

CHAPTER 3. ANALYSIS OF VULNERABILITY IN UGANDA

As seen in Chapter 2, there are a large number of discrete and overlapping sources of vulnerability and categories of vulnerable groups in Uganda. Most of these groups have had specific studies and/or strategies and policies devoted to them. This chapter takes a two-tiered approach to understanding vulnerability. In each section we look first at a selected vulnerable group in Uganda and then focus on more general issues of poverty and vulnerability in relation to that group and in reference to the PEAP and other current policy frameworks. The vulnerable groups reviewed here are: women, children, conflict-affected groups, people with disabilities, low-paid (formal and informal sector) workers, ethnic minorities, agricultural workers, and people living with HIV/AIDS. The chapter begins with an overview of poverty in Uganda and its contribution to general and specific vulnerabilities.

THE CONTEXT OF POVERTY AND VULNERABILITY IN UGANDA

The need for social protection is motivated by two factors: poverty and vulnerability. Poverty describes a low level of income or consumption, while vulnerability refers to the risk of falling into poverty. The extent of poverty – headcount numbers, severity and trends – indicates the extent of the need for social protection; unfortunately, poverty also restricts the tax base and limits the potential for formal social protection measures to be extended to all poor citizens.

Uganda's Participatory Poverty Assessment Project (UPPAP) has emphasised the multi-dimensional nature of poverty and vulnerability across different locations and social groups in Uganda. Lack of basic commodities (consumption poverty) is one dimension, but other self-reported aspects of living in poverty include: lack of productive assets; lack of social networks and informal support systems; ill-health and illiteracy (35% nationally, but 50% among the poor); powerlessness; lack of access to markets and community-level infrastructure; lack of productive employment opportunities (especially for the youth); vulnerability to shocks; and domestic problems such as alcoholism and domestic violence.

UPPAP found that Ugandans draw a distinction between individual and community-level poverty. At the personal level, poverty in Uganda is defined as *inability to meet the basic necessities of life, poor access and quality of social services and inadequate infrastructure*. In other words, a person or household is considered to be poor when it is unable to meet basic needs, such as clothing, soap, health care, school tuition, decent housing, paraffin fuel for light, etc. Thus a poor individual or household has limited physical and economic assets (MFPED 2000). On the other hand, community-level poverty is perceived in terms of limited access to physical resources; adequate and good quality physical, economic, social and political services; Importantly, communities argued that poverty goes beyond lack of income and material assets to include non-tangible aspects: helplessness and lack of social support and social capital (children, relatives, educated people); as well as isolation and lack of voice (MFPED 2000 and 2001).

Structural determinants of poverty and vulnerability in Uganda

Uganda's current poverty situation is the outcome of both economic and historical factors. First, the economic structure reflects a chronic failure to achieve productivity increases in a context of a growing population. This failure became increasingly evident in the 1980s and early 1990s, leading to severe structural problems. Second, the numerous wars that the country has experienced (and to some extent continues to experience) have left a horrific legacy, further impoverishing the country and leaving a number of specific problems and challenges.

While Uganda's economy has experienced high growth, population growth has also been quite considerable. Both external factors and national policies have contributed to the social and economic situation that the country currently experiences. Although agricultural production per capita and crop yields were declining steadily since the early to mid-1980s, economic policy did not do enough to encourage agricultural transformation. Moreover, the country suffered massive terms of trade shocks when international coffee prices fell. As a result, per capita incomes fell sharply during the 1980s and early 1990s. The country now faces a number of microeconomic structural problems, including:

- low agricultural productivity, which was aggravated by the failure of past agricultural policies, in particular the failure to make the transition in the early 1980s from low-value to high-value farming. As a result, farmers do not have the resources to risk investing in technological change;
- low human resource development (literacy and skills development);
- limited employment opportunities, with an oversupply of unskilled workers in comparison to their low demand;
- high transport costs, on account of Uganda's landlocked position;
- environmental degradation, with a chronic decline in soil fertility, poor water management, and deforestation.

The failure to address these problems has contributed to an economy characterised by:

- a very weak export base with a heavy dependence on the export of agricultural products, particularly coffee;
- vulnerability to external price shocks;
- a narrow revenue base;
- low measured private investment.

Ugandan society also has a number of positive features, including institutions of traditional social organisation, which can be harnessed for the struggle against poverty. These include:

- *Bulungi bwa nsi* ("For the good of the country"), the tradition of voluntary work on public projects.
- *Munno mu kabi* ("Friend in need"), the tradition of mutual assistance.

Since 1986, stability and security have to a large extent been restored. Political and administrative structures have been established which decentralise power to the local level and encourage popular participation. Economic growth has been significant throughout the years of recovery, and a major programme of economic and political liberalisation has been achieved. Since 1987, the Government of Uganda has adopted macroeconomic policies aimed at correcting distortions within the economy. The broad policy objectives that have guided economic management have included macroeconomic stabilisation, liberalisation of foreign exchange market, removal of trade barriers, and privatisation of public enterprises. Deliberate efforts have also been made to target public investment to physical infrastructure and social sector development. The Government has, in addition, set up participatory democratic structures at national and local levels and to a large extent restored law and order in many parts of the country, though not everywhere. The Ugandan economy has achieved significant gains, maintaining an average annual GDP growth of 6.2% between 1995-1999, with an average per capita income growth of about 3.3% (MFPED 2001).

