHSSA., 2020b). The perspective below is adapted from that report.

GESI in Human Resources for Health: Despite constituting 53.9 percent of Uganda's health workforce (MoH, 2020), women dominate the nursing and midwifery cadres and are under-represented in management positions. Women are clustered in mid and lower-level positions. This is partly driven by traditional gender roles assigned to women as caregivers, which translates into women gravitating towards care-related roles in the workforce as well (Among I. UHSSA., 2020b).

GESI in Health System Financing: Tax revenue, which should be the highest source of health finances in Uganda, is low. At only 12.6 percent, Uganda's tax revenue as a percentage of GDP is low compared with 17.9 percent in Kenya, and 16.3 percent in Tanzania (World Bank, 2020). This affects the government's financing of the health budget – and subsequently, the prioritization of equity in the health sector. Notwithstanding positive strides in gender and equity budgeting, a key issue limiting access to health services by the poor and marginalized is high out-of-pocket expenditure on health. A growing reliance on out-of-pocket payments and privately organized care has resulted in health care provided on the basis of ability-to-pay, which has disadvantaged lower-income socio-economic groups. Because of low levels of public spending, out-of-pocket payments are generally higher in Uganda than in other countries in the region and in countries with similar levels of GDP per capita (World Bank, 2016). Uganda's Government expenditure on health represents only 15.7 percent of health expenditure (i.e., 0.93 percent of GDP), leaving over 42 percent to be covered by out-of-pocket payments (Ministry of Health, 2017). The burden falls disproportionately on women who are the biggest users of health services for themselves and their children.

In addition, private health insurance schemes in Uganda cover only 2 percent of the population, are risk rated and the premium depends on age and existing health conditions (Republic of Uganda, 2019). The

majority of Ugandans are not covered by any form of health insurance; health insurance mostly covers formal sector workers. Women, people with disabilities, and youth are more disproportionately represented in the informal sector and do not have access to any form of health insurance.

GESI in health system leadership, governance, and accountability: USAID invests in health governance to promote robust oversight that curtails corruption. There have been *positive strides in gender and equity planning and budgeting*, and the health sector has consistently performed well according to assessments by the Equal Opportunities Commission. However, weaknesses in budget execution for GESI priorities and corruption, which disproportionately affects women and other marginalized groups, are rampant.

RECOMMENDATIONS

TABLE 3. HEALTH KEY FINDINGS AND RECOMMENDATIONS BY GENDER DOMAIN

FINDINGS	RECOMMENDATIONS
Domain 1: Laws, policies, regulations, and institutional practices	
GESI-supporting laws and policies exist, but implementation is limited	<p>Support the implementation of existing GESI policies/laws more than/instead of the formulation of new ones. This could include formulation of simple user guides for health workers on how to integrate GESI in their work routine</p> <p>Disseminate GESI-related laws to promote community awareness</p>
Public health practices in pandemic response are not appropriately customized to meet the needs of vulnerable groups, e.g., people with disabilities and women.	Provide guidelines to planners and frontline health workers on how to integrate the needs of women, girls, people with disabilities and the elderly. Notwithstanding the need for urgency in pandemic and post-pandemic response, this will ensure that interventions mainstream gender and social inclusion.
Domain 2: Cultural norms and beliefs	
Harmful cultural norms such as early marriage, polygamy, and preference for large family sizes are still prevalent. They affect a range of health outcomes, e.g., HIV, nutrition, family planning, and maternal and child health.	Continue to ensure that all health interventions are implemented with a gender-transformative approach and are focused on behavioral change, equity and shifting of harmful norms. This will require IPs to identify activity-specific negative norms and put in place interventions to address them.
Domain 3: Access to and control over assets and resources	
Although most public health services are provided by the government free of charge, associated costs such as transportation, buying medicines, costs of nutrition associated with some health conditions preclude some women from accessing health services.	Provide indicators and reporting requirements to commit IPs to identify and report on interventions that deliberately address access and utilization barriers to health services that are encountered by the vulnerable populations

Domain 4: Gender roles, responsibilities, and time use

Due to their reproductive roles, women are the highest consumers of health services (for themselves and their children). Women are also responsible for water and sanitation access, and nutrition among others. The limited sharing of roles means that some health outcomes may be relegated due to competing domestic and economic roles.

Continue to work with IPs and other stakeholders to develop and implement user manuals and tools to promote male involvement in health – with the aim of sharing roles and promoting positive health outcomes for entire families – away from individual health outcomes for women.

Related to the above, myths surrounding contraceptive use limit women’s utilization of family planning services

Promote community awareness on the benefits of family planning.

Directly respond to the fears and myths surrounding contraceptives. This can be done through communication campaigns, as well as through provision of information to women at family planning clinics.

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Although family-planning is a potential game-changer in women’s time-use, the poor management of side effects increases sick days and limits their domestic and economic time-use. Well-intended interventions such as family planning and others that focus on women should not lead to adverse outcomes such as GBV and inability to work.

As a principle, ensure that all health interventions “do-no-harm.” This can be done by ensuring that IPs undertake comprehensive social risk mapping and put in place measures to mitigate and address unintended negative outcomes.

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Domain 5: Patterns of power and decision-making

Due to their limited agency, women (especially the youth and women with disabilities) are unable to negotiate safe sexual practices, family sizes

Support interventions that transfer life skills to women and girls, including those with disabilities, to increase their ability to control their health decisions and outcomes. This could include working through peer support groups and other structured behavioral approaches

GBV prevalence is still high

Continue to integrate GBV prevention, case identification and response into all health services.

2.3.4.2 EDUCATION, YOUTH, AND CHILD DEVELOPMENT

FINDINGS

USAID Uganda does not provide support at secondary and tertiary education levels. For this reason, the subsequent analysis will be restricted to gender and social inclusion issues affecting primary grade education. On the lifecycle spectrum, USAID's work in this sector mainly targets children, adolescents, and youth. It also targets adults in the policy-making and teaching professions and those in the caregiving/parental/guardianship role. GESI issues during these early years of education have life-long impacts (as illustrated in Figure 2, Annex A).

Uganda has closed 85.9 percent of its gender gap in education, compared with 84.5 percent for Sub Saharan Africa, and a 95 percent global average. Uganda still has a gender gap of 14.1 percent in education attainment. Annual primary school enrolment stands at 10,766 (50.4 percent girls, 49.6 percent boys)¹⁰ (MoES, 2020), up from 8,841 (50 percent girls, 49.7 percent boys) in 2017 (UBOS, 2020). An increase in total enrollment in 2020 was due to population growth (MoES, 2020). There is consistent gender parity in enrollment. However, enrollment in 2021 has generally been affected by COVID-19. Primary school completion rates are low at 53.7 percent (53.8 percent girls; 53.7 percent boys (World Bank, 2020)). The dropout rates are high for boys and girls.

Laws, policies, regulations, and institutional practices affecting GESI in EYCD: Uganda's improved gender parity in education can be attributed to international obligations (such as the SDGs, the Convention on the Rights of the Child, CEDAW, Education on For All, the Beijing Declaration, and Platform for Action) and several national legal/policy commitments. In addition to the Policy on Universal Primary Education, some of the policies promoting gender parity and social inclusion in primary education include:

- The Constitution of the Republic of Uganda provides that the State shall promote free and compulsory basic education. Articles 30 (right to education), 35 (rights of persons with disabilities), and 34 (rights of children) further emphasize the right to education for all. (The Republic of Uganda, 1995).
- Through the Uganda Vision 2040, the Government commits to eliminate gender disparities in education, ensure that girls are kept in school, and improve completion rates (Government of Uganda, undated).
- Through the third National Development Plan, the Government prioritizes human capital development by, among others, supporting ECD and rolling out early grade reading and mathematics to improve literacy and numeracy (NPA, 2020).
- The Uganda Gender Policy 2007 mandates sectors to develop and implement sector-specific gender policies to improve gender equality (MGLSD, 2007).
- The Gender in Education Sector Policy (MoES, 2016) aims to guide gender mainstreaming in the sector and promote gender equality in learning outcomes.
- The Education and Sports Sector Strategic Plan 2017/18 - 2019/20 commits the Government to eliminate all forms of gender disparities in education by 2030, build and upgrade education facilities

¹⁰ Enrolment data is available only up to June 2020. These statistics therefore do not reflect enrollment during the COVID-19 period to date.

that are child, disability and gender-sensitive, and provide safe, nonviolent, inclusive, and effective learning environments for all (MoES, 2017)

- The Persons with Disabilities Act calls for inclusive education and non-discrimination of persons with disabilities at all levels of education (The Republic of Uganda, 2020). However, challenges such as inadequate teachers trained in special needs education, lack of instructional materials, physical inaccessibility of school environments abound (NPA, 2018).
- The Public Finance Management Act promotes gender and social inclusion in sector budgeting and planning, enhancing gender, disability, and equity-responsive budgeting in the education sector (Government of Uganda, 2015).

Other policies that promote youth and child development include the Early Childhood Care and Education Policy (2018); Social Development Sector Plan 2015/16 -2019/20 (2016); National OVC policy (2004); and the National Policy on the Elimination of GBV (2016). All these policies have gender and disability mainstreaming principles.

Gender and social inclusion issues in the EYCD thematic areas:

GESI in learning outcomes: As highlighted above, Uganda is not short of laws and policies to promote gender equality in educational attainment. Despite this, the overall low quality of basic education is short-changing both girls and boys. Primary school completion rates are low for both girls and boys. This is due to unfavorable cultural practices (such as child marriage, teenage pregnancy) and economic pressures that force boys to start engaging in economic activities early. Dropout rates are likely to be exacerbated by the COVID-19 pandemic, which has led to increased teenage pregnancy, child marriage (UNICEF, 2021), and children's exposure to money-making ventures, which will increase the opportunity cost of returning to school.

The NDP III recognizes that the quality of education in Uganda is characterized by low levels of literacy and numeracy (NPA, 2020). The National Assessment of Progress in Education (NAPE) survey (UNEB, 2018) indicated that the proficiency of girls (56.1 percent) in numeracy is higher than that of boys (47.4 percent) in P.3. However, the boys (56.2 percent) get more proficient than girls (45.9 percent) in numeracy by P.6. Regarding literacy in English, the same study indicated that the proportion of P.3 girls (52.5 percent) rated proficient in Literacy in English was higher than that of boys (47.4 percent). By P.6, the literacy proficiency of girls (53.5 percent) is still slightly better than that of boys (52.7 percent). The report indicates that the metrics are lower for learners in rural schools than in urban schools and in government schools than in private schools.

Notable GESI issues from the preceding statistics are that:

- *Numeracy (50.9 percent national average by P.6) and literacy (53.1 percent) levels are generally low for both girls and boys (UNEB, 2018).* A national survey by UWEZO indicates lower levels (UWEZO, 2019). The statistics nonetheless reveal that close to 50 percent of boys and girls are exiting primary school without the requisite reading, numeracy, and communication proficiency, yet these are the foundational skills necessary for all other academic progress (USAID, 2018). For boys and girls that do not proceed to secondary school, the probability of learning these skills reduces significantly. Therefore, the achievement of gender parity amidst quality deficiencies undermines

the overall effectiveness of basic education as a lever for girls'/women's empowerment and limits the potential and quality of human capital of boys/men. Improving the quality of learning outcomes should be the primary focus while aiming for gender parity.

- *Girls' numeracy proficiency declines as they progress to higher classes.* Studies show that social and cultural norms rather than cognitive-biological factors are the main reason why girls perform less proficient than boys in mathematics (Guiso, et al 2008). Gender stereotypes that mathematics is for males may subconsciously condition girls to focus more on other skills as they grow older (Ghasemi, 2019). Gender bias amongst teachers remains prevalent and is also considered a significant barrier to achieving gender equality as teachers play a pivotal role in setting norms (UNESCO, 2021).
- *Poor learners who mostly attend rural Government schools are more likely to have lower literacy and numeracy skills.* Numeracy by P.6 (46.2 percent) and literacy (44.9 percent) are lower in rural areas compared with 67.6 percent and 66.3 percent, respectively, in urban areas (UNEB, 2018). As schools move towards online teaching and instruction via radio and television, learners from rural areas – with generally limited access to communication technology (UBOS, 2021) will further lag behind.

The overall low quality of learning outcomes results from a combination of factors, including supply-side (school infrastructure, teacher absenteeism, violence) and demand-side barriers (poverty, gender roles) that lead to absenteeism by both girls and boys. A study by Uwezo observed that although nearly all of Uganda's children are enrolled in school, many of those enrolled are not always observable in the classroom. The study reported a 24 percent absenteeism rate in primary grades (25 percent for boys and 24 percent for girls). An evaluation by the Literacy Achievement and Retention Activity (LARA) noted that learners mostly report missing school because of illness and work at home (mostly for girls) and market-day activities (mostly for boys) (USAID Uganda, 2021). Some caregivers also admit to keeping their children at home to help during planting and harvesting periods (Ibid.). For girls, in addition, studies show that older girls miss two to three school days monthly due to challenges with menstrual health and hygiene management and that over 20 percent of girls drop out of school once they start menstruation (Kalembe, et al 2020).

Evidence suggests that girls who receive an education are less likely to marry young and more likely to lead healthy, productive lives. They earn higher incomes, participate in the decisions that most affect them, and build better futures for themselves and their families (UNICEF, undated), (World Bank, 2017). However, the low quality of basic education in Uganda creates doubt about whether basic education generates these benefits for girls and women. A consistent focus on improving the quality of education is therefore required.

GESI in the learning environment: Learning environments should improve wellbeing and increase learning outcomes rather than be places of danger (USAID, 2018). UNICEF suggests that the school environment contributes to keeping children out of education (UNICEF). GESI barriers in learning environments relate to infrastructural, behavioral, and resource limitations, as discussed below.

School infrastructure is sometimes prohibitive to effective learning – especially for girls and learners with disabilities. For instance, inadequate sanitation facilities for girls during menstruation can have a negative effect on

school attendance (UNESCO, 2018). Various actors have supported interventions to increase the coverage of sex-separated toilets/latrines and boreholes or standpipes in schools. A study by UWEZO, indicates that sanitation and hygiene in primary schools are slowly improving (UWEZO, 2019). Nevertheless, tests conducted by the study showed bacteria to be present in the drinking water in about half of the schools sampled (Ibid.). Diarrheal diseases that arise from this can affect school attendance by girls and boys.

For some girls, the existence of water points at schools boosts learning and attendance. Girls (and women) are most often responsible for hauling water, especially in rural areas. As a result, lack of easy access to water for household usage has a detrimental effect on school attendance (UNESCO, 2018). UNICEF has observed improved attendance in Karamoja because girls do not have to spend long hours out of school searching for water (UNICEF). It is common in other rural areas in Uganda to find girls carrying water back home after their classes. This eases the burden of domestic gender roles and promotes school attendance by girls. Therefore, the availability of water in schools has a two-fold benefit – meeting the school-based hygiene and drinking-water needs of learners and supporting the domestic water needs of households.

Physical access to school facilities is essential for learners with disabilities. Uganda has a Building Control Act (Republic of Uganda, 2013), which requires the enforcement of disability accessibility standards (UNAPD & MGLSD, 2010) in all public buildings. The standards are mandatory for school construction projects. Most newly constructed schools have ramps. However, other standards such as building handrails in toilets/latrines are hardly followed. Most schools do not have disability-customized toilet facilities. Accessible school environments should not only be limited to accessible classrooms but accessible toilets and socialization facilities such as playgrounds as well.

Resource limitations primarily arise from limited budget allocations to ensure safe schools and provide instructional materials on the one hand and high poverty levels that preclude poor learners (boys and girls) from accessing necessities such as scholastic materials and menstrual hygiene products (girls) on the other. A study on child poverty indicated that multi-dimensionally poor children are twice to four times more likely to be education-deprived than non-poor children. About 90 percent are likely to lack books compared with 75 percent of the non-poor, and 73 percent are unlikely to afford uniforms compared with 57 percent of the non-poor (UNICEF, 2019).

Behavioral barriers that make the learning environment uncondusive: The school environment often reflects, perpetuates, and even exacerbates and entrenches gender inequalities and stereotypes. For example, girls are usually assigned care roles that they are expected to perform at home, such as washing dishes, serving tea, and taking care of teachers' young children. Expectations that girls should obey and defer to boys and men support an authoritarian style pedagogy that encourages boys to participate more actively and vocally than girls. In addition, the prevailing societal belief that boys and men are more capable and more intelligent than girls and women influences teachers' attitudes and assumptions about girls' capabilities and how girls are treated and regarded in the classroom (Jones, 2020).

Gender norms at home are also skewed against girls, which affects their continued learning. Girls are typically expected to undertake more household duties than are boys, which impacts their available time

for studying. Boys' education is still prioritized over that of girls, and if school-related costs such as uniforms and supplies for all children in the family are beyond the financial means of the parents/guardians, typically the choice will be made to support the boys' education at the expense of the girls'. Long distances to school are more problematic for girls than for boys. In contexts where it is culturally inappropriate for girls to ride bicycles, or bicycles are purchased primarily for boys; girls can spend several hours a day walking to and from school (and are exposed to sexual harassment), while boys with bicycles have a much shorter commute time (Ibid.).

School-Related Gender-Based Violence (SRGBV): SRGBV results in sexual, physical, or psychological harm to girls and boys. It includes any form of violence or abuse based on gendered stereotypes or abuse based on their sex. It includes but is not limited to rape, unwanted sexual touching, unwanted sexual comments, corporal punishment, bullying, and verbal harassment. Unequal power relations between adults and children and males and females contribute to gender violence. Violence can occur in school buildings (including dormitories), school grounds, or going to and from school and may be perpetrated by teachers, students, or community members. Girls and boys can be victims or perpetrators (USAID).

Prevalence of SRGBV: Violence against boys and girls in Ugandan schools is common. A national violence against children survey published in 2018 (MGLSD, 2015) estimated that 59 percent of females and 68 percent of males children experienced physical violence prior to age 18. About 35 percent of girls and 17 percent of boys have experienced sexual violence, while 34 percent of girls and 36 percent of boys have experienced emotional violence. Most of the violence is perpetrated by male teachers - 30 percent of girls and 42 percent of boys have experienced violence perpetrated by male teachers. In comparison, 20 percent of girls and 16 percent of boys have experienced violence perpetrated by a female teacher. Fellow students also perpetrate violence – 7 percent of females, and 17 percent of male students have experienced violence by a male student. In comparison, six percent of girls and less than one percent of boys have experienced violence from a female peer. Sexual violence also happens between students – seven percent of girls and six percent of boys have experienced sexual violence by classmates (Ibid.).