Absolute poverty in Uganda fell steadily and significantly during the 1990s, from 56% in 1992 to 44% in 1997 and 35% in 2000 (using a consumption measure of poverty). Nonetheless, Uganda remains the 21st poorest country in the world, with a GNP per capita of only \$300 in 1999 (UNDP 2001), and there are concerns that not all persons, households and regions in Uganda have benefited or will substantially benefit from the economic growth and poverty reduction efforts. For example, while mean real consumption per capita in Uganda grew by 22% during the 1990s, the increase was larger (42%) in urban areas than in rural areas. Poverty remains almost entirely rural (96% of the poor), and is regionally concentrated: two-thirds of people in the north (2.7 million) and one-third in the east (2.1 million) lived below the poverty line in 2000. This is because people located in different areas have different levels of ownership and access to productive assets and capabilities, and are exposed to different structural constraints. On the other hand, trends in poverty headcounts were positive everywhere except in the north, with millions of Ugandans moving out of poverty during the 1990s. This has two encouraging implications for social protection policy: first, it suggests that should recent trends continue, fewer Ugandans will need social protection in the future than at present or in the past, and second, falling poverty expands the tax base and makes more public resources available for redistribution.

Income or consumption poverty reflects the ability of a household or individual to meet their cash, food and other basic needs, but an important determinant of current and future well-being is access to infrastructure (such as roads, electricity and telecommunications) and social services (education, health, social security). Recent thinking on poverty stresses the importance of including access to public goods as part of the analysis. Poverty reduction in Uganda during the 1990s was faster among households with higher initial levels of education and access to electricity (MFPED 2001:62). Conversely, many communities or entire regions are relatively excluded from access to these public goods, leaving them 'poorer' in this broader definition than households elsewhere with similar incomes and asset holdings. In Uganda, the northern districts have been described as 'marginalised' because of their virtual exclusion – due to prolonged conflict and insecurity – from basic social services and infrastructure provision. Because of this deprivation and insecurity, poverty levels are higher in the northern districts than elsewhere in Uganda, and the need for social protection is correspondingly greater.

Despite achieving strong GDP growth during the 1990s, macroeconomic shocks such as rising international oil prices, falling world coffee prices, and the EU ban on Uganda's fish exports to Europe have slowed down Uganda's economic growth in recent years. As noted in Uganda's Poverty Status Report (2001): *"These have all impacted negatively on the well-being of Ugandans, particularly the poorer segments of society that are affected immensely by internal and external shocks but with minimal coping mechanisms"* (MFPED 2001:3). Economic growth has also been concentrated in certain sectors or sub-sectors. For instance, the industrial and service sectors have grown faster than agriculture during the 1990s. This imbalance was reflected in widening rural-urban income inequality during the decade. Even within agriculture, growth has generally been slower and more erratic for foodcrop farmers than for cash crop farmers (coffee, cotton), or those employed in forestry. Cross-sectional household survey results show that although poverty had declined by 1999, 20% of the population were regarded as 'core poor', as their living standards had not noticeably improved between 1993 and 1996, and at worst were becoming poorer. The majority (76%) of the core poor work in the agricultural sector. Those in the foodcrop sector were found to be the poorest in 1992, followed by the cash crop sector¹ (Okidi and Kempaka 2001; MFPED, 2001).

¹ Poverty in the foodcrop sector declined from 64% in 1992 to 58% in 1996. For cash crop farmers it declined from 60% to 41% in the same period. But it was in the relatively urbanised sectors – manufacturing and trade – where the greatest proportionate decline in poverty occurred.

The overall picture is that although poverty has generally declined it remains very high. Within rural Uganda, consumption poverty is closely correlated with the occupation of the household head. Even though poverty fell among most occupational categories during the 1990s, it remained highest among foodcrop farmers (at 46% in 2000), non-crop agriculturists (44%) and non-working household heads (53%). Pockets of persistent poverty were noted to be located in Northern and Eastern Uganda. Indeed, it was revealed that poverty in the North had risen from 60% to 66% between 1997 and 2000, mainly due to war in the region. The rural poor also suffer from high levels of illiteracy, as 51% of illiterate people are found in rural areas compared to 33% in urban areas, and the majority of illiterate adults are women (Okidi and Kempaka 2001). This evidence suggests that specific needs for social protection among certain communities may be concealed by an apparently healthy aggregate macroeconomic performance.

Uganda's rapid population growth (2.5% per annum) presents a continuing challenge to future (real) economic growth and poverty reduction efforts, including the provision of social protection. The national population more than quadrupled in the last 50 years, from 5 million in 1950 to 22 million in 2000, and is projected to double again by 2025 (Population Secretariat 2001). With a total fertility rate (TFR) of 6.9, the population is also very young, with only 38% of Ugandans being economically active. At the same time, the HIV/AIDS pandemic (800,000 estimated deaths to date) has distorted demographic composition, leaving many households vulnerable because they lack working-age adults.

Anti-poverty programming in Uganda

The overall economic goal today is to sustain the country's economic growth with substantial poverty reduction. Poverty and unemployment remain the biggest challenges. Despite the speed of recovery, the country still faces many challenges in health, education, the restructuring of political institutions, and so on. The history of conflict has also left a complex legacy. For instance, the prevalence of HIV, though declining in some regions, has increased in others as a consequence of large-scale internal displacement and wars in various parts of the country. Equally, it is now vital for the Government to accelerate the provision of infrastructure and other basic services to support sustained economic growth. Without energetic public action, growth is likely to falter, making further sustained poverty reduction impossible.

In order to tackle the widespread poverty, the Government of Uganda launched the Poverty Eradication Action Plan (PEAP) in 1997. The PEAP is the national planning framework on whose basis detailed sector priorities and strategies are designed. The PEAP is founded on four pillars under which key strategies and priorities for poverty eradication are identified and to the extent possible targets are set. Even the recent Plan for the Modernisation of Agriculture is a sub-component of PEAP, which seeks to eradicate poverty by transforming subsistence agriculture into commercial agriculture. The four pillars of the PEAP are:

- 1) Creating a framework for economic growth and structural transformation
- 2) Ensuring good governance and security
- 3) Directly increasing the ability of the poor to raise their income
- 4) Directly increasing the quality of life of the poor.

Through the PEAP framework, the government's overarching goal is to consolidate the economic gains, achieve rapid and sustainable economic growth and reduce poverty to 10% or less by 2010. This can be achieved if the real growth GDP grows at 7% per annum, inflation is contained within 5% and income grows at the same proportional rate in all income groups. At the district level, anti-poverty actions, including social protection programmes, will be implemented within the context of the decentralised delivery of services.