Impact of SRGBV on learning outcomes: SRGBV negatively affects school attendance and ultimately impacts learning outcomes (literacy and numeracy proficiency by the ideal age). About 11 percent of female and 7 percent of male students who experienced sexual violence missed school because of the violence. Also, 29 percent of female and 27 percent of male students who experienced physical violence missed school due to the violence. In comparison, 27 percent of female and 23 percent of male students who experienced physical violence by teachers missed school.

Implications for interventions in schools: Statistics do not show marked differences in SRGBV prevalence between against girls and boys. This calls for an all-school approach that addresses violence against children. According to the evidence assessed by “What works to prevent violence against children” (Ligiero, D., et al 2019), the “Good School Toolkit” is effective in reducing staff violence against children in Ugandan primary schools. The toolkit helps educators and students explore what makes a healthy, vibrant, and positive school and guides them through a visioning process to create their vision.

COVID-related impacts: With schools closed for almost two years due to COVID-19, anecdotal reports by the press and other development actors speculate that violence against children in their communities and online has escalated. About 17,664 domestic violence cases (sexual, physical and economic) were reported to the police in 2020 compared to 13,693 reported in 2019, giving a 29 percent increase. Of the victims of the cases reported, 1,133 were male juveniles, while 1,186 were female juveniles (Uganda Police Force, 2021). There is an almost equal level of violence against girls and boys. However, the impacts on girls include pregnancy, HIV infection, and early forced marriage, all of which will grossly impact their ability to continue with their education. Therefore, there is an urgent need to adopt school-based interventions to a community-based approach to protect children against violence.

Disability-inclusive education and accessibility: An estimated 7.5 percent of children aged 6-17 years and 3.5 percent of children aged 2-4 years have a disability (UBoS, 2018). According to the Ministry of Education and Sports, some 9,597 pupils enrolled in pre-primary schools (1.6 percent) have impairments. The majority were children with mental impairment (28 percent), followed by hearing impairments (25 percent), visual impairment (22 percent), physical impairment (16 percent), autism (5 percent), and multiple handicaps-deaf and blind (4 percent) (MoES, 2017). Children with special needs in primary schools constitute 2 percent (172,864 children) of total primary level enrollment and 9 percent of the overall children with special needs. Hearing (27.2 percent), mental (22.7 percent), visual (25.8 percent), and physical impairments (17.9 percent) constitute the percentages of impairment. More than half (52.6 male) of the pupils with disabilities are males (Ibid.).

Available opportunities: The People with Disabilities Act (2006) promotes both inclusive schools and special schools. Therefore, children with special needs access education in three types of schools: special schools, units attached to mainstream schools, and all-inclusive schools that allow access to children with or without disabilities. There are currently 17 special schools, 84 attached units, and 27 all-inclusive schools at primary (GPE, 2020). Notwithstanding the expansion of opportunities for children with disabilities to attend school, several barriers persist.

Barriers to inclusive education: In addition to barriers related to physical accessibility/reasonable accommodation previously discussed, children with disabilities face several obstacles that hinder their enrolment and retention in school. They include the inability to afford high costs of learning materials, e.g., braille charts for learners with visual impairment, shortage of teachers with special needs education (SNE) skills, stigma from teachers and peers, and negative community attitudes about the education of children with disabilities (NPA, 2018) (Bamwesigye, 2018). Other challenges relate to limited data for planning and limited public financing for special needs education (BMAU/UNWomen, 2019). Public funding for special needs education accounts for only 0.1 percent of the education sector budget (World Bank, 2020). The MoES provides subvention grants to schools with units for special needs to purchase instructional materials. Grants amount to only Uganda shillings (UGX) 20,000 (USD 5.6) per child with a disability per year (BMAU/UNWomen, 2019).

GESI in teacher professional development opportunities: A country's capacity to measurably produce learning outcomes relies on its ability to ensure, among others, that teachers have the skills, motivation, and support to teach effectively (USAID, 2018). Qualified teachers determine a pupil's academic excellence

especially in the lower grades (MoES, 2017). GESI issues in teacher professional development exist in recruitment, pre-service training, and in-service practice/development.

Sex and disability composition of teachers: The majority (86.5 percent) of pre-primary teachers are females. However, female teachers constitute only 42.8 percent (81,045) of primary school teachers (189,135) for public and private schools in the country. The proportion of female teachers continues to decline at higher levels of the education system (24.6 percent at secondary level) (MoES, 2017). This trend can reinforce harmful stereotypes of women as adequate teachers at lower levels of education but unable to teach more complex subjects at higher levels (UNICEF, 2019). These disparities are also problematic because more female teachers can encourage girls (and their parents) to enroll in and stay in school. Female staff can also help reassure parents that schools offer a safe and welcoming environment, especially for girls (UNESCO, 2018). Their absence also has the unintended effect of depriving children, especially in rural communities, of role models that challenge deep-rooted gender stereotypes (UNICEF, 2019). There is no data on the disability status of teachers – the same conclusions can, however, be drawn about the lack of role models for children with disabilities.

GESI in teacher training: Education sector policies such as the Gender in Education Policy and the National Strategy for Girls' Education call for integrating gender into the teacher training. However, this is yet to be fully implemented. Uganda has however been promoting inclusive education in line with the Salamanca Statement and Framework of Action on Special Needs Education (United Nations, 1994)– a gradual shift away from special schools only. All teachers are central to the implementation of this strategy. The faculty of Special Needs and Rehabilitation at Kyambogo University is mandated to train SNE teachers. The Faculty offers Certificate, Diploma, and Bachelor's programs for teachers and other personnel (Okwaput). Although it would be ideal that all schools have SNE teachers, this is not the case. Uganda still has a very small pool of teachers trained in SNE, and it is common to find most mainstream schools without any teachers with SNE skills.

GESI in teaching practices/pedagogy: Gender-sensitive pedagogy is crucial because it prevents gender stereotyping, improves classroom participation by boys and girls, and develops the potential of learners (Nabbuye, 2018). Notwithstanding these benefits, many teachers in Uganda are not practicing gender pedagogy in the classroom and school environment. This is due to their unchecked gender biases/attitudes - teachers' perception of their students' abilities can sometimes affect how they teach, assign roles, and engage with their students. Educators who are expected to cultivate gender equality in their classrooms are shaped and influenced by gender constructs, roles, responsibilities, and assumptions of their socio-cultural contexts (Jones, 2020). Teachers are not trained to use gender pedagogy, they use teacher-centered approaches, limiting student engagement, and teachers do not feel personally responsible for empowering girls (Nabbuye, 2018).

RECOMMENDATIONS

TABLE 4. EYCD KEY FINDINGS AND RECOMMENDATIONS BY GENDER DOMAIN

FINDINGS	RECOMMENDATIONS
Domain 1: Laws, policies, regulations, and institutional practices	
<p>Despite gender parity in education attainment, the quality of basic education is generally low. The status quo is neither beneficial to boys or girls.</p>	<p>Through existing Activities, e.g. Integrated Child and Youth Development Activity (IYCD), continue to improve and accelerate the quality of basic education (numeracy, literacy, completion, transition) for all. This could include:</p> <ul style="list-style-type: none"> • Map innovative approaches to fast track numeracy and literacy skills, and train teachers to adapt the approaches • Support regular assessments, backed by remedial support for weak schools and pupils
<p>Inclusive education for children with disabilities still encounters challenges such as lack of SNE skills, instructional materials, and inaccessibility of the infrastructure. There is limited public financing for inclusive education.</p>	<p>Set up a new integrated Disability Activity to</p> <ul style="list-style-type: none"> • Support teacher training in SNE skills • Provide disability-appropriate teaching and learning aides • Remove physical barriers in schools and make classrooms and school facilities accessible • Meet scholastic and non-scholastic needs of learners with disabilities
Domain 2: Cultural norms and beliefs	
<p>There is gender parity in dropout rates. Primary school progression and completion are affected by a myriad of unique factors for boys and girls.</p>	<p>Support behavioral change interventions and back-to-school/stay-in-school campaigns to improve the appreciation of the relevance of quality education for both girls and boys to improve retention and completion.</p> <p>Support community-based interventions to compel parents and leaders to ensure retention and completion of primary school by boys and girls.</p> <p>Support the formulation and implementation of local by-laws to promote school attendance and retention</p>
<p>Teachers' attitudes/biases affect pedagogy and how they support girls and boys in the classroom/school. Negative stereotypes are reinforced that affect girls.</p>	<p>Partner with MoES to ensure that gender pedagogy is included in teacher training curricula, e.g. through a) Provision of classroom-based GESI user guides for teachers.</p> <p>Reviving school inspection and ensuring that inspectors check for and address gender-biased language</p>
Domain 3: Access to and control over assets and resources	
<p>Poverty affects access to school necessities, e.g., books, uniforms, and specialized equipment for learners with disabilities, leading to the prioritization of boys' education over girls'.</p>	<p>Continue to promote income support through OVC programming and other programs in the economic growth portfolio</p> <p>Set up a new integrated Disability Activity to meet the needs of learners with disability, alongside other activities highlighted under Domain 1,</p>

The shortage of water at home and in schools limits the regular attendance of girls, especially during their menstrual days. It also takes up girls' study time as they have to look for water for domestic use

Support school-based WASH programs to meet the school-based hygiene and domestic water needs of girls

Domain 4: Gender Roles, Responsibilities, and Time Use

Girls get assigned more domestic roles at home and school, which affects reading time.

Promote back-to-school campaigns to encourage children to go back to school post-COVID. This could include:

- a) Mass communication campaigns about returning to school
- b) Active tracing of child mothers and provision of customized support for their return to school
- c) Support for enforcement of laws (including by-laws) for school attendance

COVID-19 has interrupted learning – children are increasingly engaging in economic activities, which could result in higher drop out of school by girls and boys.

Strengthen interventions through OVC programming to prevent child labor during and after the COVID pandemic.

Domain 5: Patterns of power and decision-making

Violence against children is still prevalent in schools, and it affects attendance and contributes to school dropout for both girls and boys.

Integrate the INSPIRE¹¹ approach in existing activities to end violence against children/SRGBV (in communities and schools). Support the “Good School Toolkit” which helps educators and students to explore what makes a healthy, vibrant, and positive school and guides them through a visioning process to create their ideal school.¹²

¹¹ INSPIRE is a set of seven strategies for ending violence against children. They:

1. Implementation and enforcement of laws: such as those criminalizing the violent punishment of children by parents (and teachers);
2. Norms and values: by changing beliefs and behaviors around gender roles;
3. Safe environments: by targeting violent “hotspots” and enhancing the built environment (e.g. schools)
4. Parent and caregiver support: such as the provision of training in parenting;
5. Income and economic strengthening: including microfinance combined with training around gender norms;
6. Response and support services: such as treatment programs for juvenile offenders;
7. Education and life skills: for example, establishing a safe school environment and improving children's life and social skills.

¹² <https://raisingvoices.org/good-school/>

FINDINGS

Though Uganda has reduced poverty faster than other countries in Africa (Feed the Future, 2021) it still faces considerable economic and social inequalities. With a Gini coefficient of 0.42 (UNECA, 2017),¹³ income inequality in Uganda is among the highest levels in Africa (Martin, 2020). While male-female labor force participation rates are relatively on par, women comprise just 15 percent of top managers in firms and constitute 40 percent of professional and technical workers compared with almost 60 percent of men (see Table 2). The majority of men (88.5 percent) and women (90.4 percent) work in the informal sector, and less than 2.8 percent of Ugandans have access to one social security protection (ILO, 2021). Noting that gender inequality is not a symptom of poverty, but a fundamental cause of poverty (USAID, 2021), Uganda ranks low (159 out of 189 countries) in the UNDP Gender Inequality Index 2020.¹⁴

While poverty has declined in recent years, significant regional disparities exist. A USAID study found significant income disparity among the country's 121 districts, with GDP in some of the richest districts (Wakiso, Kampala and Mukono) reaching nearly *60 times* that of the poorest (Kagadi, Alebtong, and Otuke). GDP is heavily concentrated in Central Uganda: together Kampala, Wakiso, and Mukono *account for nearly half of Uganda's total GDP, while comprising only about 10 percent of Uganda's population* (Rafa, 2017). These income disparities are reflected in the fact that the proportion of poor people in the Acholi region (67.7 percent) and Karamoja (65.7 percent), is more than triple the national average (20.3 percent) (UBoS, 2021). Meanwhile, Uganda's working-age population is growing rapidly and is estimated to increase by 13 million people between 2017 and 2030 (Merotto, 2020). Agriculture is the mainstay of the Ugandan economy, employing approximately two-thirds of the labor force and providing approximately half of export earnings (USG, 2021) and almost a quarter of GDP. 75 percent of the workforce and 55 percent of youth in Uganda are engaged in the agriculture sector, and Uganda is addressing youth unemployment, in part, by creating more opportunities for rural youth to become involved in the sector. Women, in effect, are the backbone of the economy as they account for three-quarters of the agricultural labor force (UBoS, 2018).

Laws, policies and institutional framework for GESI in economic development: Key national policies and legislation shaping GESI within the context of Uganda's economic development agenda include: the third NDP (which prioritizes human capital development), the National Gender Policy 2007 (which mandates the MGLSD and other Line Ministries to develop and implement sector-specific gender policies to improve gender equality, and sets priority action areas at the national, sectoral, district and Community levels) and the Public Financial Management (PFM) Act (promotes gender and social inclusion in sector budgeting and planning, enhancing gender, disability, and equity-responsive budgeting across sectors (Government of Uganda, 2015). (See Annex D for a list of national policies supporting GESI.)

Earlier this year, Parliament finally passed two critical bills that were celebrated as huge wins for Uganda's women's movement, though they have not yet been assented to by the President. The Succession Amendment Bill provides property and inheritance rights for women and female dependents in the case

¹³ Gini coefficient gauges economic inequality by measuring income distribution among a population. The coefficient ranges from 0 to 1, where 0 = perfect equality and 1 = perfect inequality.

¹⁴ This index is a composite measure to quantify the loss of achievement within a country due to gender inequality. It uses three dimensions to measure opportunity cost: reproductive health, empowerment, and labor market participation.

of a deceased spouse, bringing the law into conformity with international human rights standards (UWOPA, 2021). Meanwhile, the Employment Amendment Bill requires all employers to put in place measures to prevent sexual violence and harassment in the workplace.¹⁵ It also provides care for unpaid domestic workers – recognizing this work as formal and requiring them to be paid, provided with welfare, and protected from abuse, with mechanisms to report abuse (Ibid.). The bill also provides protection for employees in general, which includes the many women employed in small, informal businesses where they are prone to sexual abuse and exploitation.

Despite progress in the legal framework for gender equality, the commitment, enforcement capacity and even resistance toward implementation of reforms remains a concern (see section 4.4, DRG, for details). The scenario is similar when it comes to pro-PWD legislation – the framework exists, but enforcement is weak (see more on PWD employment below). The Persons with Disabilities Act 2019 replaced and repealed the Persons with Disabilities Act 2006, the National Council for Disabilities Act 2003 and the Uganda Foundation for the Blind Act. The 2019 Act aligns the legal definition of disability to the international Convention on the Rights of Persons with Disabilities, notably expanded from previous legislation to include mental impairments; it provides protection against discrimination in educational institutions, health care and a range of other services. The 2019 Act also provides tax incentives to employers of people with disabilities, allowing ‘deductions of up to ten percent on the chargeable income, as may be provided for by the Income Tax Act’ (Griffiths, 2020).

Gender and social inclusion in USAID’s economic growth thematic areas:

Employment: Unemployment remains a challenge particularly among youth and women. Prior to the pandemic, Uganda’s economic growth ranked among sub-Saharan Africa’s strongest, with an annualized average growth rate of 5.4 percent between 2010 and 2019. Nevertheless, there has been limited creation of productive and decent jobs to absorb the burgeoning youth labor force and improve livelihoods. The population growth rate has consistently outpaced the jobs creation rate leading to increasing unemployment and pervasive underemployment. Where jobs have been created – mostly in low-productivity trade and small-scale agriculture – few young Ugandans have benefited from them – especially women (Center for Development Alternatives, Enterprise Uganda, 2018).

Uganda’s official unemployment rate is 9.2 percent according to UBoS. However, almost 40 percent of the working population works in subsistence agriculture, with significantly more women (47 percent) in subsistence than men (31 percent). Among the working age population (ages 14-64), there are more unemployed women (14 percent) than men (6 percent). Income inequality is also high, with the majority of women in paid employment earning only half of what men earn (i.e., median monthly earnings are UGX 110,000 (USD 30.83) for women and UGX 220,000 (USD 61.66) for men). Men also tend to engage more in paid employment (46 percent) compared to women (28 percent). Those who are formally employed earn more than double those in informal employment, noting that 87 percent of workers outside agriculture are informally employed. The service sector employs the highest proportion of women (48.5 percent), followed by agriculture (44.6 percent) and production (26.5 percent) (UBoS, 2020).

¹⁵ Other key GESI-related provisions of the Employment Bill include: to provide for the protection of working breastfeeding mothers; to require employers to put in place policies and facilities for breastfeeding mothers; to prohibit employment of persons as casual employees for more than three months with the same employer.

Women's workloads considerably exceed those of men, especially in rural areas. A study on gender time use among rural and urban communities in Uganda found that women on average spend almost half the time that men do per day on paid GDP work (2.3 hours and 4.1 hours, respectively), and more than three times as many hours on childcare and housework compared with men (three hours and less than one hour, respectively) (EPRC, 2019). This contributes to the high inequality in average earned annual income between men (USD 3,000) and women (USD 1,800) (World Economic Forum, 2021).

Impacts of COVID-19. Economic growth has slowed to its lowest pace in over three decades due to COVID-19. The pandemic has had profoundly negative impacts on Uganda's labor markets, poverty, inequality, and human capital formation, disproportionately affecting women, youth and vulnerable groups. Following a total lockdown in March 2020 (which included restrictive measures on travel and non-essential services), the services sector – which employs more than 40 percent of women (UBoS, 2017) was particularly hard hit, contracting by over three percent in 2020. Activities in key sectors like education and accommodation and food services were curtailed for most of the year (World Bank, 2021). This adversely affected women employees and small, informal business owners, who tend to work in client-facing roles (compared with men who work more in logistics and security). Women suffered in tandem from a significant rise in domestic violence and SGBV in the streets, marketplaces, and on public transportation (Nampewo, 2020). In rural areas, where more than 75 percent of Uganda's population resides (World Bank, 2018), studies show a serious decline in household income, a drop in informal cross-border trade, and rising food insecurity (Muliika, 2020). Refugees, the majority of who are female and primarily work in informal and agricultural sectors, feel these impacts acutely. Though business and trading conditions have begun to improve as restrictions loosen, stronger signs of recovery are mostly in the male-dominated construction and manufacturing sectors (World Bank, 2021), underscoring gendered divisions of labor that have long existed, and the differential economic impacts of the pandemic on men and women.

Further revealing the gendered impacts of COVID, school closures have significantly increased women's unpaid care burdens, giving women less time to devote to economic activities and causing some to leave the labor market altogether (EASSI and SEATINI, 2020). The World Bank reports that as a result of the steep decline in employment during the initial COVID-19 lockdown period through June 2020, 91 percent of households involved in non-farm family businesses received less or no income from their businesses. By February 2021, about half of those businesses still reported lower revenues than pre-COVID-19 and ten percent of businesses remained closed. Meanwhile, incomes from farming and wage employment remained lower in about 40 percent of households. As a result, the number of poor people in Uganda is projected to increase by 2.6 million in the short-term. (World Bank, 2021) Given the loss of jobs and closure of small businesses, many men and women have returned to agriculture activities to manage and survive the crisis.

GESI in agriculture employment. The gains that Ugandan women have enjoyed in education and political leadership have yet to manifest in the agriculture sector. Women constitute 76 percent of the agricultural labor force compared to 65 percent of men. Only 31.1 percent of women living in agricultural households (HHs) have ownership or tenure rights over registered land, compared with 48.7 percent of men (UBoS, 2018). Although legal constraints to women's land ownership were removed in the

Constitution, significant gaps¹⁶ remained allowing for persistent gender inequality. These gaps were recently addressed in the landmark Succession Amendment Bill passed by Parliament earlier this year (see above), though the President has thus far not assented to it. Regardless, women in Uganda are not always aware of their rights. Cultural practices and restrictive gender norms continue to inhibit their access to and control over land, financing, and other productive resources.¹⁷

Gendered inequalities extend beyond access to financial opportunities, credit, and insurance schemes by also influencing access to technologies, knowledge and extension services. Studies have found that government extension programs only reach 22 percent of farmers, and regularly do not target women farmers (MAAIF, 2016). It is estimated that female farmers' lower access to productive resources and services in comparison to male farmers creates a gender gap of 13 percent in agricultural productivity, equating to losses of 1.6 percent of agricultural GDP, around USD58 million (FAO and UNDP, 2017). These stark inequalities severely limit the adoption of improved technologies and women's potential to effectively adapt to climate change. In addition to these barriers, crop and livestock value chains are gendered with men dominating high value cash crops and larger livestock assets such as cows, while women have more authority over subsistence crops and smaller livestock such as poultry. Women are often sidelined in the marketing and value addition stages of production.

Youth employment. UBoS data shows a steady increase in the youth employment rate (ages 18-30) which climbed officially to 51.6 percent in 2018/2019 (UBoS, 2019). The majority of female youth (59 percent) are involved in agricultural activities compared with male youth (41 percent) (UBoS, 2018). Donor-focused youth employment activities in Uganda thus focus largely around youth-inclusive agriculture – including youth skills building and creating new agriculture-based economic opportunities (Mastercard Foundation, 2018). Nevertheless, respondents and research confirms that a more intentional focus is required to design activities with a view toward diversifying economic opportunities along agricultural VCs for youth in general, and increasing economic opportunities for young women and vulnerable groups in particular (Ibid; KII). Under USAID's flagship Youth Leadership in Agriculture (YLA), for example, the final evaluation found strong evidence that though the activity succeeded in increasing the skills of several hundred thousand young people, economic opportunities were mostly limited to farming, with few opportunities enabled further down the value chain. The evaluation also found that gender constraints were not adequately addressed until the last year of implementation. (Ramirez, 2020). This reinforces feedback from KIIs indicating that GESI issues are possibly being subsumed under the larger youth rubric.

PWD employment. Disability and poverty are inextricably linked, with global research pointing to an even stronger correlation in low-income countries. This is driven largely by the limited access of PWDs to paid employment. Among youth with disabilities (YWDs) in particular, the high level of unemployment is attributed to inappropriate employable skills, poor career guidance, lack of awareness about reasonable accommodation and negative attitudes by the employers leading to over dependence on others for

¹⁶ Under the original law, ownership of property was passed down through inheritance as a gift to male children and relatives. Many women and girls typically cannot afford to buy land (and have limited access to finance); meanwhile, widows have no protections to prevent them from being kicked off of their husband's land following his death.

¹⁷ Cultural practices related to land dictate that women can access land through their male relatives, such as a father, husband or brother, but in most communities they cannot own land, sell the land or use it as collateral without permission from men. They may be displaced from their land (especially upon being widowed) or allocated small fragmented plots or marginal lands.

livelihood (Show Abilities Uganda, 2021). Over the past decade, GOU has enacted legislation and policies to promote equal opportunities and rights of PWDs, including their right to work. However, few studies have attempted to evaluate the impact of these initiatives on social inclusion and quality of life for PWDs. Data on employment of PWDs in either the private or public sectors are limited (an indicator of the persistent invisibility of PWDs); nevertheless, experts believe that the unemployment and under-employment rates of PWDs are much higher than the general population. A recent analysis of the effects of current legislation and policies on the economic empowerment of PWDs – including in-depth stakeholder interviews – found that anti-discrimination policies have limited impact vis-à-vis disability inclusive recruitment. Interviewees stated that even when the legal framework was understood, the political will to enforce regulations diverged (Griffiths, 2020). It is no surprise, therefore, that there are still no accessibility guidelines for employers on how to make adjustments to the work premises or how to support employees with disabilities in travelling to work. This affirms findings from another study which asserts the need for legal reform to guarantee implementation of legislation on reasonable accommodation (Ebuenyi, 2019). Ultimately, while the 2019 Disabilities Act has significantly increased the rights of PWDs to reasonable accommodation, it is too soon to understand the tangible impacts of this in practice, and evidence thus far suggests the need for significant progress on implementation.

Refugee employment. The gaps in labor force participation and unemployment rates among refugees in Uganda are acute. Only 29 percent of refugees are actively working versus 64 percent of host communities. Working-age refugees are 24 percentage points more likely to be unemployed than host community members. These rates are even higher among refugee youth (ages 14-25 years): 50 percent of male refugees and 41 percent of females are unemployed. Refugees (of working age) are 1.75 times more likely to fall below the poverty line than host community members and earn 32 percent less on average than Ugandan nationals with similar education levels (Beltramo, 2021). (For additional information, see section 4.5)

LGBTI employment. Owing to their exclusion at all levels of society, data regarding employment of LGBTI individuals in Uganda was not readily available. Nonetheless, it is important to underscore the large and growing body of research showing a positive correlation between LGBTI inclusion and GDP per capita. This research consistently documents the violence, discrimination, and social stigma experienced by LGBTI people globally, rooted in socially-embedded biases that are historically commonplace in Uganda. At the individual level, these experiences limit LGBTI people's access to jobs, schooling, health care services, and political participation, among others, thereby reducing economic output more generally. Harassment in the workplace or marketplace also hinders the productivity of LGBTI workers, detracting from individual and business potential, performance and profitability (Badgett, 2018). Members of the LGBTI community in Uganda report a reduced ability to accumulate assets, and homophobia in some instances leads landlords to evict them from business premises and rental facilities (Among, 2017).

Child labor. Child labor remains a serious problem in Uganda that has increased significantly in all regions during the pandemic, with labor taking the place of school for both boys and girls. According to latest UBoS data, child labor before and during COVID-19 was 20 percent and 37 percent respectively among girls; 22 percent and 35 percent among boys (UBoS, 2021) – showing a significant jump but in almost equal measure for both sexes. While activities vary by region (Save the Children, 2020), child labor is found

most prominently in agriculture¹⁸, transport, mining, fishing, construction, the urban informal sector, domestic service and commercial sexual exploitation of children (ILO, 2021). The educational achievement of these children is at great risk, impeding future job readiness and posing serious costs to the economy.

Workforce development and job readiness: Uganda's working-age population is growing rapidly and is estimated to increase by 13 million people between 2017 and 2030. With most Ugandans working in agriculture, raising agricultural productivity must be the cornerstone of a strategy for jobs and economic transformation. The World Bank and others point out, however, that this must be coupled with faster movement of young workers (notably rural youth) from agriculture employment into higher productivity industry and service jobs (Merotto, 2020), including urban waged-jobs. A recent survey of Ugandan firms in the horticulture, agro-processing and tourism industries found that while youth were over-skilled for the jobs they were holding, the majority had soft skill gaps including problem-solving, basic skills and social skills. Importantly, beyond these soft skills needs, the survey found that digital skills will be paramount for future occupations likely to hire the youth including tourism, horticulture and agro-processing. In horticulture, digital skills will be needed for the use of computerized mechanisms in the production of fresh fruits and vegetables, while in agro-processing – as automation progresses – digital skills will be needed for the production of primary raw materials (Guloba, 2021). To prepare young people to enter a labor market for new jobs in growth sectors, training should focus on these skills.

As evidenced by USAID's YLA and other donor activities, youth-led agricultural technology has indeed proven an optimal entry point for youth, spurring much needed innovation to solve complex challenges across the agri-food system (Nyamolo, 2019). However, to benefit from value chain opportunities, whether as entrepreneurs or as employees, rural youth still need increased access to finance, technology, skills, and assets (Merotto, 2020). Furthermore, while digital skills offer increased and attractive economic opportunities for youth (both within and outside of the agricultural sector), stereotypes of what skills may or may not be appropriate for young women, and gendered perceptions of technology as well as young women's abilities, impede their uptake and access to digital technology (Mastercard Foundation, 2018). Youth with disabilities (YWDs) face similar stigmas regarding their abilities that impede uptake, along with accessibility challenges.

With regard to young women, an increasing number are likely to leave school without joining the labor market. In 2016, about 25–30 percent of female youth between the ages of 20 and 24 were neither working nor in school compared with 10–15 percent of male youth (Merotto, 2020). These numbers have doubled since 2012, and the pandemic threatens to worsen them significantly. Activities supporting young women, therefore, must focus on training them for success in the labor market, utilizing a gender-sensitive youth lens that realizes their specific obstacles, preferences, and skill gaps. Evidence from various donor programs in Uganda shows that offering safe spaces for girls to gain life skills, learn trades, and financial literacy can boost income long after the program's end (Bandiera, 2020).

¹⁸ Uganda is Africa's second largest producer and exporter of tea after Kenya, and its production and exports have witnessed substantial increases in recent years. Coffee and tea are among the listed goods, which are produced with forced labor (DOL, 2021) with coffee being the main foreign exchange earner in Uganda, and widely grown.

Micro-, small- and medium-sized enterprise development: One in three businesses in Uganda is owned by a woman—the highest rate in the Middle East and Africa region (Mastercard, 2019). Yet – due to the gendered constraints in access to assets, finance, equipment and markets noted earlier – women’s businesses tend to be smaller and mostly informal (UBoS, 2017), with profits that are on average 30 percent less than those for male-owned businesses (World Bank, 2019). More than 70 percent of women work in the informal sector, including retail business, markets, hospitality, vendors and petty trade, among others (UWONET, March). Women’s disproportionate unpaid care burden combined with gendered barriers in women’s access to credit, higher-value assets, infrastructure (including digital resources) and markets have systematically impeded the growth of women-owned businesses.

Increasing access to finance. Female-owned businesses in Uganda hold 37 percent of loans as a proportion of those held by men (World Bank, 2019). According to UBoS, the main source of credit (61 percent) in agricultural households comes from a combination of self-help groups and savings and credit cooperative organizations (including village savings and loans associations (VSLAs) (UBoS, 2018). VSLAs have enabled communities, including vulnerable groups to save, while providing the added benefit of building social capital for members. People with disabilities, youth, and women are active in VSLAs (Among, 2017). These groups have proven to be both an important vehicle for economic empowerment, and a critical platform for change in emergency contexts, including the COVID-19 pandemic. By strengthening connections not only between women, but also their connections with markets and service providers, VSLAs can help increase resilience and advance gender inclusion (CARE, 2020). Support to strengthen VSLA groups can also help to position women to pursue formal microfinance. To help accelerate the growth of women’s agricultural enterprises, it will be important to develop sustainable value chain financing linking existing financial institutions to local women farmers and low-income farmers in general; and, in turn linking the farmers to market actors. This requires concerted effort to work with both the farmers and the financial institutions to understand and overcome constraints to lending using innovative, appropriate and affordable financial products and tools (including digital tools).

Implications for interventions: engaging men. Whilst increasing women’s access to finance can catalyze women’s empowerment and reduce power imbalances within the household, anecdotal evidence suggests it can also lead to domestic violence if men within the households feel threatened with potential changes in power dynamics. This is especially true in times of stress or economic shock. Therefore, when implementing access to finance and other EG interventions, it is important to engage men, on the one hand, and support coping mechanisms for women, on the other. USAID has had success in other sectors (e.g., HATO, DRG) using household dialogues and the male change agent approach to engage men in championing awareness raising and behavior change efforts, which can be replicated in EG activities.

Impacts of COVID-19. Confinement of potential consumers at home and the closure of borders and markets have removed the most essential trading opportunities, which men and women both rely on to cover their basic family needs. However, women’s businesses, which already were smaller and less profitable than men’s, were the first to close as the economy contracted. As noted earlier, the businesses that have continued to operate and those that are recovering more quickly mainly employ and are operated by men (e.g., factories, *boda bodas*), while those that typically employ women (e.g., salons, restaurants, clothing stores, vending) were closed (Nampewo, 2020). The World Bank reports that across the Sub-Saharan region, 43 percent of women-owned businesses were closed in the early months of the pandemic, compared to 34 percent of those owned by men (Goldstein, 2020). The situation is all the

more difficult for female heads of households who have the sole responsibility for providing for their families.

Beyond the loss of livelihood, women also experienced a significant rise in GBV in the streets and at work in marketplaces. The government inadvertently contributed to this phenomenon specifically in relation to women food vendors, who were allowed to continue operations during the pandemic. The government passed subsequent lockdown measures requiring women vendors to sleep at their market stalls in order to minimize their movements and reduce transmission risks, while overcoming the hurdle of lack of public transportation (which most women rely on). This placed women at significantly greater risk of violence, not to mention poor hygiene. In a high profile incident in March 2020, the Kampala police brutally assaulted several women food vendors for supposed violations of lockdown rules (which were incorrect and later recanted by authorities) (UWONET, March). Ultimately, this underscores the importance of ensuring a gender lens in risk mitigation and emergency response planning.

RECOMMENDATIONS

The following table highlights key gaps in economic opportunities between men and women, girls and boys, and other vulnerable groups in terms of the key domains of gender analysis, along with corresponding recommendations on how USAID Uganda can further close those gaps in the forthcoming programming. Recommendations for strengthening GESI MEL in EG are offered in Annex B.

TABLE 5. EG KEY FINDINGS AND RECOMMENDATIONS BY GENDER DOMAIN

FINDINGS	RECOMMENDATIONS
Domain I: Laws, policies, regulations, and institutional practices	
Despite a solid legal framework for gender equality, patriarchal norms inhibit political willingness to enforce GESI policies, compounded by a weak understanding and a lack of resources toward monitoring, enforcement and capacity building, at all levels of GOU.	Strengthen the capacity of women’s economic empowerment actors and advocates to: <ul style="list-style-type: none"> (a) Generate and promote evidence-based research that makes the business case for investing in women; (b) Develop media and communications plans/strategies that redefine GESI narratives, promote GESI reforms, and operationalize advocacy; and (c) Engage with GOU entities to sensitize them to legal mandates and the business case for WEE. Explore synergies across USAID offices/activities, for example, working with USAID’s new Rights and Justice Activity (RAJA)¹⁹.
Poor and vulnerable groups (especially women, women-headed households, widows, and the elderly) lack social protections to help them cope during times of crisis and shock. This vulnerability is made riskier by the absence of early warning systems and risk mitigation planning, as evidenced during the pandemic.	Recommendations include: <ul style="list-style-type: none"> (d) Work with GOU to strengthen social safety nets: Provide benefits and support for people of working age in case of maternity, disability, work injury, or for those without jobs; improve pension coverage for the elderly; offer tax-funded social benefits, social assistance services, public works programs, and other schemes to guarantee basic income security. (e) Support LGs and IPs to develop gender-sensitive risk mitigation plans and policies using participatory processes that include youth, women, and YWDs.

¹⁹ RAJA is strengthening local civil society groups to advocate for human rights in Uganda, with a focus on women, youth and vulnerable groups (USAID).

While the 2019 Disabilities Act significantly increased the rights of PWDs to reasonable accommodations, implementation of the law and its tangible benefits for PWD employment remain to be seen.

Work with MGLSD and the private sector to develop and roll out accessibility guidelines for employers on how to make adjustments to the work premises and how to support employees with disabilities in travelling to work. Promote legal reform to guarantee implementation of legislation on reasonable accommodation.

Domain 2: Cultural norms and beliefs

Cultural norms continue to contribute to gendered agricultural value chains, resulting in women having access to lower value livestock, crops, and land compared with men, thus making them more economically vulnerable to shocks and less able to grow competitive businesses.

Sensitize farmer groups, local traders and businesses/private sector actors to GESI laws, address patriarchal norms using male change agents, and generate/promote evidence to make the business case for GESI in agriculture. Increase economic opportunities for women through support of VSLAs (see domain 5 for further details).

Social stigmas and biases contribute to harassment of LGBTI people, impeding their productive participation in the economy. These biases are reinforced at all levels of society and the law, leading to abuse, harassment and a lack of access to social services, jobs, housing and more.