WHO ARE THE POOR AND VULNERABLE IN UGANDA?

The problem of poverty and vulnerability in Uganda can be analysed in terms of *spatial* and *social* aspects. The 'social' aspect refers to vulnerable groups while the 'spatial' refers to the geographical location of the poor. The two, however, are inseparable. In the Uganda context, disaggregating the various categories of 'vulnerable groups' can serve as an entry point for understanding the diversity of poverty, as the vulnerable groups experience different forms of disadvantage. According to official statistics derived from the 1997 survey data, vulnerable groups in Uganda include children, elderly, women and people in large households. The following groups have been identified as specific vulnerable groups by various research studies undertaken on poverty in Uganda (cf. MFPED 2000; Makerere University 2002; and Okidi and Kempaka 2001).

Orphans and children

Children are the single largest group of Ugandans living in absolute poverty, constituting 59 percent of the absolutely poor. Poor children are less likely to attend school and have little control over their situation and socio-economic environment. The UPPAP report also indicates that orphans and children lack recognition, and are often neglected and mistreated. There are a large number of AIDS orphans in Uganda who are likely to be poor because they have limited opportunities to attend school or to access health care. Orphaned children also tend to be marginalised by their guardians, and may end up as street children or child prostitutes. According to UPPAP (2000), the orphan situation is particularly challenging in Luwero, Rakai, Gulu, and Kitgum districts.

Elderly

Studies that link old age to poverty in Uganda are very scarce. Anecdotal information however suggests that older people in both rural and urban areas fall steadily into poverty as old age sets in. Many in the rural areas depend on remittances from their children, relatives and neighbours, and exchanging what little they own for food. However, there are also other categories of elderly poor, particularly those who may not have accumulated property during their early life, those who have been low-paid wage earners, the uneducated and those impoverished by the burden of looking after orphans.

Youth

Many youth in the country who are classified as poor do not have access to productive assets (land and capital). Others lack vocational skills and have limited access to income, credit and income generating activities. Some of the female youth have no education, while others were criticised by some respondents quoted in the last PPA for "lacking innovation" and being "lazy".

Women/Widows

In most Ugandan societies widows tend to be poor because of asymmetries in intra-household power, resulting in unequal access to and control over productive assets (physical and financial capital). They have little influence over household income, lack education and skills, are often exploited by "middlemen", are marginalised by the labour market, have low participation in decision-making processes, and are adversely affected by the patriarchal system of inheritance. Through inheritance, in-laws tend to strip the husband's family leaving the widow without a home, assets or even land. Widows with a large number of children to care for are most vulnerable.

People with disabilities

Physical and mental impairments reduce the life chances and productivity of people with disabilities (PWDs). Most PWDs in Uganda are poor because of marginalisation and discrimination associated with disability. Women with disabilities, for example, not only find it difficult to have access to productive assets, but are also discriminated against in marriage and in the building of social networks.

Large households

Many families in the Ugandan countryside are polygamous and live in large households. In an economy that is becoming increasingly market-oriented, most of these families are condemned to poverty because of the expenditure burden that is involved in maintaining a large household.

Fishing communities

Local populations that are involved in artisanal fishing experience difficulties due to the increasing commercialisation of fishing oriented to the export market. Because most local fishermen are located in isolated rural areas and often lack access to improved fishing gear and adequate markets for their produce, they are increasingly being marginalised by medium- and large-scale investors who use sophisticated fishing gear and exclude small fishermen from participating effectively in the industry.

Landless/smallholders

Some Ugandan communities have access only to unproductive land, while others have limited acreage and cannot support their households. The districts of Kisoro, Mbale and Kapchorwa epitomise these problems. The marginal highland area of Kisoro is characterised by a scarcity of arable land coupled with rapid population growth, which has been identified as the overriding factor causing poverty within the district. The average population growth is 3.5 percent, with a fertility rate of 8 children per household and landholding of only 0.8 hectares per household. This pressure on the land has promoted the adoption of intensive farming methods that have greatly reduced soil fertility, culminating in a poverty cycle of low yields, falling incomes and rising food insecurity. Land fragmentation compounds the problem as the distances involved in getting to different plots reduce farm productivity (CPRC-Uganda 2002).

Geographically isolated communities

Poor people are often found in remote and geographically inhospitable areas. Communities located in mountainous terrain, impenetrable rainforest, islands and floodplains are highly vulnerable to severe and persistent poverty due to their physical separation from economic and social opportunities, which traps them in poor living conditions. The UPPAP report cites long distances to urban centres, impassable roads, and the lack of affordable transport, especially during the rainy season, as barriers to accessing markets and socio-economic services. Communities within the Western Rift Valley in Hoima district experience limited and difficult access to arable land, modern schools, health referral services, markets for fish and salt, extension services, employment, information, credit and human capital that are located beyond the escarpment. The transport burden severely affects the women who cross the escarpment in search of food, fuel, and market for salt (Makerere University 2001). Similarly, the steep mountainous terrain in Kisoro district of south-western Uganda makes access to farm inputs, credit, information, lucrative markets and social services difficult. People in the districts of Kotido, Moyo, Kisoro and Karamoja feel marginalised because of long distances and inability to travel to urban centres (MFPED 2000). Some remote areas in Uganda are affected by drought (Kumi), floods (Lake Kyoga), earthquake (Kabalore, Bundibugyo, Kisoro

district), physical inaccessibility (Rift Valley and highland inhabitants) and civil strife (Kumi, Kotido, Moroto, Gulu and Kitgum).

Internally Displaced People (IDPs) and Refugees

This category includes refugees, abducted children including child soldiers and people affected by drought and cattle rustling. They are vulnerable to poverty and disease. IDPs are susceptible to chronic poverty even after returning home since their livelihoods and property have often been destroyed and rebuilding of property and communities is a long-term process. Most IDPs are found in Moyo, Kabalore, Kisoro, Kitgum, Kumi and Gulu districts.