Work with CSOs and human rights groups to: ensure access to health and other social services for LGBTI individuals; promote legal reforms protecting LGBTI rights; continue providing legal aid and social support to the LGBT community (e.g., through RAJA). Strengthen the capacity of human rights organizations that support the LGBTI community and facilitate linkages with other human rights groups.

Domain 3: Access to and control over assets and resources

Youth do not have the requisite job skills to meet projected future shifts in the Ugandan economy, which is expected to lead to a concentration of employment in finance and business services, ICT, tourism, and agro-processing over the next decade.

Work with private sector and GOU to close the jobs-skills mismatch gap and to nurture the training-to-employment pipeline: Develop avenues to improve the soft and digital skills (focusing on youth and women) (including apprenticeships). Leverage potential opportunities offered through regional development policies and the national industrial policy. Conduct firm level surveys to map out employment opportunities in the near- and long-term for YWDs, youth and young women; and facilitate job placement/matchmaking.

Entrenched patriarchal norms limit women's access to finance, markets, infrastructure and resources – all of which have been further exacerbated during the pandemic – curtailing their livelihoods and resulting in smaller businesses that are less resilient and less profitable, compared with men. The pandemic lockdowns also disproportionately affected the businesses that women work in more than those that men work in.

Support women entrepreneurs to grow their businesses and move into more profitable sectors with a comprehensive system of: training, business services (including access to credit and markets) and resource support:

- Skills training: focus on problem-solving, soft and digital skills to support women's innovation potential (see next recommendation).
- Business services: support women-owned MSMEs and small-holder farmers to develop marketing channels (using e-commerce platforms if feasible) that connect buyers and sellers; implement product repackaging to fit the new normal; teach business management skills.
- Access to finance: Leverage affordable financing and business support from FIs and GOU entities including those charged with facilitating the COVID-19 economic recovery (e.g., Uganda Development Bank, Uganda Development Corporation, and the Micro Finance Support Centre), as well as the Uganda Women's Economic Empowerment Fund and Operation Wealth Creation (OWC).
- Support digital financial inclusion in rural areas to increase access to mobile money for women and youth: working with private sector/tech companies to provide affordable mobile technology.

Youth have proven to be a source of

Coordinate a comprehensive system of education, training, and financial

innovation in the agricultural sector, but their contributions – whether as entrepreneurs or employees – remains constrained by a lack of access to infrastructure (including affordable internet), finance, training, mentors and resources. These hurdles are even greater for young women and YWDs.

support to build youth skills and foster youth-led innovations. Work with GOU, private sector, universities, MTACs to invest in agricultural innovation hubs and incubation centers that:

- Provide access to online and offline resources; serve as access points for innovators to build skills, use tools and idea-share; are staffed with trained experts (men and women) to offer technical support and motivate innovators.
- Offer spaces that are intentionally designed for the broadest accessibility by both young men and women (regardless of expertise); YWDs; and especially rural youth (i.e., the bulk of the end-users of agricultural technologies.) This includes disability inclusive infrastructure, and technology that is gender-sensitive and accommodates the varying needs of YWDs.
- Provide specialized business and digital skills training tailored to the differing skills of young men and women, YWDs, etc. focusing on skills transferable to other growth sectors

Domain 4: Gender roles, responsibilities, and time use

The already high burden of unpaid work on women has increased significantly during the pandemic, significantly hindering the economic productivity of both women employees and entrepreneurs, and forcing some to leave the labor market altogether.

Recommendations include:

- (Alleviate care burdens through quality childcare options. Evidence indicates this can boost women’s economic activity while also increasing profits. Options include: Supporting community child care projects, helping women stay employed; including childcare as part of skills training and employment programs, providing transport and stipends to babysitters who accompany trainees, or offering financial incentives to mothers of young children who complete the training programs, are other options.
- Engage men in equalizing care responsibilities. Build on experience with couples training, household dialogues and male change agent approach used successfully in other USAID activities show that couples training and household dialogues can improve household power dynamics and increase economic well-being.

While digital skills and agricultural technologies offer increased and attractive economic opportunities for youth, stereotypes of what skills may or may not be appropriate for young women and YWDs, gendered perceptions of women’s abilities and bias against YWDs’, impede their uptake of digital technology.

Recommendations include:

- When designing and promoting agricultural technologies for young women, consider at which points in the agricultural value chains young women are already playing a strong and well-accepted role, and support them to achieve higher scale.
- Identify where young women and YWDs have larger skill gaps and develop training modules with their specific needs in mind.
- Address negative perceptions about young women’s and YWDs’ abilities: Activities should build in cross-community support involving young women and YWD role models, as well as young men and community leaders, to support young women’s and YWD’s technology uptake and to counter stereotyping.

Domain 5: Patterns of power and decision-making

VSLAs are a primary source of funding for women, primarily in agricultural households, and offer an important coping mechanism during crises. Caution should be paid to mitigate possible household tension between partners/spouses as a result of perceived changes in power dynamics that could lead to domestic violence.

To support VSLAs to cope during and recover from the impacts of the pandemic, government and donor interventions should:

- Support women VSLAs in income-generating activities to enhance the diversification of income sources and livelihoods with both on-farm and off-farm productive activities and services. This is intended to reduce the impact of negative shocks (e.g., the pandemic, inflation, etc) on households by diversifying risk exposure and mitigating the negative coping strategies employed by less resilient households.
- Assist VSLAs to access financial services and other external resources by linking them to private sector actors and to government services

(e.g., extension, concessionary loans), especially among institutions mandated to support pandemic recovery efforts (see Domain 3, recommendation 2, above).

- Support savings groups to create adaptation plans, based on understanding of the current crisis and its potential impacts (health, economic, social, personal and community security).
- Create contingency plans for how to reach out in a restricted mobility scenario if quarantines come into force, including new communications mechanisms.
- Adjust lending practices: support groups to explore options to shorten lending cycles, change loan terms, lower loan values or stop lending all together.
- Replicate success with household/couples dialogue and male change approach used during other USAID training activities to mitigate HH tensions and change attitudes.
- Put in place a monitoring and feedback system to mitigate increased risks of GBV and sexual exploitation and abuse during the pandemic and other crises.
- Provide support in areas of water and hygiene, education, and health services to enhance safety, resilience and role of VSLAs during COVID-19.

With GBV already prevalent, violence against women (VAW) vendors and informal workers in the streets and marketplaces increased significantly during the pandemic (including sexual harassment, rape, femicide, and assault).

To reduce the risk and incidence of VAW during COVID-19 and at all times:

- Sensitize law enforcement and the public around GESI laws and human rights.
- Sensitize the public around the cost of VAW to society and to value the contributions of women at home and at work, especially those providing essential services during COVID-19/emergencies.
- Improve security around marketplaces and in public transportation, especially for women vendors allowed to work during lockdowns.
- Ensure separate and safe access to wash facilities for women vendors near marketplaces.
- Support women's access to essential services including shelters and GBV hotlines.
- Ensure incidents of VAW are documented and reported.
- Strengthen capacity of the criminal justice sector (police and courts) to handle GBV cases through training, resourcing and facilitation to undertake stronger investigation and prosecution.

2.3.4.4 DEMOCRACY, RIGHTS AND GOVERNANCE

FINDINGS

According to the Global Gender Gap Index, women's representation in parliament is 35 percent and in ministerial positions it is 36 percent – earning Uganda a higher score (.54) than OECD countries like Canada (.42) and the US (.38) in terms of political participation (WEF, 2021). Experts warn that the 30 percent quota requirements on women's representation is what drives this high score – enabling a level of tokenism, as opposed to the meaningful participation of women leaders. Indeed, Uganda's gender parity scores are lowest in the political empowerment sub-index of the GGGI– with a score of 0.296 (a gender gap of 70.4 percent) and a global ranking of 47 out of 156 countries (Ibid.). And while the number of women has increased in Parliament, the same has not been observed in local government, with persistently low representation at the district and sub-county levels (Ssali, 2019).

Rule of law. The World Justice Project Rule of Law Index 2020 ranks Uganda 117 out of 128 countries – making it the worst performing country in the East African region in terms of not adhering to justice and the rule of law.²⁰ This low ranking is driven by poor scores across the board, but most notably for: corruption in government (Uganda ranks 29 of 31 countries regionally and 125 of 128 globally); poor fundamental human rights (28 of 31 regionally and 17 of 128 globally); and a weak criminal justice system (26 of 31 regionally and 113 of 128 globally) (World Justice Project, 2020).

Human trafficking. According to the US Department of Labor, GOU reported at least 214 victims of human trafficking in 2018, compared with 276 in 2017. Of these victims, 27 children and 149 adults were victims of forced labor, and 18 children and 15 adults were victims of sex trafficking; 182 were transnational and 32 were internal; most of the internal victims were children (US DOL, 2019). Anecdotal evidence points to a rise in child trafficking during the pandemic (see below).

Laws, policies and institutional frameworks for GESI in DRG: Uganda’s legal framework for gender equality is rooted in local frameworks such as the 1995 Constitution, Vision 2040, the National Development Plan, the Equal Opportunities Commission Act (2007) and the National Youth Policy, to mention but a few. This framework is guided by numerous international instruments ratified by GOU such as CEDAW, the Maputo Declaration on Gender Mainstreaming (2003), the African Youth Charter (2006) and the SDGs, among others.

The Uganda Government has enacted several well-articulated gender-sensitive laws and policies during the last several decades, though significant gaps remain. Several legislative proposals have been drafted to address these gaps in the law – some of the most prominent ones include the Prohibition of Female Genital Mutilation Act, the Domestic Violence Act, and the Prevention of Trafficking in Persons Act. As mentioned earlier, the landmark Succession Act and Employment Act were finally passed by parliament this year, the former protecting Ugandan women’s rights to inheritance in the case of the death of a spouse, while the latter provides for protections against sexual harassment in the workplace and social benefits for informal women workers.

In addition to these laws, Uganda’s National Gender Policy guides gender mainstreaming in the different sectors of government, with several sectors having developed their own gender policies. In addition, the Gender and Equity Compliance Certificate of Gender and Equity for MDAs, issued by the Ministry of Finance, Planning and Economic Development (MFPED) upon the advice of the Equal Opportunities Commission (EOC), requires that any MDA seeking appropriation of the National Budget meets the minimum requirements of gender and equity budgeting. The budget circular also includes a paragraph on gender, which helps influence local governments to take action on GESI. In terms of institutional frameworks, the MFPED emphasizes gender equity compliance in budgeting before entities can be funded, and the MGLSD has developed many national sector strategies for addressing gender. The Uganda Police also has introduced specialized gender training and units such as the Gender Desk. Finally, GOU has partnered with the Ugandan Association of Women Lawyers to institutionalize specialized GBV demonstration courts (Ssali, 2019). (See Annex D for a summary of national GESI policies).

Despite the established legal framework for GESI in Uganda, evidence points to a significant divergence between policy and practice at all levels of government, rooted in deeply-embedded gender-biased patterns in public decision-making. The key factors driving this divergence are: (1) a lack of understanding and/or awareness of gender-related laws and policies among duty bearers; (2) weak enforcement capacity in terms of processes, tools and expertise for integrating and operationalizing GESI mandates; and (3) a lack of political will and even resistance to implementation, driven by entrenched patriarchal norms and gender bias around women’s capacity and appropriate roles in society (Ibid.). In effect, this means that

²⁰ For comparative purposes in the region, the index ranks Rwanda as the best in adherence to rule of law, followed by Tanzania at 93 and Kenya at 102.

women's legal status is precarious, their capacity as economic agents is limited, and their rights are not guaranteed.

Gender and social inclusion in the DRG thematic areas:

Civic engagement and participation/leadership: **Inclusive participation.** According to UBOS, only 29 percent of Ugandans believe decision-making is inclusive and responsive (UBOS, 2020). While the legal framework for inclusive participation is encouraging, cultural norms, poverty, and household dynamics still make it difficult for Ugandan women and minorities' to participate effectively in governance. Compared with men, women are less literate, earn less and bear a higher burden of unpaid care work. The struggle for marginalized citizens to participate in education and employment requires their time and effort to overcome physical, cultural, and other barriers to participation. As such, Ugandans with disabilities²¹ or non-normative gender identities often have less time and fewer resources than other citizens to mobilize politically and to avail themselves of legal protections. Stereotypical perceptions of women and stigmatized views of many such Ugandans also prevent more inclusive representation in governance (USAID, 2015).

Perceptions of government corruption have heightened friction with the public and diminished service delivery, further dissuading citizens – especially youth – from participating in national and sub-national government structures. At the same time, the shrinking space for civil society also impedes civic engagement. Earlier this year, Uganda's NGO Bureau suspended the operations of 54 NGOs. In a joint press statement, Amnesty International and 53 other NGOs denounced the repression of civil society in Uganda noting that the suspension comes in the context of “intensifying intimidation and harassment of CSOs,” and is “intended to restrict the rights to freedom of expression and association and stop the activities of independent CSOs that are perceived as critical of the authorities (Amnesty International, 2021).” It is therefore vital to adopt programming strategies that reduce adversarial stances between civil society and government and increase citizen involvement in public oversight. (QED Group, 2019).

Youth participation. Given the burgeoning youth population, civic engagement of youth remains a high priority for the mission and a significant challenge in the current political landscape. The combination of high unemployment and political exclusion has led to increased youth apathy and violence, further exacerbated by political conflict around elections. The pandemic heightened instances of youth conflict with the authorities, with various sources reporting authorities clamping down on opposition groups (largely youth) for flaunting COVID-19 regulations, while sizable NRM rallies continued to take place. Furthermore, an entire contingent of youth (the 14-year-old girl or boy during the last CDCS period) who would have been eligible to vote at age 18, were disenfranchised during the last elections because of changes made to the voter registration cut-off date. Finally, with the Ugandan education system having dropped civic education from its curriculum, Uganda's youth need civic education now more than ever. Without it, youth will not gain an understanding of government processes and political participation and thus cannot effectively voice their views, secure their needs or exercise their rights. This will not only stunt the country's long-term development, but it will also fuel the cycle of violence, apathy and corruption.

When devising civic education and participation strategies for youth, it is important to recognize the unique needs and circumstances of **youth with disabilities** (YWDs) – rather than grouping them with PWDs in general. When consulted, YWDs in Uganda have stated that it is important to have their own organization because the needs of PWDs vary according to age, and the needs of YWDs have not been

²¹ In its review of the 2021 hybrid digital election, the Uganda Human Rights Commission noted concerns over the ability of disabled persons to effectively participate in the electoral process, citing constraints PWDs face in access to information either because they often do not have radios and televisions in their homes, or because of challenges they face in accessing communal locations where radios are available. The Commission cited gendered barriers to women's access to technology and increase in already high unpaid care burdens during the pandemics as key barriers to women's participation (UHRC, 2021).

adequately addressed by the existing organizations of PWDs (OPDs). To this end, the mission should support youth-led OPDs, such as Show Abilities Uganda,²² to improve inclusion of YWDs needs and concerns in national youth programming.

Women’s leadership and political participation. The harassment and violence experienced by women political candidates was noticeably egregious during the run up to the 2021 elections – indicative of a pattern of violence repeated in previous elections²³ and pointing to *de facto* discrimination against women political leaders. Online violence against women (OVAW) is also on the rise with significant opportunity for escalation during the hybrid digital elections. A 2020 study indicated that one in three women in Uganda were victims of online violence (Pollicy, 2020). That violence was especially amplified among women leaders, politicians, and high-profile individuals, with at least one in two vocal women experiencing online violence.²⁴ Notably, the study found that whereas the violence targeted at women leaders was rooted in misogynistic beliefs and based on their perceived ability to uphold gender norms, the attacks toward men were based on their ability to perform their leadership roles. There have also been several high-profile instances where cyber laws were used to harass, silence and ultimately punish outspoken women (Ibid.).²⁵ Overall, this highlights the growing need to address OVAW because its targeting of vocal women impedes their participation in politics and detracts from democracy.

Human rights and the rule of law: Uganda is a party to relevant international and regional human rights treaties, including the Convention on the Elimination of All Forms of Discrimination against Women, Convention on the Rights of the Child, Convention on the Rights of Persons with Disabilities, International Covenant on Civil and Political Rights and Convention against Torture and Other Cruel, Inhuman or Degrading Treatment or Punishment. Uganda is also a party to the African Charter on Human and Peoples’ Rights and the Protocol to the African Charter on Human and Peoples’ Rights on the Rights of Women in Africa (Maputo Protocol). Yet, the political will to uphold the rule of law (ROL) remains weak across all domains, at great cost to women and marginalized groups.

The Uganda Law Society’s (ULS) 2021 first quarterly ROL report decries a litany of rule of law atrocities and human rights violations, especially during the recently concluded elections. Criminalization of the practice of journalism, arbitrary arrests, the killing of women and disappearance of citizens especially from the Opposition side, were just some of the incidents documented by ULS (ULS, 2021). Also this year, the British Broadcast Corporation (BBC) produced the documentary film “Three Killings in Kampala,” drawing global attention to state violence in the run up to the 2021 election. The film covers the shooting and killing of more than 50 people in just two days during a government crackdown on rioting in the streets of the capital in November 2020. GOU officials defended the use of live fire, stating that police were responding to rioters. However, the documentary shows shocking evidence that Ugandan security forces

²² Show Abilities Uganda (SAU) was established by YWDs in 2019, with a view to becoming the central resource for reliable data on YWDs and the national association (with district level chapters) representing YWDs. SAU aims to enable YWDs to establish networks and collaborations with mainstream youth and civil CSOs to improve inclusion of YWDs needs and concerns in national youth programming (Show Abilities Uganda, 2021).

²³ Joint Press Statement on the dehumanizing and degrading treatment of women in active politics by the Uganda Police Force, Women’s Democracy Group, Oct 2015 (Source: Among, 2017).

²⁴ The study revealed noticeable forms of online violence experienced by women politicians, including body shaming, gendered disinformation, sexual harassment, trolling, and gendered and sexualized insults among others. This study also found that the violence targeted at women was rooted in misogynistic beliefs and was based on their ability to uphold gender norms while attacks towards men were based on their ability to perform their leadership roles.

²⁵ For example, Nancy Kalembe, who was the only woman presidential candidate in 2020, reported intimidation as she kept receiving calls from senior government officials urging her to drop her candidacy. In 2017, Dr. Stella Nyanzi was arrested and charged with cyber harassment and offensive communication under the Computer Misuse Act in relation to a Facebook post she made regarding President Museveni. Though she was released, her husband was also arrested and tortured.

were firing indiscriminately at unarmed civilians from the back of a moving police truck, killing at least seven people including several women (BBC, 2021).

Women’s rights and GBV. As noted previously, Uganda has extensive gender equality legislation though enforcement is lacking and key gaps in the laws exist. The recent passing of crucial gender equality and anti-GBV legislation in the Employment Bill and Succession Bill was an important step toward filling some of those gaps. This legislation, however, comes late. Gender-based violence – already prevalent in Uganda with half of women experiencing GBV in their lifetime – has escalated significantly during the pandemic, particularly in urban areas such as Kampala (UHRC, 2021). The Uganda Law Society (ULS) has also been reporting on “the rampant murders of women and teenage girls in Entebbe, Kampala and Wakiso districts (ULS, 2021).” An increasing number of women are also reporting cyber-bullying and abuse through social media and smartphones (Iyer, 2020). Earlier this year, another important piece of anti-GBV legislation was passed: the Sexual Offences Bill. Notably, the bill provides protections against sexual harassment and rape, enhancing punishment of sexual offenders and providing protections of victims during trial (UWOPA, 2021). However, the bill, which has not been assented to by the President, also contains regressive clauses that criminalize LGBT people in Uganda, prescribing a five-year-jail term for anyone guilty of same-sex acts (WFD, June).

LGBT rights. The anti-LGBT clause in the Sexual Offences Bill is reminiscent of previous draconian legislation, which had threatened offenders with life imprisonment.²⁶ Passed by Parliament, the bill was invalidated merely on technical grounds by Uganda’s Supreme Court. Though such legislation is unlikely to pass due to pressure from donors and the international community, it continues to be revived from time to time in Uganda’s parliament, resulting in renewed crackdowns on the LGBT community. This past year saw several high-profile human rights violations among LGBT Ugandans, including arrests and forced medical examinations by police forces. Though data is limited, NGOs and the media have also reported that the targeted rape of lesbians and bisexual women is common in Uganda, including “corrective rape”²⁷ (Human Dignity Trust, 2016) (Ssenkaaba, 2021). Even without the passing of new anti-LGBT laws, homosexuality remains illegal in Uganda under the Penal Code (though marital rape and other sexual assault are not expressly criminalized) (Human Dignity Trust, 2021). Regardless of reforms or the lack thereof, the LGBT community in Uganda remains fundamentally marginalized. Their access to justice, health, and even housing are continuous challenges.

Human trafficking. Uganda’s Prevention of Trafficking in Persons Act 2009 is generally blind to age and gender disparities and poorly enforced. According to the US Department of Labor, Uganda does not meet the minimum standards for the elimination of trafficking but is making significant efforts to do so. Nevertheless, trafficking continues relatively unabated, in the guise of foreign employment companies manned by powerful individuals with no mechanism for follow up. Resolution 233 I requires states to track trafficking and provide up-to-date statistics on the crime but, given the high levels of poverty, not many who are trafficked are able to speak out and report their experience, limiting the state’s capacity to combat the problem. At the same time, corruption and official complicity in trafficking crimes remain significant concerns, inhibiting law enforcement action. The government does not adequately address internal trafficking, including the forced begging and child sex trafficking of children from the Karamoja region – an issue of even graver concern in the wake of the economic downturn (US DOL, 2019).

Fiscal reform: Uganda’s fiscal system is heavily dependent on foreign aid, which has increased by 24 percent between 2010 and 2019. Public sector debt is expected to rise to a staggering 49.9 percent of GDP by

²⁶ The Anti-Homosexuality Act was signed into law by President Museveni in 2014, but later overturned on procedural grounds, under mounting pressure from the international community and the threat of aid funding being withheld. Under the law, those convicted of “homosexual acts” would have faced seven years to life in prison.

²⁷ “Corrective rape” (also called “curative rape”, “punitive rape” or “homophobic rape”) is a term used to describe the practice of rape committed against lesbian women in order to “cure” or punish them (ILGA, 2020).

the end of June 2021, up from 41 percent a year prior, due to the COVID-19 crisis (African Development Bank, 2021). Meanwhile, Uganda continues to struggle with a narrow tax base and poor tax compliance. The GOU also continues to report major leakages in expenditure, despite the presence of several accountability and anti-corruption institutions. These losses, plus the skyrocketing debt (expected to peak at 54 percent in 2023) are driving pressure toward fiscal reforms and increasing avenues for domestic resource mobilization (African Development Bank, 2021).

Gender-sensitive domestic resource mobilization (DRM). Equitable taxation and formalization of the informal sectors are critical GESI issues in DRM. Uganda emphasizes the use of indirect taxes, which affect the largest resource base and are hard to evade. Indirect taxes, however, can interfere with consumption choices (e.g., piped water, salt) – especially in poorer and female-headed households – by raising the prices of taxed goods and services. In terms of advancing gender equality, policy simulations conducted by USAID’s DRM activity showed that reductions in taxes on goods and services reduce the tax burden on female-headed households significantly more than on male-headed households. However, given the modest size of Uganda’s formal sector (and the limited tax base it offers), trends in tax reform across Africa point to a likelihood that GOU will increase its reliance on value-added tax as a relatively easy means to raise significant revenue. The gender analysis for USAID’s DRM activity warns, therefore, “it is very important to be aware of the gendered impacts of this (increasing) reliance on indirect taxes and policy-makers need to ensure that tax outcomes are more gender equitable.” The report also notes the likelihood of increasing pressures on governments to raise taxes from the informal sector, which has serious implications for women given the gendered nature of informal employment. “Without careful consideration of the design of these tax instruments, it is likely that they will hurt poor and female households disproportionately (USAID, Undated).” As the mission continues to support DRM reform efforts in Uganda, there are a number of unresolved issues that are specific to the gender dimensions of taxation which should be considered. To this end, please refer to the illustrative learning questions in Annex B.

Strengthening GESI in local governance. Local government planning processes are critical entry points for the integration and prioritization of GESI issues – an area where USAID has made noteworthy contributions (e.g., providing equity budgeting and gender training for LGs under USAID’s Governance, Accountability, Participation and Performance (GAPP) activity). Nonetheless, consistent, and widespread GESI integration in budgets and decision-making processes will require concerted, long-term effort given the disconnect between GESI policy and practice described above, but also the disconnect between central and local governments, in general. A prior gender assessment of the GAPP activity highlighted this issue as “policy evaporation,” explaining that strong policy and legal frameworks at the national level do not successfully translate into effective implementation at the LG level (Palladium, 2017), something further corroborated in another research and KIIs. This phenomenon can be observed, for example, with the Public Financial Management Act and the Local Government Act, which provide for the public to participate in planning and budgeting processes, but– yield limited discernible impact – USAID’s work notwithstanding. In addition to the need for operational guidance, LGs lack sufficient resources from the central government to support programs for women, youth, and PWDs. Meanwhile, the CSOs working to improve citizen participation in local governance and accountability processes are likewise lacking in resources and expertise to advance GESI goals, resulting in uneven coverage and inconsistent application of GESI best practices (Ibid.). Such challenges further constrain the ability of these two groups to work together to strengthen citizen participation and improve decision-making outcomes around GESI.

A noteworthy approach adopted by GAPP to address these organizational and resource constraints at the LG level is the use of embedded technical specialists (ETSs). By offering long-term rather than the typical short-term technical assistance, the model was found to be instrumental in improving public accountability systems (e.g., audits) and improving revenue collection in GAPP districts, as well as making training more effective through on the job coaching. Yet, the fact that only one ETS out of 15 was female

(QED Group, 2019) is a missed opportunity to improve GESI outcomes. Going forward, efforts should be made to improve gender parity among ETSs and to bolster their GESI expertise.

Corruption and its impact on children. While corruption is prevalent in Uganda and its impacts well-documented, of particular concern is the impact of corruption on children. This is especially pertinent in light of the growing youth bulge along with the increase in child labor and sexual violence against children in the wake of the pandemic. According to the National Child Protection Working Group (NCPWG), children in Uganda are among the vulnerable groups most negatively affected by corrupt practices, either directly – through requirements to pay bribes to receive services – or indirectly – through services that are missed because resources have been misused or plundered. In a policy brief examining the types of corrupt practices experienced by children, NCPWG found the leading ones to be: (1) illegal payments to access justice in defilement cases; (2) absenteeism by teachers and health workers; (3) other forms of corruption in the health sector (e.g., bribes, favors); and (4) grand corruption (i.e., “acts committed at high levels of government that distort policies or the central functioning of the state, enabling leaders to benefit at the expense of the public good”²⁸) (NCPWG, 2018). Previous grand corruption scandals have involved stolen donor and education funds.

RECOMMENDATIONS

The following table offers a summary of top-level findings and recommendations by gender domain. Additional recommendations for strengthening GESI MEL in DRG activities, including illustrative indicators and learning questions can be found in Annex B.

TABLE 6. DRG KEY FINDINGS AND RECOMMENDATIONS BY GENDER DOMAIN

FINDINGS	RECOMMENDATIONS
Domain I: Laws, policies, regulations, and institutional practices	
Despite a solid legal framework for gender equality, inadequate resources, systems and knowledge of GESI laws and policies among GOU enforcement bodies impede implementation at all levels of government.	<p>Recommendations include:</p> <ul style="list-style-type: none"> • Work with MGLSD to: conduct regular gender policy reviews and gender audits of MDAs to identify implementation gaps and resource needs; strengthen the GESI capacity of key staff (<i>not just the gender focal points</i>) and within central, district and local governments (expanding on the GAPP ETS model); and develop strategies for operationalization and enforcement of GESI mandates, starting with priority sectors for women’s economic empowerment. • Work with Auditor General and MFPED to mainstream gender budgeting and procurement tools and other GESI planning tools with MDAs and LGs. • Employ the ETS model used under GAPP to embed GESI finance experts within these institutions.
Women are often not aware of their rights and protections under the law, or the mechanisms available for exercising them. As a result, women will not be in a position to leverage the legal gains from gender equality reforms.	In cooperation with DRG activities (e.g., RAJA), support the women’s movement in their legal literacy activities to create public awareness of GESI laws; to lobby GOU to fund implementation of laws; and to advocate for institutional change within the justice, law and order sector. Potential partners include: UWONET, UWOPA, and the Domestic Violence Act Coalition.
At the local level, CSOs working in civic engagement have limited awareness and understanding of gender equality laws, weak GESI expertise, and limited resources to	Build the capacity of local-level CSOs /CBOs and women’s groups to sensitize citizens, communities, and local government enforcement bodies on gender equality laws/rights. Define clear outcomes and criteria for GESI in procurements and implementation plans of IPs.

²⁸ Transparency International (2009). “The Anti-Corruption Plain Language Guide,” Berlin, Germany.

address the issue.

GOU's increasing reliance on indirect taxes for DRM has gendered impacts that disproportionately hurt poor and female households. Without careful planning, policies looking at potential formalization of the informal sector to generate greater tax revenue are likely to push women and vulnerable groups further to the margins.

Recommendations include:

- Work with Uganda's Revenue Authority to ensure a gender lens in tax policy, making indirect taxes gender-equitable. This can be done by including exemptions and zero rating of basic consumption goods. VAT reforms that lower the price of basic goods or services disproportionately consumed by women can also improve the gender responsiveness of tax policies and potentially transform existing gender inequalities.²⁹
- Work with policy makers to adopt a gender lens in fiscal policies looking at formalization - ensuring that the types of informal work in which women are concentrated (e.g., small-scale trade and services), are brought into the formal sector on the same basis as the informal work done by men.

Domain 2: Cultural norms and beliefs

Entrenched patriarchal norms and gender discrimination have fueled a lack of political will, commitment, and even resistance toward implementation of GESI laws and policies at all levels of GOU.

Recommendations include:

- Support MGLSD, UWOPA, women's organizations and CSOs to engage in continuous sensitization and policy dialogue with GOU enforcement bodies regarding GESI laws; and to generate and promote the evidence-base for social inclusion, women's empowerment, and gender equality.
- Work with MGLSD to empower their ability to engage other line ministries, including the MFPED, to prioritize and promote gender reforms, and to roll out gender policies, tools and training for mainstreaming gender in budgets, plans, monitoring/reporting systems.

Social stigmas and biases against LGBTI individuals prevent their full participation at all levels of society, subjects them to abuse and harassment, and impedes their ability to access services and housing. Fear of reprisal deters their reporting of abuse.

Continue to provide legal support to LGBTI individuals through RAJA including rapid response legal aid and protection services for LGBTI individuals whose rights are violated. Work with human rights groups and LGBTI advocates to sensitize public sector officials, including judicial and health sector workers, on issues of human rights and equality. To reach LGBTI victims of abuse, explore referral systems linking legal support to health and social services under other USAID EYCD and health activities.

Domain 3: Access to and control over assets and resources

High levels of youth unemployment, government corruption, political violence, lack of civic education, and voter disenfranchisement have exacerbated already high levels of apathy among youth. This inhibits their civic participation and their ability to influence decisions around services and governance.

Prioritize youth civic education and civic engagement in DRG activities, replicating and scaling prior successes including: Youth parliaments; funding/supporting youth organizations that enable participation in district budgeting; replicating the UWONET ToT focusing on female youth empowerment; investing in disability-inclusive infrastructure (e.g., ramps) to enable the participation of YWDs; support network building among different types of youth political groups. Partner with the NGO Bureau to replicate successful activities with other CSOs and strengthen its ties with youth organizations.

PWDs face unique barriers to participation in local government processes as well as national electoral processes due to their lack of access to information, resources, and institutions.

Expand access to infrastructure and information that enables the participation of disabled groups in daily civic life and new national electoral processes (e.g., using ramps, radios, braille, spoken word devices, etc.). Directly engage PWDs in design of disability-sensitive solutions. Support distribution of radios to PWDs to ensure access to political information.

Children are among the vulnerable groups most negatively affected by corrupt

To address corruption practices, the expectation of professional conduct of duty bearers (e.g., teachers, health workers, police officers

²⁹ Source: USAID DRM GESI Assessment

practices, either directly – through requirements to pay bribes to receive services – or indirectly – through services that are missed because resources have been plundered

and court officials, etc.) needs to be popularized among the general public. Inform the public as to the mandates of these officials, the prescribed fees, if any, for accessing services, and the mechanisms available for addressing complaints. Innovative awareness-raising mechanisms, such as providing information (e.g., paralegal) to litigants waiting in session, should be used.

Domain 4: Gender roles, responsibilities, and time use

Despite progress on policy, child labor (already high in Uganda) has become rampant nationwide, affecting girls and boys. School closures threaten future human capital formation. Human-trafficking of children is also problematic and worsening during the pandemic in the face of weak GOU enforcement capacity and corruption.

Support GOU to promote child labor laws alongside promotion of back-to-school and stay-in-school campaigns, as well as behavior change activities to foster appreciation of the importance of quality education for both girls and boys. Leverage synergies with new and existing EYCD, Health and DRG activities (e.g., IYCD and RAJA). Strengthen interventions through OVC programming to prevent child labor during and after the COVID pandemic.

Women's high unpaid care burden, poverty, and low literacy levels inhibit their ability to participate in local government decision-making processes and thereby their ability to influence the allocation of resources and services that benefit them.

Empower women to participate in LG councils and to effectively communicate needs. Replicate and expand the UWONET ToT to sustain and increase women's participation in LG councils across more districts. Employ household/couples' dialogue and male change agent approach to support behavior change around gender roles at household and community levels.

Domain 5: Patterns of power and decision-making

Despite sizable gains in women's political representation at national level, deeply embedded gender-biased patterns in public decision-making impede women's meaningful political participation. Furthermore, the number of women represented in LG councils remains pervasively low.

Recommendations include:

- Support women candidates of all parties to run for office through leadership training camps – what it means to be women in politics, challenges, leveraging social capital to get funding. (This approach has also helped build bi-partisan political cooperation.)
- Give special focus to politically active female youth groups to cultivate a leadership pipeline.
- Replicate and expand the UWONET ToT model.

Harassment and violence against women leaders and politicians, hinders women's political participation and is especially heightened around elections. Online violence against women politicians and vocal women leaders is on the rise and at risk of growing in the context of hybrid digital elections.

Work with Uganda Electoral Commission, UWOPA, women's organizations, media, CSOs and think tanks (e.g., POLLICY, UWONET) to track and report on harassment and violence against women in politics and counter impact with:

- Tools and training (e.g., digital safety, de-stigmatization to speak out on violence, know-your-rights, civics)
- Sensitization of GOU and the public on GBV and the value of GESI in politics; and,
- Cooperation with the private sector (and tech companies) to improve monitoring and reporting mechanisms to deter OVAW.

Young people with disabilities face social stigma and exclusion at home, school and in public, impeding their involvement at all levels of society. The needs of YWDs differ from adult PWDs, and the former do not feel that adult-run organizations for PWDS (OPWDs) effectively represent them.

Provide organizational development support for promising youth OPWDs to strengthen their systems, staffing, and strategies. Help youth led OPWDs to connect with other CSOs, NGOs and youth organizations on issues of overlapping interest, as well as to participate in local councils.

2.3.4.5 HUMANITARIAN ASSISTANCE AND SUPPORT TO KARAMOJA

FINDINGS

As indicated in Table 1, Uganda hosts about 1.5 million refugees (58 percent children below 18 years, 3 percent elderly above 59, 21 percent female, and 18 percent male aged 18 – 59 years) (UNHCR b, 2021). GESI vulnerabilities, therefore, exist across the life cycle as illustrated in [Figure 2 \(see Annex A\)](#). On the other hand, the Karamoja region comprises seven districts in northeastern Uganda (Kaabong, Kotido, Abim, Moroto, Napak, Amudat, and Nakapiripirit), with a total population of about 1.2 million. About 65.7 percent of its population is poor (UBoS, 2021), and the region is classified as one of the world’s poorest areas (USAID, 2017), with malnutrition and poverty rates. Over 57 percent of the population aged 14 – 60 years have no formal education, compared with the national average of 7.9 percent (UBOS, 2020). The region has the highest total fertility rate, with women of reproductive age (15-49 years) giving birth to an average of eight children (UNFPA, 2018), higher than Uganda’s of five.