Ethnic, indigenous and other marginalised populations

Research indicates that some clusters of Batwa, a small tribe in south-western Uganda, do not have access to arable land. Many depend on begging and are despised by others. Some derive their livelihood from the forest as hunters and gatherers. Other groups of Ugandans are marginalised to varying degrees by ethnicity, religion, kinship and other social, economic and political characteristics. Marginalisation in Uganda was common before independence and in the early post-independence period (Laker-Ojok, in Langseth 1995:39), but it remains a factor in contemporary Uganda as well.

SHOCKS, RISKS AND VULNERABILITY

Communities in rural Uganda have suffered several shocks, both endogenous (idiosyncratic) and exogenous (covariant).² To varying degrees, many regions and communities in Uganda are suffering from the immediate and after-effects of drought, earthquake, landslides, floods, epidemics, conflict and other natural, social, political or economic shocks (MFPED 2000).

In 1994, an earthquake affected 50,000 people in Kabalore, Bundibugyo and Kasese, causing damage to property worth 70 billion shillings. In Kisoro district, landslides have washed away crops into the valley swamp. The resulting floodplains provide breeding grounds for mosquitoes culminating in endemic malaria, high medical costs and diminished farm productivity. Occasionally, drought and hailstorms are reported to be a major factor in food shortage. Floods frequently occur along Lake Kyoga in periods of intense rainfall, washing away structures, crops and animals, and resulting in outbreaks of malaria, diarrhoea and viral infections.

The Northern region, which is identified by official statistics as trailing behind the central, western and eastern regions in terms of poverty reduction, has experienced multiple and severe shocks including drought, civil war lasting for over 10 years and loss of cattle to Karamojong raids. In 1986, cattle raiding disrupted social and economic life in Katakwi, Soroti, Kumi, Pallisa districts and some parts of Lira and Kitgum. The effects associated with cattle rustling have been severe and have included destruction of crops, schools and health units, loss of life, rape and kidnap of women and children, food insecurity and the loss of cattle as draught power, physical savings, and source of bride-price. The protected resettlement camps within the district of Katakwi have aggravated poverty due to food insecurity, disruption of education services, increased incidence of water-borne diseases and disruption of the family system as the basic social unit and source of love, security and support (Makerere University 2002, MFPED 2001).

² Exogenous shocks are external threats to livelihood security (e.g. climate in agro-ecological areas, market collapse, theft, civil strife), while endogenous relates to internal capability of a household or community (loss of human, physical and financial capital).

At the individual level, loss of assets (e.g. cattle), loss of remittances, business failure, death of spouse, eviction, brideprice debts and accidents are some of the events that may result in a decline in wellbeing. Recent evidence from the second round of Participatory Poverty Assessment fieldwork has identified a number of vulnerability factors that threaten the wellbeing of individuals, households and communities. The most frequently mentioned factors are listed in the matrix overleaf [Table 4], together with actions required to address them. Additional causes of vulnerability reported include: lack of savings (also absence of a 'savings culture'), death of a breadwinner, drought, pests and crop diseases, unemployment or loss of job, cost of fees for secondary and tertiary education, taxation, confiscation of merchandise by tax enforcement officers, imprisonment, market dues, exploitation of women by men, domestic violence, prostitution, hospitalisation, spending on witchcraft, laziness.

'INSTITUTIONAL POVERTY'

Recent studies on poverty in Uganda have tended to explore the causes of poverty within a sustainable livelihoods framework, focusing on physical, financial/material, social and human capital. However, this limits the scope of analysis of poverty and tends to focus on symptoms than the primary causes. As Opschoor (2001) has noted, a myriad of constraints affecting sustainable human development must be confronted beyond market and government failure. Such views are too reductionist and ignore historical and contextual processes (Opschoor 2001:28). He opens up the 'failure' debate by taking a wide view of *institutional failure* as causes of conflict and poverty in Uganda.

Recent findings in Uganda indicate that farmers experience difficulty in accessing markets, and are exploited by produce buyers. This is due in part to ignorance, and in part to limited information concerning price levels in urban markets. Okidi and Kempaka (2001) allude to the lack of institutional frameworks that can address the needs of those social and economic groups left out of development processes in Uganda. Moreover, development may increase poverty by eroding traditional means of support and entitlement and makes the poor (the young, the old, the sick, and unemployed) more dependent on market for survival. Recently, the LADDER project in Uganda found that market systems often fail to function and spread the benefits of growth (McDonag and Bahiigwa 2001).

Furthermore, the poor in Uganda are not in a position to police the activities of civil servants and to demand accountability and transparency from public officials who are supposed to deliver services to citizens (Nsibambi 1997). In addition, the rural poor and non-poor alike suffer a multiplicity of punitive and sometimes arbitrary taxes (Ellis and Bahiigwa 2001). Economic deprivation therefore, is a source of political deprivation, and political deprivation in turn helps to maintain and confirm economic deprivation.

There is also evidence of weaknesses in the implementation of the decentralisation policy in Uganda. Despite the improved economic performance in Uganda, there are some structural constraints relating to institutions that block the poor from moving out of poverty. Such problems include; corruption, lack of accountability and transparency, poor delivery of basic public services, weak local leadership and failure by the districts to effectively invest conditional grants and local revenue in productive activities (MFPED 2001; Nsibambi 1997; McDonag and Bahiigwa 2001; James *et al.* 2001).

All these features of poverty and vulnerability in Uganda point to substantial unmet needs for social protection, and at the same time pose significant challenges to the effective provision of formal and informal social protection to vulnerable Ugandans. During the 1990s, for instance, the Government of Uganda placed heavy emphasis on the promotion of sustained economic growth, with less emphasis on delivery of social services to the poor, and very limited use of transfers and social safety net programmes to protect the poor and vulnerable.

Table 4. Causes of Vulnerability in Uganda and Actions Required

Causes of vulnerability	Communities reporting	Actions required to address causes	Levels of financing	Who is responsible	Further work to be done
Alcoholism	8/14	<ul style="list-style-type: none"> • Legislation (e.g. limits to drinking hours). • Awareness creation among local communities. • Peer education among youth. • Re-establishment of community development schemes. 	Medium	<ul style="list-style-type: none"> • Community Development professionals • NGOs • Religious institutions • Educational institutions • Cultural leaders (such as the Rwot, the Kabaka, the Omukama, the Emorimor) 	<ul style="list-style-type: none"> • Understanding the main causes of alcoholism. • Establishing the main beneficiaries in alcohol-making industry. • Holding public debates on the issue of alcoholism.
Polygamy	7/14	<ul style="list-style-type: none"> • Awareness creation among political and religious leaders. • Awareness creation among the public. • Increased access to family planning services. • Enhanced education for the girl child. • Increased empowerment for women. • Review, or harmonisation of legislation relating to marriage. 	Medium (Frameworks and institutions already exist for the mobilisation of peoples towards reduced levels of polygamy – religious institutions, local councils, NGOs, etc).	<ul style="list-style-type: none"> • Department of Community Development • Political leadership – various levels • Religious leaders • Cultural leaders 	<ul style="list-style-type: none"> • Harmonisation of contradictory laws on marriage. • Enhanced understanding of the primary causes of polygamy.
Large families/ Many dependants	7/14	<ul style="list-style-type: none"> • Awareness creation among the public. • Increased access to family planning services. • Increased access to Family Life Education. • Enhanced education for the girl child. • Increased empowerment for women. 	Medium	<ul style="list-style-type: none"> • Cultural leaders • Family planning agencies • Religious leaders • Political leaders 	<ul style="list-style-type: none"> • Further understanding of the factors that are responsible for large family size.
Insecurity/ Displacement	7/14	<ul style="list-style-type: none"> • Establishment of local conflict resolution institutions and committees. • Political dialogue. • Registration of, and support to, mutual support neighbourhood associations and groups. • Strengthening of human rights protection institutions. • Engaging local-level institutions in conflict resolution. 	Medium	<ul style="list-style-type: none"> • Cultural leaders • Religious leaders • Political leaders • NGOs • Community Development Personnel 	<ul style="list-style-type: none"> • Exploring the capacity of local institutions (including clans, etc) to resolve conflict. • Assessing the impact of displacement on service delivery.
Illness	6/14	<ul style="list-style-type: none"> • Health insurance opportunities for working people. • Awareness creation on the causes of illness. • Increased investment in Primary Health Care. • Implementation of workmen's compensation. 	High	<ul style="list-style-type: none"> • Public Health Officials • Health NGOs • Private sector • Department of Labour 	<ul style="list-style-type: none"> • Exploring the possibility of setting up a rural health financing scheme.

Landlessness	5/14	<ul style="list-style-type: none"> • Implementation of the provisions of the Land Act. • Promotion of land consolidation. • Investment in alternative (non-agricultural) employment opportunities. • Investment in intensive agriculture approaches. • Protection of marginal lands. 	High	<ul style="list-style-type: none"> • Local Governments • Cultural institutions • Religious institutions • The Judiciary 	<ul style="list-style-type: none"> • Understanding the cost-effectiveness of land consolidation. • Enactment of a law protecting ethnic minorities, women, etc.
Failure to pay loans	4/14	<ul style="list-style-type: none"> • Establishment of professional credit giving institutions at various local levels. • Establishment of peer support groups. • Revitalisation of cooperative movement. 	High	<ul style="list-style-type: none"> • Farmers cooperatives • NGOs 	<ul style="list-style-type: none"> • Exploring the possibility of establishing a rural/ agricultural development bank.
Old age	4/14	<ul style="list-style-type: none"> • Establishment and promotion of activities that involve older people in mainstream development. • Legislation in support of mandatory savings scheme. • Promoting the value of the extended family. • Promotion of local level pension schemes. • Establishment of regulatory framework for microlevel savings schemes. 	Low	<ul style="list-style-type: none"> • Department of Community Development • Local administrations. • Religious institutions. • Cultural leaders • NGOs 	<ul style="list-style-type: none"> • Thorough review of the existing pension scheme.
Payment of dowry	4/14	<ul style="list-style-type: none"> • Legislation against compulsory payment of bride price and dowry. • Awareness raising campaigns against payment of dowry. • Greater investment in girls' education. 	Medium	<ul style="list-style-type: none"> • Cultural leaders • Ministry of Justice • Women's lobby organisations • Religious leaders 	<ul style="list-style-type: none"> • Understand the boundaries of "cultural practices" vis-à-vis legal and equity issues in relation to marriage. • Documenting the extent to which brideprice and dowry are paid countrywide.
Loss of property – land, livestock	3/14	<ul style="list-style-type: none"> • Implementation of provisions of the Land Act to safeguard the rights of bona fide occupants of land. • Establishment/revival of local security committees. • Inclusion of co-ownership clause in Land Act. • Legislation against widow inheritance, unfair inheritance of property, etc. • Putting in place anti-stock theft programmes. 	High	<ul style="list-style-type: none"> • Parliament & responsible Government Ministry • Security agencies 	<ul style="list-style-type: none"> • Establishing the type of viable alternatives to cattle keeping for pastoralist communities.

The remainder of this chapter considers the position of specific vulnerable groups in Uganda that were identified above, starting with broad demographic categories (women, children, the elderly), moving on to socially marginalised groups (indigenous or ethnic minorities, people with disabilities, people living with HIV/AIDS), economically vulnerable groups (agricultural and low-paid workers), and conflict-affected groups (IDPs and refugees).