Laws, Policies, Regulations, and Institutional Practices affecting gender and equity in humanitarian assistance: Uganda is a signatory to the main international legal instruments for refugee protection, including the 1951 Refugee Convention, the 1967 Protocol, and the 1969 Organization of African Unity (OAU) Refugee Convention (BPB, 2021). At the national level, Uganda has the 2006 Refugees Act and the 2010 Refugee Regulations. Both instruments make provisions for GESI.

The Refugees Act (Republic of Uganda, 2006) identifies “gender discriminating practices” to include strict and forced adherence to a dress code, forced pre-arranged marriages, physically harmful facial or genital mutilation, rape, domestic violence, and other gender-related harmful activities. It qualifies individuals for refugee status based on gender-related persecution, among others. The Act requires expeditious handling of applications by persons with disabilities; trauma victims, detained persons, and victims of torture; minors and vulnerable persons.

The Act also makes provisions for the rights of women refugees. These include: 1) A woman refugee shall have equal opportunities and access to procedures relating to refugee status, and affirmative action shall be taken to protect women refugees from gender discriminating practices. 2) A woman refugee is entitled to equal enjoyment and protection of all human rights and fundamental freedoms in economic, social, cultural, civil, or any other fields as provided for in the Constitution and other relevant laws in force in Uganda and international and regional instruments to which Uganda is a party.

The Refugee Regulations (Republic of Uganda, 2010), on the other hand, provide for affirmative action in favor of women, children, and persons with disabilities. It requires that in the integration of refugees in the host communities, the Commissioner for Refugees shall, in cooperation with the UNHCR and the other organizations, ensure that special attention is given to women, children, and persons with disabilities. While both instruments make strong provisions supporting GESI, there is no concrete guidance on what to do. This may result in little attention paid to vulnerable refugee groups in practice.

There are no special policies for the Karamoja region. The region, however, does benefit from Government’s equalization grants and equity requirements – particularly under the PFM Act 2015. Other government policies and laws on gender equality, disability, and youth inclusion also apply to the region.

GESI issues in refugee matters: Refugees come along with their cultures and social norms from their countries. While circumstances in the host communities may start to shape change in norms, the documented harmful gender norms and practices in Uganda’s host communities have not been particularly effective in denting the harmful gender norms refugees may come with. On the contrary, war and refugee situations escalate sexual violence against women and girls. Action for Development (Acfode) documents

harrowing stories of refugees from South Sudan who have experienced rape before and during their journey to Uganda and in various refugee settlements in Uganda (Acfode, 2018). UNHCR, for instance, recorded 4,297 cases of GBV in 12 refugee settlements between January and November 2019. In addition, the 2016 Uganda Demographic and Health Survey reveals a high prevalence of GBV in districts that host refugees (Government of Uganda and World Bank, 2020).

Risk factors for GBV are economic hardship and alcohol abuse by both men and women. The largest risk factor currently is ration cuts, which happened concurrently with COVID-19. Food insecurity stresses in refugee settlements have led to increases in GBV, domestic violence and teenage pregnancy over the past two years. Other significant factors include marital conflict resulting from infidelity or contraceptive use, social norms that justify violence against women and girls, a lack of economic opportunities, weak social support systems, and poor enforcement of laws. Such factors are also associated with psychosocial problems, including trauma (Ibid.).

GESI issues in Karamoja assistance

Cultural norms and practices: While the prevalence of Female Genital Mutilation (FGM) in Uganda remains one of the lowest in East Africa at 0.3 percent among women aged 15–49 years, the prevalence is as high as 52 percent in parts of Moroto district (UBoS, 2020b). Despite national legislation and local by-laws, harmful cultural norms such as FGM and child early and forced marriage persist in Karamoja. Among Pokot women, FGM is still being carried out mostly on adolescent girls as a rite of passage before marriage (Ibid.). According to research by UNICEF, older women who are tasked with the responsibility of educating girls about the culture and cutting them reinforce the need to get cut as failure to do so would spell the doom of remaining unmarried. With this ingrained attitude, girls themselves pursue every avenue to get cut, and in some instances (e.g., in Amudat district), they do it themselves before going to the FGM “surgeons” to complete the task (UNICEF, 2020). Indeed, UBOS indicates that 95 percent of women in Eastern Uganda support FGM abandonment, but strong social influences and peer pressure limit women’s ability to abandon the practice and influence others against it (UBoS, 2020b).

Gender roles, responsibilities, and time-use: Livelihood systems in the Karamoja sub-region have undergone substantial changes in the past two decades due to disarmament and improved security, the erosion of pastoral-based production, and the expansion of markets. These transformations have brought new social and economic options for many young people, men, and women (Dr. Stites, 2021). Diversification into additional economic activities has led to changes in traditional gendered divisions of labor by both men and women. These include women engaging in livestock marketing and men taking on roles such as selling firewood, chickens, or local brew. Young people are taking advantage of new and existing technology in response to emerging market opportunities (such as mobile phone sales and repairs). This shift in economic activities has led to domestic and reproductive labor burdens upon women and the loss of livestock-based livelihoods for many men (Ibid.).

Related to the above, the emergence of extractives in the region creates avenues for women to meet some of their income needs. However, this may also limit their focus on more strategic needs related to access to health, justice, and action against GBV (Falisse, A., and Umubyey, L., 2019). Despite these economic changes, girls in the region are groomed to do house chores and manual labor on farmlands. This leaves them vulnerable to abuse and can expose them to HIV (USAID, 2019).

Patterns of power and decision-making: Power and decision-making in Karamoja are complex and not stratified in a simplistic bimodal way but are structured within and across groups. It is extremely difficult to take it away or bestow it on any externally endorsed authority (UNICEF, 2020). Older women wield more power and guide the younger ones and enforce cultures such as FGM and marriage. Spiritual leaders and older men also take on special authority over the community, clan, and family relations. Within households, however, men wield more power and decision-making authority. Interventions to influence

the uptake of development interventions must therefore recognize and work within these gender societal structures.

Gender-Based Violence: Up to 53 percent and 13 percent of women have experienced physical and sexual violence in Karamoja since age 15 (UNFPA, 2018). One of the factors behind these high prevalence rates is the widespread cultural acceptance of such violence. GBV in the region is perpetuated by harmful cultural norms, inadequate protection of human rights, alcohol consumption, and poverty that compels girls to engage in early and non-protected sex for survival. Rape is common - young men of warrior age rape girls aged between 10 and 12 years as a way of “securing” them for marriage (UNFPA, 2018) (UNICEF, 2020). At 47.8 percent, the prevalence of alcohol use in Karamoja is the highest in the country (UBOS, 2021).

RECOMMENDATIONS

TABLE 7. HATO KEY FINDINGS AND RECOMMENDATIONS BY GENDER DOMAIN

FINDINGS	RECOMMENDATIONS
Domain 1: Laws, policies, regulations, and institutional practices	
GESI is reflected in laws and regulations for refugee assistance, but there is limited implementation	Encourage IPs to implement existing GESI provisions in the refugee policy and related Acts. This includes: <ul style="list-style-type: none"> • Highlighting relevant GESI policies and laws to IPs and ensuring that they are integrated in work plans • Educating vulnerable refugees about their GESI-specific rights e.g. those related to fast tracking of support to women and people with disabilities, and supporting them to use the laws in their asylum applications and other related procedures in the refugee settlements
There are no Karamoja-specific GESI laws, but the region is supposed to benefit from national laws whose implementation is also limited	Encourage IPs in Karamoja to implement GESI provisions provided in national laws and policies.
Domain 2: Cultural norms and beliefs	
Harmful social norms such as FGM, early marriage, and courtship rape persist in Karamoja, despite legislation	Facilitate safe spaces where girls in Karamoja can learn life skills and build safe social networks with other girls in a similar setting. Strategic
Harmful social norms in host communities continue to shape refugee norms and drive GBV prevalence among refugee and host communities	Adopt a hybrid of attitude change and law enforcement approach – to change the harmful norms among refugees and host communities. This should include <ul style="list-style-type: none"> • Enlightening refugees and host communities about the law, as well as the harms of GBV • Support behavior change activities to model positive behavior to curb GBV
Domain 3: Access to and control over assets and resources	
An over-dependence on subsistence livelihoods reduces the resilience of women and other vulnerable groups and poor households in Karamoja	Promote resilience by diversifying agricultural livelihoods, building assets, strengthening market systems, and promoting education – especially for vulnerable and poor households
Domain 4: Gender Roles, Responsibilities, and Time Use	
Changing-livelihoods in Karamoja have led to shifts in women’s time-use and opened up economic opportunities for women. This also comes with limited control by women over proceeds and less focus on strategic gender needs, e.g., education, health, and justice	Continue to promote interventions aimed at economic growth in the region while ensuring that women and young people benefit from the resultant economic empowerment.
	Ensure that other rights to justice, health, and education are equally promoted.

Domain 5: Patterns of power and decision-making

In Karamoja, there are intra-group patterns of power - older women and men have more decision-making power. At the household level, women have less decision-making power

Interventions need to be cognizant of, and to the extent possible, work with existing power structures in the Karamoja region to promote social cohesion and increase the effectiveness of interventions.

2.4 ORGANIZATIONAL CROSS-CUTTING FINDINGS AND RECOMMENDATIONS CROSS-

This section highlights two cross-cutting GESI issues that were identified at the organizational level based on converging information from USAID activity reports and KIIs with staff members. Recommendations are provided with a view to strengthening GESI outcomes.

Finding I: Although a high level of commitment and awareness around the importance of GESI exists at the broader mission level, a continued and more intentional integration of GESI is needed at the activity and IP levels. Across USAID, extensive reporting on GESI was not required until after the passing of the Women's Entrepreneurship and Economic Empowerment Act in 2018. Among sector offices, GESI expertise is often concentrated among the gender focal points. Meanwhile, the Uganda mission did not have a main gender focal point for a one-year period during the last CDCS. Together these factors may have hindered horizontal and vertical integration of GESI considerations in programming and MEL during the last CDCS period. Among IPs, staff noted that the GESI capacities and resources of national partners did not often translate to local level IPs, and their application of GESI best practices has been inconsistent. Finally, given the complexity and sensitivity of many GESI issues, some staff members expressed the need for expert facilitators to enable more productive dialogue among staff as well as between staff and IPs. Following are specific recommendations for actions to be taken at the mission and activity levels:

Mission-level recommendations:

1. Engaging third-party GESI facilitators (i.e., non-USAID staff) was suggested during KIIs. These *neutral* facilitators can help to create a more inclusive space for productive dialogue among staff members, especially on topics of a more sensitive nature.
2. Regularly apprise staff of gender training opportunities and update and train staff on the latest, most helpful GESI tools available to support their activities, such as USAID's new Women's Economic Empowerment Equality Technical Guide or the Value Chain Development Wiki. Gender advisors and focal points could also work together to design and deliver bespoke training packages to support small teams tackling a particular GESI issue.
3. Strengthen the culture of learning around GESI mission-wide, through leadership-driven initiatives that promote innovation, problem-solving and adaptive management.

Activity-level recommendations:

1. Provide GESI training, tools and resource support to IPs/CSOs working at the local level. Ideally, training should be conducted over several days and include both classroom and field exercises. A pre-training survey should be employed to gauge participants current understanding of GESI principles and key challenges they face in integration/implementation. Following an introduction to the key principles enshrined in USAID's Gender Equality and Female Empowerment Policy, content should be tailored to relevant sectors/value chains/themes, drawing on issues identified in (1) this gender analysis, (2) the pre-training survey, and (3) activity evaluations and assessments. Additionally, training should address GESI MEL and ways to improve monitoring, reporting, learning and adaptation. (See Annex B for additional guidance on GESI MEL).

2. Use gender-specific procurement criteria for the evaluation of submitted proposals and for further implementation. Examples of factors that may be considered when evaluating a proposal:

- Is the project team gender-balanced? Do the team members have an adequate level of gender expertise?
- Does the proposal include sex-disaggregated data and gender indicators?
- How do the team members propose to measure the different impacts of activities and interventions on women and men?
- Will the views of female beneficiaries and other stakeholders, such as gender experts or women's organizations be sought?

Examples of contractual requirements that may be included in the implementation conditions:

- Gender-balanced composition of the project team and beneficiaries;
- Balanced presence of women and men in decision-making positions;
- Specific analysis about gender-related concerns in the project and in the reports (e.g., mapping of the situation of women and men in the activity target areas).
- Use of sex-disaggregated data and gender indicators;
- Preference given to women when hiring staff in male-dominated sectors.

3. Establish clear GESI outcomes in activity M&E plans.

Finding 2: Despite successful GESI activities and strong M&E reporting, staff expressed that the full picture of GESI impact is not clear. Staff from multiple offices remarked that though quantitative data is available, they were still not able to articulate the full story of their impact. To this end, the authors recommend the use of:

1. More robust GESI specific indicators – both custom and standard (see Annex B).
2. More qualitative data to triangulate with quantitative data including use of: 'Most Significant Change' method; case studies; feedback sessions; and knowledge, attitude, practice surveys
3. Clear GESI baselines to be established before initiating new activities against which to measure progress (See Performance Indicator Baselines document in Annex A for additional guidance).
4. Increase engagement between program and M&E teams through: joint GESI training, additional pause and reflect events, after action reviews, and collaboration on GESI-related data collection and analysis.
5. Strengthen GESI M&E capacity of IPs.

2.5 CONCLUSION

The sectoral disparities described in each of the preceding sections of this report reveal women's precarious situation overall, as well as that of youth, PWDs and other vulnerable groups. The inequalities they face do not exist in only one sector but are interrelated, compounding their disadvantages along the life cycle (see Annex A) in comparison to men. For example, the marginalization of girls and other vulnerable groups (e.g., YWDs, refugee youth) in education implies that they will not be able to compete equally with men for jobs or leadership positions later in life – both in the private sector and in government. This in turn leads to their long-term socio-economic disadvantage, impeding their ability to

accumulate economic assets, to afford quality healthcare, and to influence policies that affect them both at the community and national levels. With high school dropout rates continuing to rise in the wake of the pandemic, women will marry young, have high levels of fertility and end up poorer. This illustrates the intersectional nature of gender and other parameters of marginalization, underscoring the need for USAID to continue its integrated cross-sectoral strategy for advancing gender equality and social inclusion.

As has been documented elsewhere in the world, the COVID-19 pandemic has further exacerbated exclusion and gender inequality gaps among all vulnerable groups in Uganda, across all sectors and regions. While the immediate economic impacts of the pandemic remain daunting for incomes and employment, of greater concern are the longer-term effects on human capital formation – especially for women, children and young people with disabilities – resulting from widened inequalities in access to education, increasing child labor, and the disruption in essential health services; all on the back of a very weak social protection system. These interrelated GESI consequences highlight the importance of taking a life-cycle approach when designing and considering the long-term impacts of USAID activities.

3 ANNEXES

3.1 ANNEX A: THE 14-YEAR-OLD GIRL FRAMEWORK: A LIFE CYCLE APPROACH

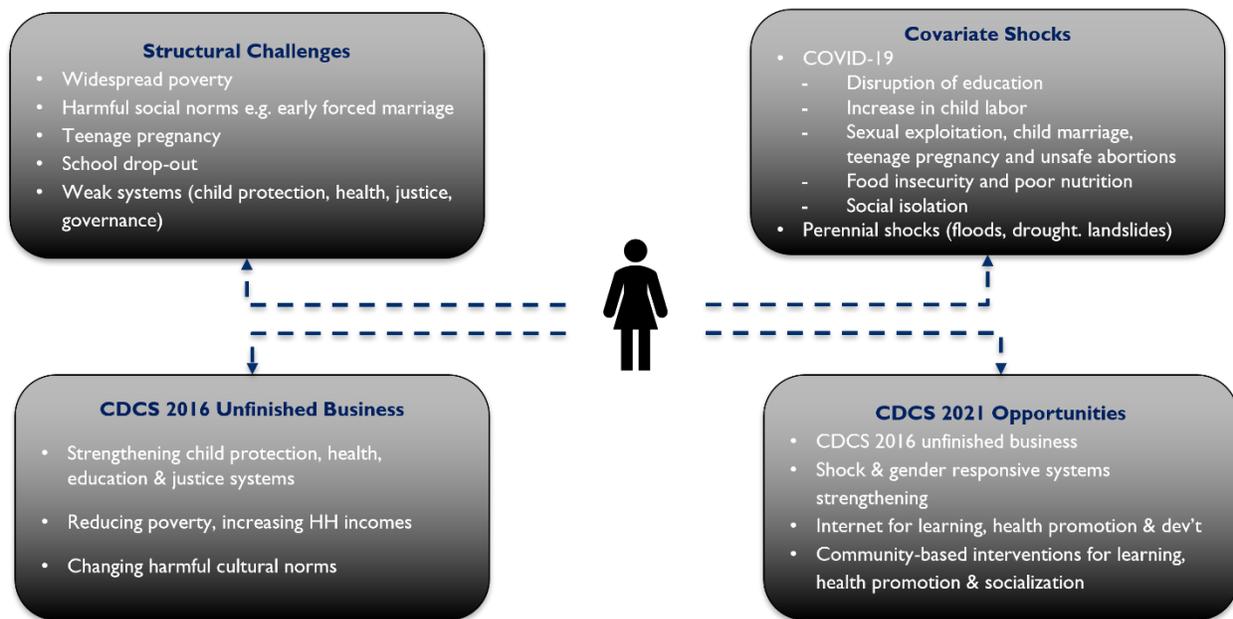
The Adolescent Girl Framework

Context: The preceding CDCS was premised on the demographic observation that “the average Ugandan is a fourteen-year-old girl. She is one of six children living in a rural area; her family is poor and finds itself vulnerable to economic, political, and environmental shocks. She has a one-in-four risk of becoming pregnant during adolescence, is at high risk of being engaged in early marriage and will likely drop out of school before reaching secondary level. Her status results from a combination of factors: poor nutrition, low performance in school, cultural expectations related to early marriage and family size, and systems not supporting her ambitions to thrive.” (USAID, 2016)

However, the Uganda Learning Activity’s (ULA) analysis of historical data compiled by the UN Population Division estimates that the average Ugandan in 2021 is a 16.7-year-old-girl (rounded off to 17). Although the average Ugandan remains an adolescent girl, the difference in average age in 2016 (14 years) and 2021 (17 years) is driven by fertility adding to the youngest cohort and mortality reducing the population in all cohorts. This notwithstanding, the shift in average age does not make the “fourteen-year-old girl” focus previously used in the last CDCS irrelevant to USAID’s outlook (see Figure. 1). It, however, calls for the use of a more encompassing framework that recognizes and plans for potential population shifts. Therefore, a life-cycle approach (illustrated in Figure. 2.) is proposed.