WOMEN

The relationships between gender, poverty and vulnerability are complex, and are further complicated by considerations of ethnicity, class and age. 'Women's vulnerability arises from their unequal social status and from unequal power relations, which accord women less access to and control over assets and resources than men and less right to participate in decision making' (Keller *et al.* 2002: i). Societal norms that influence gender roles within a specific context often result in women having a much heavier burden in terms of their responsibilities for care giving, economically productive activities and community life than men have. The processes by which people become poor and the types of vulnerabilities they face are usually gender-differentiated. Although some generalisations can certainly be made, such as 'widows are likely to be more vulnerable to economic and social poverty than men', great care must be taken not to treat women or groups of women as categories with homogenous needs. Of course it would be impractical and impossible to tailor projects for idiosyncratic needs of individuals, but some effort should be made to disaggregate types of gender-related vulnerabilities as much as possible.

One way to organise a discussion on the various factors which feature in explanations of the phenomenon of gender vulnerability is to think about two broad categories of vulnerabilities: gender-specific and gender-intensified. **Gender-specific vulnerabilities** are associated with constraints to participation in labour markets and household livelihood activities that apply to either women or men by virtue of their gender. Gender-specific beliefs and customs in turn give rise to **gender-intensified vulnerabilities**, reflecting gendered inequalities in opportunities and resources. We refer to them as 'gender-intensified' because, while inequalities in opportunities and resources may reflect factors such as class, poverty, ethnicity, location and so on, they tend to be exacerbated by gender. An example relates to quality of health services.

For all people, their family circumstances, stage in life-cycle and state of physical well-being will affect whether they need social protection, and what kind of social protection they need. However, this is likely to impinge far more on women than men workers both because of differences in both their biological and social roles in the reproduction and care of the family and because women tended to be more 'socially-embedded' within the family; in other words, their behaviour is more closely governed by familial norms and ideologies. When these vulnerabilities are combined by various forms of gender-intensified inequality (such as education, access to capital, training and marketing outlets), other aspects of women's life cycle status (such as widowhood, divorce and so on) also become relevant in defining their experience. When we consider the range of other influencing factors, such as the structure of the household that a person finds themselves in – multigenerational and extended, or nuclear; multiple children or no children – then vulnerabilities associated with particular 'life events' become much more nuanced and complex. Below we list categories of vulnerable women and highlight some causes of vulnerabilities, specific to women in Uganda. Clearly this is not an exhaustive list, but it provides an understanding of areas which policy will need to target if gender equality is to be achieved.

- Categories of vulnerable women:
- Female headed households
 - Widows
 - Women in abusive marriages
 - Women with ill spouses
 - Unmarried, pregnant women
 - Divorcees
 - Women with disabilities
 - Women with HIV/AIDS
 - Women who are cohabiting
 - Sex workers.

Causes of gender-related vulnerability in Uganda

A. Sociocultural norms

Commonly held beliefs and norms and traditional values often directly affect the wellbeing of different groups in society. In Uganda there are certain beliefs and practices, at the general and local levels, that negatively impact on women in general due to their gender, and on specific groups of women due to the compound effect of gender and some other attribute, disability for instance. Gender relations within the household related to decision-making, bargaining, asset access, resulting from the perception of women as subservient to men, are recreated at the meso- and macro-levels of community and public life. Culturally influenced values are dynamic, however, these values are often slow to change. Some Ugandan-specific examples are briefly discussed below.

- **Social norms within the institution of marriage**
 - ***Control of sexuality within marriage:*** Marriage is a deeply held value and tradition in Uganda, with less than 2% of women never marrying in their lifetime. Sexuality is controlled within marriage; marriage is assumed to give the husband exclusive sexual rights to the wife, but the reverse is not often expected (Barton 1994:119; informal discussion with Ugandan women). Tolerance of male infidelity in marriage has implications of the spread of HIV/AIDS and STDs and also highlights the need for a 'transformative' approach to the provision of social protection, such that women can increase their 'voice' and bargaining power within the home without fear of neglect and abuse.
 - ***Division of labour:*** The gendered division of labour in Uganda is very strong, especially within the home. The woman is expected to be the care-giver and provider. This translates into women being less able to take up or remain in full-time employment, or to pursue other income generating activities that would raise her status within the family. It affects the type of work they can undertake and the number of years they can stay in employment. It often has an adverse effect on their real and potential earnings (due to gendered perceptions of employers).
 - ***Type of marriage:*** In Uganda there are five distinct types of legal marriage: Christian church marriages, Hindu marriages and civil marriages (monogamous), and Muslim and customary marriages (polygamous). Common law marriages also take place, but these are not recognised or upheld by law. Vulnerability within marriage relates to the non-contractual nature of some types of marriage and the resulting inability to claim spousal rights in the event of mistreatment, divorce or abandonment.
 - ***Girls are expected to marry at a young age:*** In many regions of Uganda a cultural ideal for men is to marry once they have finished school and have a job

and for girls to marry at a young age. By 19 years more than 80 percent are married. As many as 23 percent get married before the age of 15 (Barton, p.119).

- **Brideprice**

A customary marriage usually involves the payment of a brideprice, the amount varying by ethnicity and region. For instance, among many eastern, northern and western tribes that brideprice is often high and paid in cows. Some supporters of this institution claim that it represents compensation to the bride's family for the loss of her labour, and furthermore, it makes marriages more stable especially in the cases where divorce entails that the brideprice be repaid. Barton *et al.* (1994) report evidence that payment of the brideprice means the woman has now become the man's property – entitling him to the woman's labour, her sexual availability, her obedience and fertility – thus establishing and reinforcing the power inequalities between men and women in society. This belief may provide a substantial part of the explanation behind the high incidence of rape within marriage. There is some evidence that the institution of brideprice is being used less as gender roles slowly change (Barton *et al.*, 1994:120).

- **Widow inheritance**

As in other countries in Africa, some tribes in Uganda practice widow inheritance; the inheritance of the widow and her children by the brother of the deceased. Historically this has been seen as a form of social protection, which ensured that the needs of the mother and orphans were provided for by the clan. Arguments against this practice include increased exposure to HIV/AIDS and lack of choice on the part of the widow. There is some evidence that this practice is on the decrease (Olowo-Freers and Barton, 1992). Widows are increasingly being given the choice of which heir they would like to partner or even whether they wish to marry again. It has been noted that in certain regions communities are choosing to support widows and orphans without direct inheritance – reflecting the dynamic nature of informal social protection mechanisms.

- **Patrilineal property inheritance**

The gender structure of land rights in Uganda varies across the country but in general it is highly unequal, with women's rights generally restricted to usufruct while men are more likely to have ownership and control rights. This gendered tenure pattern reflects the system of patrilineal inheritance and patrilocal residence patterns that characterise much of Ugandan tenure relations. These systems imply that women's rights to land and property are less secure than men's. Particularly for rural women, this inequality of access to the key productive asset is a fundamental determinant of poverty and social disadvantage. While women provide 70-80% of agricultural labour, few have the right either to own (7%) or control use of land. Only 30% have access to and control over proceeds from land (Ovonji-Odida, 2000). There are "clear and constant gender-based distinctions in the rights to land of men and women throughout Uganda" (Ovonji-Odida, 2000). Regardless of tenure type, basic differences between men and women in land access, ownership, and control exist. Both men and women have access to land, but ownership and control over land lies ultimately with men.

Without secure rights to land, women's ability and incentives to participate in income-enhancing economic activity is reduced. Among the priority concerns expressed about land through the UPPAP consultations were: women's lack of inheritance rights, their inability to prevent land sales by men, the disincentives to develop the land they occupy. Particularly vulnerable groups are divorcees, abandoned women, and widows. Women are unable to participate fully in agricultural activities, particularly market-oriented activity, and are frequently unable to plant trees or income-generating crops and do not share in the income generated from such crops.

- **Acceptance of some level of domestic abuse and violence**

'There is wife beating: you are beaten like a cow. Some women say, 'if he beats you, he shows a sign of love.' However, if he beats you, removes your teeth, and breaks your ribs, is that love? (Rukungiri focus group; Barton p.121)

Few statistics exist indicating the extent and nature of domestic violence in Uganda. The Slum Aid Project (SAP) reports that male violence is a social norm that is prevalent throughout Uganda and is attributed to discriminatory customs and traditions, some of which are reflected in existing laws. The battering of women by men in the domestic sphere is a common occurrence and is socially acceptable in many communities, because traditionally a husband has the 'right' to chastise his wife. In a survey between 1995 and 1996, SAP (2000) found that of the total cases of neglect of women and children reported in one of their project areas, approximately 50% were domestic violence cases.

The low quality and accessibility of policing, health and education facilities in very poor areas exacerbate women's already precarious situation. The lack of resources of the police service acts as a huge constraint on women trying to extricate themselves from abusive situations. Cases have been reported where women have had the courage to go to the police to accuse their spouse of abuse, however to make a formal statement requires that the woman go to the local police station. Many times the police are unable to physically take them to the station as they have no transport, so the women are required to pay for taxis. Even when they get to the police station they have, at times, been asked to provide their own paper and pens so the police can file a report. To tackle and eliminate domestic violence, institutional factors such as health, education and police facilities need to be addressed.

Box 2. Slum Aid Project [SAP]

Founded in 1991 by three female students from the University of Kampala, the Slum Aid Project (SAP) began as an outreach project, mainly for women, with the aim of sensitising communities about issues of health, education and reproductive rights and health. Since its inception, SAP has registered as a community-based organisation (CBO) and shifted its focus onto issues of domestic violence, rape and legal education in slums.

Working in five slum communities in five divisions of Kampala, SAP provides legal training for para-legals, rights training for women through human rights advocates, local conflict resolution and mediation forums and sensitisation programs targeted to women, men, local council leaders, and local police. SAP also distributes literature about issues of domestic violence and runs video shows in the slums to facilitate discussion around sensitive subjects. Most funding for SAP has come from HIVOS (a Dutch donor organisation), but MGLSD and local NGOs such as FIDA have also been supportive, providing resources for training and workshops.

Discussion with the Agriculture Programme Officer provides insights into why women are so vulnerable to domestic violence in areas of extreme poverty. The SAP reports that in poor urban areas violence is much higher than in rural areas, due mainly to lack of income, lack of extended family networks which in rural areas are able to control the extent of domestic violence, and lack of community networks. Poor housing conditions, low incomes, and alcoholism (which is very high in slum areas) are strongly correlated to the domestic violence and abuse experienced by women and small children. Women are unable to escape from domestic violence due to lack of access to legal institutions and lack of knowledge of their rights.

Fundamental to the efforts of SAP is the creation of a database of reported cases of domestic violence, not just within the slum areas in which they work, but also cases reported in newspapers. Cases are indexed and reports are written up and shared with policymakers, and various ministries, such as the Ministry of Justice, Health and the MGLSD. SAP makes a large effort to network with other organisations that deal with similar issues, such as AFD (Action For Development) and FIDA.

While there are many indicators pointing to the success of SAP – increasing numbers of community volunteers, more women reporting abuse, and voluntary involvement of men in their programmes – there are important issues that the Government needs to address. First, efforts must focus on strengthening law

enforcement agencies, especially the resource capacity of local police so that simple administrative duties are less costly. Second, laws need to be passed dealing with domestic violence. Currently, the legal framework does not contain reference to penalties for domestic abuse. Thirdly, education and health facilities must be improved in the very poor areas as this will tackle the heart of the vulnerability-poverty problem for women. There should also be some resources targeted to strengthening local conflict resolution mechanisms.

- **The assumption that informal social networks are support systems provide adequate protection.** Another reason why the need for social protection measures which address women workers' needs have been slow to emerge in Uganda is the persistent belief that women's role as breadwinners is a secondary one. Belief in this norm is enmeshed within another ideal – that of the predominance of the supportive and protective extended family structure. Existing systems of social protection reflect the assumption that women will gain access to social protection through extended family structures; pivoting on their relationship to either a husband or a father. Although extended families and kinship ties clearly remain an important social arrangement for the social protection of vulnerable people, evidence suggests that in many areas of Uganda this form of protection is becoming increasingly over-stretched and inadequate. Moreover, through a gendered lens, even in cases where familial protection is adequate, there is no reason why this should indicate an 'ideal' situation as it invariably implies that women in the family are heavily burdened with care-giving and are less able to seek paid employment.