Issues affecting the average Ugandan (the adolescent girl): The structural problems currently affecting the adolescent girl are primarily the same as those in 2016. However, the context surrounding her and her family has been dynamic and more precarious. For instance, the COVID-19 pandemic has destabilized livelihoods, governance, learning, and health systems. This has worsened the vulnerability and depth of poverty for the average Ugandan (UBOS, 2021) (World Bank, 2021). The impacts are likely to be felt over the duration of USAID’s next CDCS and beyond.

Figure 1: Challenges and opportunities for the adolescent girl



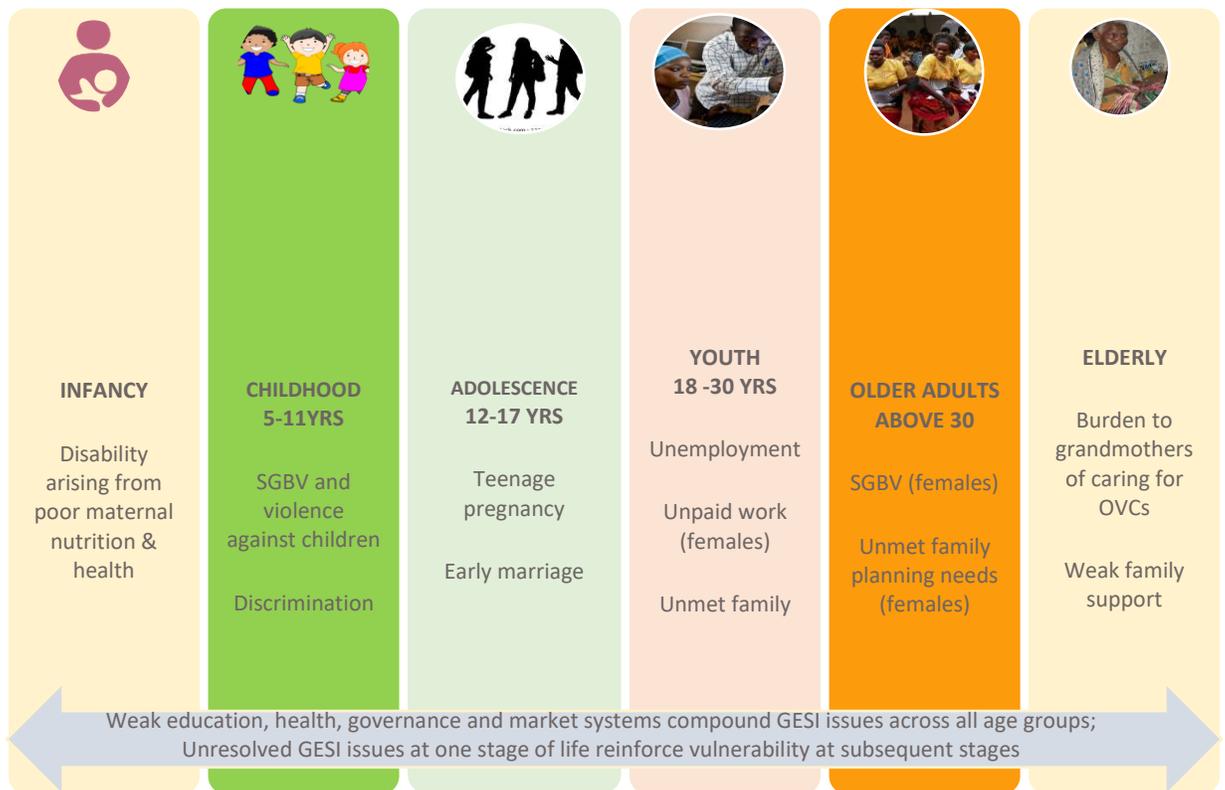
The average Ugandan is a 17-year-old girl (14-year-old girl in 2016)

The life cycle approach to examining GESI vulnerabilities and supporting the average Ugandan: This approach recognizes that gender and other axes of social exclusion influence development outcomes in varying ways along the life span. For example, the World Bank notes that, “in the life-cycle approach, links across age groups mean that the effectiveness of programs catering to older populations will depend critically on the success of programs that have helped the young. Early child development is a crucial ingredient for resilience across the life cycle – with adequate nutrition in infancy and early childhood being an important determinant of whether children can escape poverty. Again, proper education is a major predictor of ability to use skills-building programs” (World Bank, 2012 p.6).

The authors of this GESI analysis propose a life cycle approach because it:

- Reinforces benefits for the average Ugandan (the adolescent girl). Several interventions during infancy and childhood affect education and health outcomes for the adolescent girl.
- Accounts for transitions from one age bracket to another (the girl who was 14 years old at the start of the last CDCS is now about 19 years old).
- Recognizes gender (socially ascribed characteristics and roles attributed to girls, boys, women, and men) and reduces the risk of reinforcing gender as only about girls/women.
- Includes other vulnerable groups and intersections of vulnerability and does not focus solely on the adolescent (e.g., disability would be a cross-cutting issue across the lifespan).
- Aligns with the approach used by the Government of Uganda in the National Development Plan (NDP III) to plan for human capital development.
- Utilizing the framework: The framework can be integrated into activity-level GESI analysis to ensure that sector-specific and regional vulnerabilities are identified.

Figure 2: Gender and social exclusion vulnerabilities along the lifecycle



3.2 ANNEX B: GENDER-SENSITIVE MONITORING, EVALUATION AND LEARNING

This section offers suggestions to strengthen GESI in the mission’s MEL activities, including recommendations around illustrative GESI indicators and learning questions.

I. Strengthening GESI in MEL

When setting up a MEL system, ensure *sufficient and accurate GESI baseline data* is obtained. This data is critical to measuring and understanding GESI impacts, which can be a challenge given that gender-related data is often unavailable or not up to date. Nonetheless, to assess the effects of interventions on gender equality and social inclusion, it is necessary to compare baseline data to other points in time. It is therefore imperative to establish the initial situation *before* interventions begin and address specific questions as relates to gender, youth, PWD, refugee issues, etc. within the context of an activity’s theory of change. Importantly, the intersectional identities of the stakeholder groups must be taken into consideration when determining the types of quantitative and qualitative data needed to measure impact. Findings from sector and value-chain specific gender analyses can serve as baseline information from which to judge progress. The MEL team may also plan initial baseline data collection. The following USAID resources may be helpful for teams looking to strengthen GESI in MEL:

- [The Women’s Economic Empowerment and Gender Equality \(WEEGE\) MEL worksheet](#): This tool is helpful to consider the GESI linkages between DOs, IRs, sub-IRs, indicators and associated activities. It includes a series of tables that can help to structure and think through this process, as well as ensure that the MEL team tracks and harmonizes GESI MEL across all levels.
- [The WEEGE PMP tool](#) offers both mission-level and activity-level guidance and several “How-To Notes” to inform the development of gender-sensitive MEL plans and PMPs.
- [Performance Indicator Baselines](#) – This document provides supplemental guidance to ADS 201.3.5.7.E Indicator Baseline and offers guidance for planning and collecting performance indicator baseline data for M&E of USAID strategies and activities.

Collaborating, Learning and Adapting (CLA) is a critical part of MEL and provides an opportunity to advance the learning agenda for GESI among the agency, missions, and implementing partners. CLA with a GESI lens must be integrated intentionally throughout each phase of the MEL process. It ensures that decisions being made are based on data that are accurate and enables decision-makers to alter their course of action (or planning) in a manner that best reflects current realities. Gender-related programming can sometimes have unintended negative consequences when the range of relationships and power dynamics are not fully understood or considered in the design phase, or if those power dynamics are changing under stressful circumstances. Analyzing GESI-related information sources throughout a MEL process enables more robust learning, both for USAID and IPs. A key ingredient in successful CLA is a learning-driven environment: one that nurtures open and safe discussion, appreciates the value of learning from mistakes, and espouses innovative problem-solving. The role of mission leadership is essential in fostering and sustaining an inclusive and dynamic learning culture.

Helpful CLA resources include:

- USAID’s [CLA Toolkit](#) is a great resource to help think through how to incorporate GESI at every level, including how to enhance organizational culture for CLA.

- Pact’s [Adaptive Management Guide](#) provides practical guidance to development practitioners globally on the mindsets, behaviors, resources, and processes that underpin an effective adaptive management system. The guide presents an approach to managing adaptively that is rooted in complexity analysis and program theory. It draws on global work on topics as diverse as health, livelihoods, markets, governance, capacity development, women, and youth, and more.

II. Illustrative GESI Indicators by Sector

To strengthen understanding of GESI gains and gaps in the mission’s programming, all people-level data should be disaggregated by sex *and* age, whether this is specifically indicated. Additionally, many indicators can be further disaggregated by other categories, such as disability status, ethnicity, education level, location, marital status, and legal status or any other relevant group or category. The data obtained from these additional levels of disaggregation is necessary to understand the intersectional dimensions of GESI (for example, the interplay between age, gender, and disability as relates to GBV). Another important element of capturing the intersectional dimensions of GESI is the use of qualitative indicators, which tend to be custom indicators. For example, during several KII, staff from various offices expressed the need to capture more qualitative data to triangulate with the quantitative data from their activities to help understand and convey the full story of their impact. Together this quantitative and qualitative information will help the mission to identify pockets of exclusion and subsequently to ensure that activities are more responsive to the specific circumstances, preferences and priorities of women, youth, and other vulnerable groups (PWDs, refugees, LGBTI, etc.).

At present, the Mission utilizes the following eight cross-cutting gender indicators:

- Number of legal instruments drafted, proposed or adopted with USG assistance designed to promote gender equality or non-discrimination against women or girls at the national or sub-national level (GNDR-1)
- Percentage of female participants in USG-assisted programs designed to increase access to productive economic resources (assets, credit, income or employment) (GNDR-2)
- Percentage of participants reporting increased agreement with the concept that males and females should have equal access to social, economic, and political resources and opportunities (GNDR-4)
- Number of legal instruments drafted, proposed, or adopted with USG assistance designed to improve prevention of or response to sexual and gender based violence at the national or sub-national level (GNDR-5)
- Number of people reached by a USG funded intervention providing GBV services (e.g., health, legal, psycho-social counseling, shelters, hotlines, other) (GNDR-6)
- Number of persons trained with USG assistance to advance outcomes consistent with gender equality or female empowerment through their roles in public or private sector institutions or organizations (GNDR-8)
- Number of training and capacity building activities conducted with USG assistance that are designed to promote the participation of women or the integration of gender perspectives in security sector institutions or activities (GNDR-9)
- Number of local women participating in a substantive role or position in a peacebuilding process supported with USG assistance (GNDR-10)

In addition to the indicators currently in use by the mission, the following non-exhaustive list of standard and custom indicators should be considered. It is important to remember that even those indicators that do not specifically reference gender should be used. Data from these indicators, especially the disaggregate reflecting “number of women” for each indicator, can be used to report USAID’s contributions and progress toward women’s empowerment, gender equality and social inclusion across sectors.

Cross-Cutting Gender Indicators

- **Standard Indicators:**

- Percentage of females who report increased self-efficacy at the conclusion of USG training/programming. (GNDR-3)
- Percentage of participants that view Gender-Based Violence (GBV) as less acceptable after participating in or being exposed to USG programming. (GNDR-7)

Health Illustrative GESI Indicators

- **Custom Indicators:**

- Proportion of women who report being satisfied with the quality of health in the city or area where they live.
- Proportion of women with confidence in being able to deal with sexual pressure from partner
- Proportion of women who think they have a right to view about spouse, time of marriage, size of family (by sex)

EYCD Illustrative GESI Indicators

- **Standard Indicators:**

- Number of individuals attending higher education institutions with USG scholarship or financial assistance (ES.2-2)

- **Custom Indicators:**

- Number and percentage of children dropping out of primary school in USAID-supported districts (disaggregated by sex and disability status).
- Number and percentage of children experiencing SRGBV (disaggregated by sex).
- Numeracy level (disaggregated by sex and disability status).
- Reading and comprehension level (disaggregated by sex and disability status).

EG Illustrative GESI Indicators

- **Standard Indicators:**

- Total number of clients benefitting from financial services provided through USG-assisted financial intermediaries, including non-financial institutions or actors (EG.4.2-1)
- Average percent change in earnings following participation in USG-assisted workforce development programs (EG.6-11)
- Percent of individuals with new employment following participation in USG-assisted workforce development programs (EG.6-12)
- Percent of individuals who complete USG-assisted workforce development programs (EG.6-14)
- Percent of individuals with better employment following participation in USG-assisted workforce development programs (EG.6-15)

- **Custom Indicators:**

- Percent distribution of currently married women age 15–49 by whether she earned more, the same or less than her husband
- Percent distribution of currently married men and women age 15–49 who receive cash earnings by person who decides how husband’s cash earnings are used
- Percent distribution of currently married women age 15–49 who received cash earnings for employment in the preceding 12 months by person who decides how wife’s cash earnings are used
- Percentage of individuals (by sex and age) who own or have access to a smartphone in USAID-supported districts?
- Percentage of individuals (by sex and age) who use the Internet daily in USAID-supported districts?
- Percentage of women who earn income from engagement with the [insert name] sector (number of women/total number of women)
- Percent of women who borrowed money from a financial institution in the past 12 months
- Percent of female-owned SMEs with an account at a formal financial institution

In addition to the above quantitative indicators, the following **custom qualitative EG indicators** will help to generate more nuanced information regarding women’s level of economic empowerment:

- Consulted on sale of asset
- Believes household should invest to reduce household chores or men and boys should do some chores
- Can decide how and when to invest in own business
- Consulted or involved in decisions about agricultural production
- Negotiates fair division of unpaid household chores
- Confidence in saving, business, financial skills
- Who is consulted/involved in decisions about household spending and consumption (by sex)
- Women's involvement in community decision-making (regarding women's involvement in major household decisions)

DRG Illustrative GESI Indicators

- ***F-Indicators:***

- Number of judicial personnel trained with USG assistance (DR.1.3-1)
- Number of government officials receiving USG-supported anti-corruption training (DR.2.4-1)
- Number of independent worker organizations supported by USG to promote international labor standards (DR.4.5-1)
- Number of female human rights defenders trained and supported (DR 6.1-2b)

- ***Custom Indicators:***

- Extent to which a national budget is broken down by factors such as gender, age, income or region (score)
- Female victims of intentional homicide (per 100,000 population)
- Percentage of women aged 15 and higher who report that they feel safe walking alone at night in the city or area where they live
- Percentage of women who agree that a husband or partner is justified in beating his wife or partner under certain circumstances
- Freedom to leave the house without an escort or prior permission

HATO illustrative GESI indicators

- **Standard Indicators:**

- Percentage of female participants in USG-assisted programs designed to increase access to productive economic resources (assets, credit, income or employment).

III. Illustrative GESI Learning Questions by Sector

The following illustrative learning questions address issues beyond the scope of this analysis that can help guide CLA efforts and inform GESI integration in existing and upcoming USAID programming.

Illustrative Health Learning Questions

- What solutions can be implemented at scale to manage side effects and scale up the uptake of long-acting family planning methods?
- What are some of the most effective ways to scale up access to health insurance by poor households, and increase the proportion of Uganda's population with access to health insurance?

Illustrative EYCD Learning Questions

1. In what ways do school-based teaching practices reinforce negative attitudes that affect girls' proficiency in mathematics? What best-practice examples can be promoted in the Ugandan context?
2. Which school characteristics (e.g. policies, attitudes of teachers, attitudes of peers, etc.) are most effective to promote inclusion of children with disabilities in education and after-school activities?
3. Which global best practice models have accelerated the quality of basic education in developing countries and how can they be adapted to the Ugandan context to improve education outcomes?

Illustrative EG Learning Questions

5. To help identify what are the optimal economic opportunities and varying entry points for women, youth (male and female) and PWDs within agricultural value chains as well as non-agricultural opportunities, the following questions should be asked:
 - What are the skill gaps of these groups? How do the skill gaps of young women differ from those of young men? PWDs? Refugees? How might these skill gaps vary by location?
 - What roles do young women currently play in [targeted] agricultural value chain that are valued and accepted? What do young women have to say about this?
 - What new economic opportunities do women/young women see for themselves both within and outside of the agricultural sector? PWDs? Refugees?
 - What are the feelings/aspirations/barriers faced by young women, young PWDs, and young refugees with regard to uptake of digital tools and training?
6. How can the mission help combat child labor in agricultural value chains, especially in VCs such as tea and coffee where rates of child/forced labor are highest? Can current activities serve as entry-points for addressing this issue?
7. To what extent, if at all, are USAID activities in support of women's participation via VSLAs contributing to tension between couples at the household level? To domestic violence? Consider

short- and long-term stressors that may contribute to these tensions, such as pandemics, droughts, political upheaval, and how activities can be adapted to respond.

8. To what extent are men and women informal workers and entrepreneurs interested in/willing to formalize and why/why not? What are the GESI-specific concerns that women have around formalization, and how do these concerns vary across regions and urban versus rural locations?

Illustrative DRG GESI learning questions

1. Are marginalized groups at risk for being adversely impacted by USAID's efforts? If so, how? How can programs be designed to minimize unintended negative impacts?
2. What opportunities are there for supporting the needs of LGBTI groups and individuals through intersectional activities linking DRG with, for example, Health and EG activities to increase access to jobs, legal services, and health services in tandem?
3. Which PWD organizations, especially youth-led, show the most promise for impact? What kinds of organizational development support do they require to accomplish their mission?
4. How does corruption impact access to services by vulnerable groups in the target districts where USAID works and how do they vary by stakeholder group?
5. How can USAID activities improve security to enable greater access to services for youth and women?
6. What is the appetite among GOU authorities to strengthen social protections and/or social safety nets? What are the key funding constraints and/or sustainability implications for GOU and how can USAID support and/or encourage movement on this topic?

The following fiscal-related questions were derived from the gender analysis of the DRM activity:

7. How should tax systems recognize the value of unpaid care-giving services? What types of exemptions should there be for spouses or partners who contribute unpaid care work?
8. How should tax policy deal with rural–urban differences, low levels of formal employment and relatively large informal sectors, which is where the majority of women and youth workers are concentrated?
9. How can tax administration be made appropriate for low levels of literacy, especially for women, the impact of the HIV/AIDS epidemic on households and income, and weak tax enforcement and capacity?
10. How can implicit bias in indirect taxes – heavily used in developing countries – be assessed, given the problems of measuring differential consumption? There is great difficulty in showing non-neutrality in value-added taxes and other broad-based consumption taxes.

Illustrative HATO Learning Questions

- I. How do refugee and host-community norms interact to change or reinforce negative gender and social exclusion/inclusion

3.3 ANNEX C: REFERENCES

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3.4 ANNEX D: NATIONAL POLICIES FOR GENDER EQUALITY AND SOCIAL INCLUSION

NATIONAL GESI POLICES

NATIONAL GESI POLICES							
NO	POLICY	YEAR	GENDER SPECIFIC?	GENERAL FOCUS	GENDER SENSITIVE?	SPECIFIC GENDER FOCUS	KEY GAPS
1	The Domestic Violence Regulations	2011	Yes	Providing justice for victims of domestic violence	Yes	Needs of female victims of domestic violence	Domestic violence restricted to marriages. Only children considered vulnerable
2	The National Policy of Internally Displaced Persons	2007	No	Internal displacement (causes and effects)	No	None	Gender relations of displacement missing
3	The Gender in Education Sector Policy 2016	2016	No	Enhancing equal access to and participation in education and sports	Yes	Gender equality and equity, gender roles and gender needs	Focuses on learners, not their teachers and the learning environment
4	The Gender Policy of the Judiciary of the Republic of Uganda Table text	2003	Yes	Attaining gender equality in access and treatment by the Judiciary	Yes	Gender mainstreaming in accessing justice	Identified problems in the policy not well addressed in the strategy attached
5	The National Equal Opportunities Policy	2006	No	Equal opportunities for all in society	Yes	Discrimination based on gender, widows and female household heads	More emphasis on vulnerable people, no women or specific gender relations
6	The Uganda National Gender Policy	1997, 2007	Yes	Gender mainstreaming in government by all stakeholders	Yes	Women's inclusion in development	Gender-based violence, harmful practices and discriminatory laws and structures missing
7	The Makerere University Gender Equality Policy	2009	Yes	Gender equality, equity and women's empowerment	Yes	Gender mainstreaming and gender justice	Inter-staff and student relationships, discrimination and sexual harassment in human resource and governing structures

8	The Kyambogo University Gender Policy	2014	Yes	Gender mainstreaming in university policies, processes and programs	Yes	Language, awareness, reporting mechanisms	It is too detailed and fragmented, posing challenges for interpretation and implementation
9	The Land Policy	2013	No	Efficient, equitable and optimal utilization and management of Uganda's land resources	Yes	Women's rights as human rights	Structural causes of gender inequalities in land access and ownership
10	The Energy Sector Gender Statistics Profile	2012	Yes	Gender awareness and gender-responsive skills in the sector	Yes	Gender mainstreaming	Updated gender-responsive data
11	The National Policy on the Elimination of Gender-based Violence in Uganda	2016	Yes	To eliminate gender-based violence from all societies	Yes	Survivors and victims of GBV	Power relations causing GBV
12	Guidelines for Mainstreaming Gender in Human Resource Management in the Public Service	2011	Yes	Gender mainstreaming in the public service through the HR function	Yes	Gender issues in employment, especially occupational gender segregation	Structural causes of gender inequalities in employment
13	The Water and Sanitation Gender Strategy	2018-2022	Yes	Gender mainstreaming gender in the water sector	Yes	Equal opportunities in access to and use of water	Definitions of key concepts (gender, gender equality, women's empowerment)
14	National Priority Gender Equality Indicators (2016)	2016	Yes	Gender equality indicators	Yes	Indicators for gender assessment per key sectors	No indicators on agriculture and land, which are key to gender relations in Uganda
	(Source: Ssali, 2019)						

3.5 ANNEX E: KEY INFORMANT INTERVIEWS

ID	DATE/TIME (EAT)	ORGANIZATION	INTERVIEW METHOD	ATTENDEES
1	June 14, 2021 10 – 11 am	USAID	Remote, virtual conference call	<ul style="list-style-type: none"> Julie Grier-Villatte, Office Director, Education, Youth and Child Development Berna Twanza, Gender Advisor Irene Among, National Gender Expert
2	June 14, 2021 12 – 1 pm	USAID	Remote, virtual conference call	<ul style="list-style-type: none"> Lin Liu, Deputy Director, OHH/Health Berna Twanza, Gender Advisor Irene Among, National Gender Specialist
3	June 15, 2021 2 – 3 pm	USAID	Remote, virtual conference call	<ul style="list-style-type: none"> Jill Jupiter Jones, Youth Team Leader Berna Twanza, Gender Advisor Irene Among, National Gender Expert
4	June 17, 2021 3 – 4 pm	USAID	Remote, virtual conference call	<ul style="list-style-type: none"> Monica Azim, Office Director, Democracy, Rights & Governance Berna Twanza, Gender Advisor Delila Khaled, Team Leader Irene Among, National Gender Expert
5	June 21, 2021 3 – 4 pm	USAID	Remote, virtual conference call	<ul style="list-style-type: none"> Maurice Oguto, Acting Office Director, Economic Growth (EG) Simon Byabagami, Agriculture Unit, EG Berna Twanza, Gender Advisor Delila Khaled, Team Leader Irene Among, National Gender Expert
6	June 23, 2021 2 – 3 pm	USAID	Remote, virtual conference call	<ul style="list-style-type: none"> Morgan Limo, Director, Program Office Berna Twanza, Gender Advisor Delila Khaled, Team Leader Irene Among, National Gender Expert
7	June 28, 2021 3 – 4 pm	USAID	Remote, virtual conference call	<ul style="list-style-type: none"> Anthony Madeiro, Democracy Officer, Democracy, Rights and Governance (DRG) Harriet Muwanga, Gender Focal Point, DRG Berna Twanza, Gender Advisor Delila Khaled, Team Leader Irene Among, National Gender Expert
8	June 29, 2021 3 – 4 pm	USAID	Remote, virtual conference call	<ul style="list-style-type: none"> Lisa Gutierrez, Director, HATO Berna Twanza, Gender Advisor Delila Khaled, Team Leader Irene Among, National Gender Expert
9	June 30, 2021 3 to 4 pm	USAID	Remote, virtual conference call	<ul style="list-style-type: none"> Martin Muwanga, Senior M&E Specialist, M&E Team Fiona Waata, M&E Specialist, M&E Team Berna Twanza, Gender Advisor Delila Khaled, Team Leader Irene Among, National Gender Expert

3.6 ANNEX F: SCOPE OF WORK FOR THE GENDER ANALYSIS

Gender Analysis for the Country Development Cooperation Strategy (CDCS)

Scope of Work (SOW)

I. PURPOSE

According to USAID’s ADS Chapter 201, “Missions must conduct a strategic-level gender analysis to provide insights about gaps between women and men and identify entry points and opportunities for improving gender equality in their CDCSs. Missions will later build upon and/or update this analysis in the subsequent processes to design projects.”

The purpose of the Gender Analysis is to identify key gender issues and gender constraints that need to be addressed in USAID/Uganda current and proposed programs as part of the process for developing new strategic thinking for the Country Development Cooperation Strategy (CDCS) and to make recommendations for USAID/Uganda to integrate gender analysis findings in its CDCS to achieve greater gender-focused results in its programs.

The analysis should not start from scratch. It should primarily update previous gender analyses (attached) conducted for its current strategy, identify emerging trends, and refresh the “14-year-old girl” framework in the previous CDCS to facilitate the operationalization of gender-equitable programming.

2. BACKGROUND

USAID/Uganda is preparing to develop a new CDCS for 2022-2027. To inform the new CDCS and future programming, USAID/Uganda intends to conduct a country-level Gender Analysis. The report should serve as an update to the previous Gender analysis focusing on what has changed over the last five years and documenting any key emerging trends. The report should structure recommendations by Mission sectors (Health, Education, Governance, Economic Growth, including resilience and refugee transitions) to provide a framework for effective integration of gender equality and female empowerment in its programs. The report should also have an executive summary featuring topline findings and any cross-sector recommendations.

This responds to USAID’s gender requirements and complies with ADS 201.3.2.9 and ADS 205 which require that Strategic Plans reflect attention to gender concerns. Namely that its analysis identifies the macro or sectoral level societal gender inequalities or obstacles to female empowerment so that gender equality and female empowerment can be reflected in the CDCS Goal, Development Objectives (DOs), and Intermediate Results (IRs) and sub-Intermediate Results.

3. MISSION GENDER ANALYSIS

Gender Analysis: An analytic, social science tool that is used to identify, understand, and explain gaps between males and females that exist in households, communities, and countries and the relevance of gender norms and power relations in a specific context. Such analysis typically involves examining differences in the status of women and men and their differential access to assets, resources, opportunities, and services; the influence of gender roles and norms on the division of time between paid employment, unpaid work (including subsistence production and care for family members), and volunteer activities; the influence of gender roles and norms on leadership roles and decision-making; constraints, opportunities, and entry points for narrowing gender gaps and empowering females; and potential differential impacts of development policies and programs on males and females, including unintended or negative consequences.

In alignment with ADS 205, the gender analysis report will provide a country-wide analysis of gender roles and constraints (including women's economic empowerment). It will also identify information about groups of women or men, boys and girls that are particularly disadvantaged or that have strong unmet needs for empowerment. Particular attention must be paid to the country-specific context for lesbian, gay, bisexual, transgender, and intersex [LBGTQI+] persons. The purpose of the gender analysis is to inform USAID/Uganda's strategic planning and program implementation. It will identify the key gender inequalities, issues, and constraints and make recommendations on how USAID/Uganda can achieve greater gender and social inclusion integration in its CDCS, projects, and activities.

The analysis will help the mission identify, understand, and explain the gender gaps between men and women. It should look at differences related to geography, socioeconomic backgrounds, and age. In addition to sex disaggregation, the analysis should to the extent practical and possible (as this information may or may not be available) disaggregate population by age: children, youth, and adults, as they relate to the technical areas identified below and, more specifically, those areas highlighted during initial consultation discussions with USAID/Uganda. It is also used to identify the relevance of gender norms and power relations in a specific context (e.g., country, geographic, cultural, institutional, economic, etc.).

Of equal importance, the analysis will include concrete recommendations on ways to mitigate gender inequality and increase women's participation and economic empowerment that can be integrated into USAID/Uganda's DOs, IRs and sub-IRs, performance monitoring and indicators (to the extent that these have been developed), evaluation plans, and solicitations. Recommendations in the final report should clearly articulate the language/text from the analysis that should be included in the CDCS and Results Framework.

Per ADS 205.3.3., the gender analysis must provide descriptive statistics³⁰ on men and women (education, health, community participation, political participation, economic activity and earning, time use, violence, etc.) and will also provide country and sector-level quantitative and qualitative data on the key gender gaps in each of the domains described in section 205.3.2:

- Laws, Policies, Regulations, and Institutional Practices
- Cultural Norms and Beliefs
- Gender Roles, Responsibilities, and Time Use
- Access to and Control over Assets and Resources
- Patterns of Power and Decision-making.
- Safety/ Security/ Violence/ GBV risk/response

This data will focus on the country level and on specific sectors where Mission resources are likely to be concentrated. At this level, the analysis should, to the extent possible, also provide information about

³⁰ ADS 205.3.2. Descriptive Statistics in Gender Analysis: Gathering statistics on women and men is a core element of carrying out a gender analysis. As much as possible, these statistics should not treat men and women as monolithic categories but should reflect the intersection of sex with other characteristics such as age, marital status, income, ethnicity, race, disability status, geographic location, sexual orientation and gender identity, or other socially relevant category as appropriate, in: Education, Health, Political participation, Economic activity and earnings, Time use, Violence, and other relevant domains. It is important to understand the intersecting identities a person has in order to capture the extent to which they may or may not experience heightened marginalization or exclusion in society. Statistics disaggregated by sex should be collected and reported separately in two different categories (male or female) or fashioned into ratios or absolute or relative gaps to show the status of females relative to males. Indicators pertaining to either males or females only should also be included, for instance, those measuring progress toward women's participation and leadership.

groups of women or men that are particularly disadvantaged or that have strong unmet needs for empowerment (e.g., women from marginalized ethnic groups, women with disabilities, and so forth).

The analysis must disaggregate by age and sex in order to be able to identify youth. USAID Youth in Development Policy defines youth in the cohort of 10-29 years although the needs and experiences within this cohort are vastly different so we recommend further breakdown where relevant.

Key lines of inquiry for the analysis include the following (all of which should cover the relevant domains listed in ADS section 205.3.2):

1. To the extent possible to determine, what are the current gaps between men and women, girls and boys that belong to the following groups (listed below) in terms of gender analysis key domains, and provide recommendations on how the USAID/Uganda programs can help close gender gaps found in the areas and sectors where USAID/Uganda works (Economic Growth, Health, Governance, Education, youth and Child development, Humanitarian Assistance).
 - Primary: Female and male youth, women with low socioeconomic background, urban and rural inhabitants.
 - Secondary: Persons with disabilities, victims/survivors of gender-based violence, victims of human trafficking, LGBTQI, rural and urban.
2. What are the key issues and constraints to equitable political and socio-economic participation, leadership/decision-making, and access to economic, political, and social opportunities for men and women in Uganda?
3. What are the opportunities for gender integration across the following themes
 - Capacity building and advancement of local ownership especially government institutions' commitment, planning, implementation, monitoring/evaluation, and budgeting capacities
 - Economic development, workforce development and job readiness, micro-, small- and medium-sized enterprise development, employment, fiscal reform
 - Governance, civic engagement and participation/leadership, human rights, rule of law
 - Family health, planning and population growth, maternal and child mortality, nutrition, WASH, access to and quality of health services, health financing and systems strengthening
 - Learning outcomes, learning environment, SRGBV, disability-inclusive education and accessibility, teacher professional development opportunities
4. Laws, Policies, Regulations, and Institutional Practices; Cultural Norms and Beliefs; Gender Roles, Responsibilities, and Time Use; Access to and Control over Assets and Resources; Patterns of Power and Decision-making.
5. What are the specific barriers to men and women with disabilities participating in society and the economy in Uganda? What do Disabled People's Organizations think are helpful ways donors can support reducing barriers for persons with disabilities?
6. What is the legal and policy framework to support gender equality, including gender-sensitive policies both at the central and local level? (This can be done through a spot check of how districts where USAID works are incorporating these issues). What are the legal and policy frameworks that may hinder gender mainstreaming?

7. To the extent possible to determine for such an under-reported phenomenon, what might be the effects of gender-based violence (GBV) (for different populations, but also within the context of each priority sector listed above in #3)?

The report recommendations will concentrate on how USAID can operationalize gender and social inclusion within the forthcoming CDCS Results Framework. It will identify possible entry-points for the incorporation of gender and other considerations in carryover activities and potential new programs. Special attention will be paid to direct collaboration with the GOU and with the private sector. While Uganda scores relatively well on most technical capacities under the Journey to Self-Reliance roadmap, it is below average on the commitment arena. Therefore, the analysis needs to include recommendations for how the Mission can improve tangible commitment to gender equity. The analysis should also include illustrative indicators, illustrative learning questions and identify recommendations toward gender sensitive MEL and an appropriate PMP.

4. METHODOLOGY

The gender analysis will comprise a combination of primary and secondary data collection. It will begin with an extensive desk research phase that will review and analyze secondary data, including, but not limited to: relevant national policies, laws, and regulations; sectoral analyses in the research and grey literature conducted by national government entities, USAID, other donors or international organizations, civil society, universities and think tanks; national and regional statistical databases; regional or global comparators that have made significant strides on gender equality, especially as related to women's economic and political participation; and, any literature relevant to the sectors and the region.

The literature review will be focused at the macro and sectoral level to identify the gender and social inclusion inequalities or obstacles to female empowerment related to the mission's overall priority focus areas. Relevant statistical indicators will be selected and updated, focused on the sectors and regions prioritized by USAID. USAID/Uganda will create a Google Drive Folder to provide all the reports that are not found on the internet (i.e., PAD gender analyses, as well as other relevant reports and information).

5. PERIOD OF PERFORMANCE AND LEVEL OF EFFORT

The period of performance for the gender analysis is estimated at three and a half months. The estimated schedule for delivery of this task is provided in Section 7, Deliverables.

We are anticipating 50 days of LOE for the Team Leader and 50 days of LOE for a National Gender Expert.

6. DELIVERABLES

Deliverable 1: Inception Report (IR) and Work Plan. The IR is key since its contents will provide a detailed description of how the gender analysis and gender assessment will be carried out from beginning to end. It must include a detailed methodology for the Gender Analysis, detailed activities for the operationalization of the desk review and desk work, and annexes to include any other relevant material. The Work Plan will include a proposed schedule of desk review activities and fieldwork, the timeline for data processing and analysis and drafting of the final report, and any other relevant information regarding the assessment. The inception report should be regarded as a living document; adjustments can be made in accordance with learning and in consultation with the USAID Mission.

Deliverable 2: Products include: a) a PowerPoint presentation of preliminary findings and recommendations of the Gender Analysis to USAID (technical offices and Program Office).

Deliverable 3: Final Gender Analysis report, and Executive Summary.

The audience for these deliverables is the entire Mission. They should be utilized on a regular basis by various staff and partners and should not primarily be an academic document for gender specialists that is referenced from time to time. Therefore, they need to be concise, written for a lay person, and easy to implement. That is, they should directly and unambiguously say any changes in gender trends since the last strategy, strengths and weaknesses of our current gender programming and implementation, and concrete recommendations on how to improve our gender programming and implementation (i.e., how to walk the talk). In particular, they should bring to life the 14-year-old girl framework, not as a concept or hook into understanding the strategy, but as a useful framework to make decisions on the scope and scale of programs.

The deliverables should reference but not repeat findings from the current gender analysis unless there are particular issues that require renewed Mission attention. The final report should be around 20-30 pages excluding annexes.