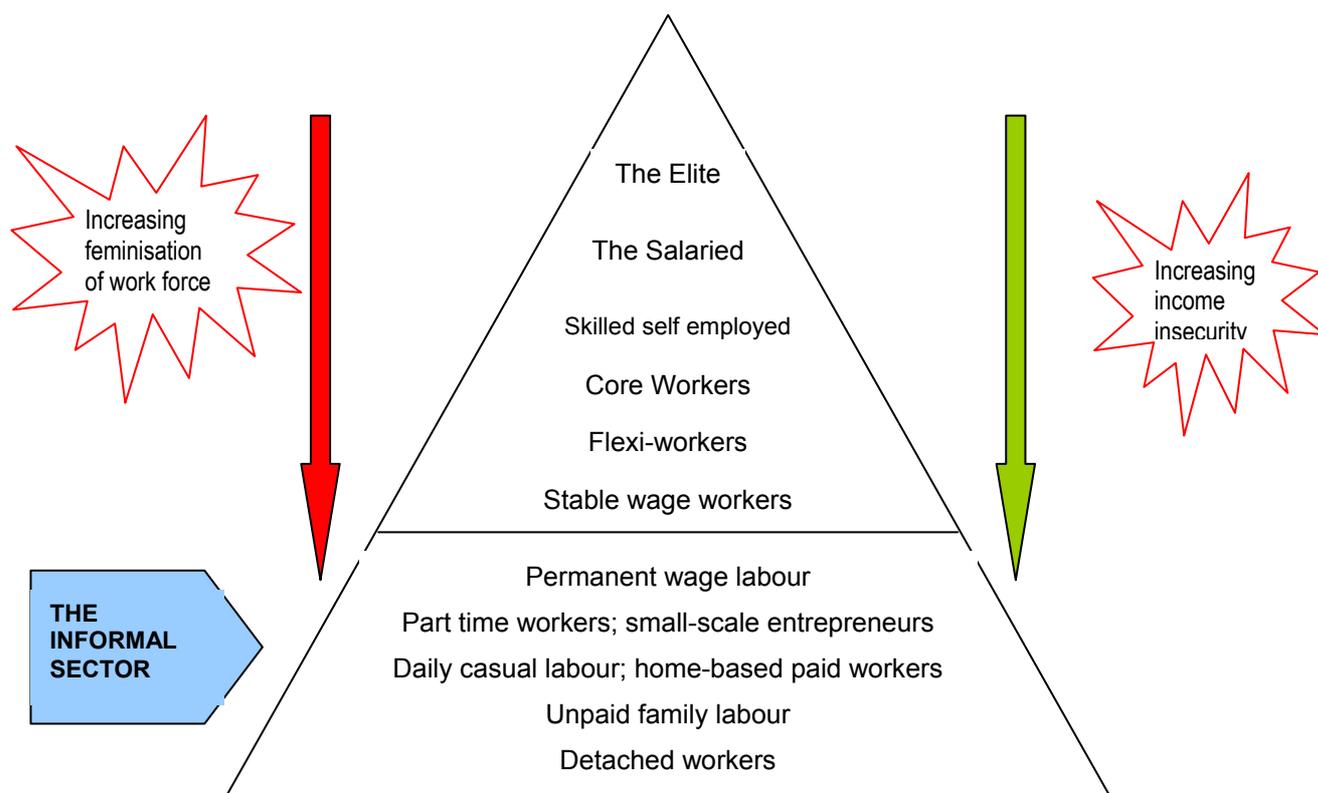
B. Economic

- **Informal sector employment.** Due to the gendered division of labour at home and in the marketplace, where they undertake a very large share of unpaid caring work, women are less able to take up or remain in full-time employment. In Uganda women constitute only 20% of employees in the formal sector (WB and MGLSD, 1995). This is one reason why many women find employment within the informal sector. In Uganda the majority of workers are informal sector workers. While all workers within the informal labour market face similar problems with respect to insurance mechanisms, exploitative employers, and unsafe work environments, women are more negatively affected due to the simple fact that they are over-represented in this sector.

Figure 1 illustrates the relatively vulnerable position of women within a hierarchical labour market. Although the nature of the fragments and hierarchies are contextually specific, a generalisation can be made: that this hierarchy is a distinctly gendered one, where women are likely to be under-represented at the top of the hierarchy and over-represented at the bottom. Indeed, women dominate among the group most likely to elude government regulation as well as enumeration: unpaid family workers and home-based piece-workers.

In Uganda there are likely to be considerable differences in the degree of protection enjoyed by those working as permanent wage labour or owning medium-scale enterprises, compared for instance to those working on a casual daily basis or in home-based piece work. Unpaid family labour (most often women and children), have next to no protection other than what is provided by their families. They are thus in a particularly dependent position. By and large the informal economy is as characterised by gender segmentation and hierarchy as the formal economy, so that women are far more likely than men to be concentrated in casualised, irregular and poorly paid jobs, with little or no social security. Of course, there are some categories of informal sector workers that may remain predominantly male, such as small- and medium-scale entrepreneurs; however, overall the informal sector tends to be predominantly female. While data on the informal economy is extremely poor and unreliable, what there is does lend support to this generalisation.

Figure 1. The gendered segmentation of labour markets and the feminisation of the work force



- **Absence of male economic support.** In Uganda, single-parent households typically means female-headed households. These are a result of separation, divorce, being widowed, or being a polygamous wife living in a separate house. The issue of female-headship, particularly when it is characterised by the absence of any male economic support, is another moment of potential vulnerability in women's lives in those societies where women have restricted options in the labour market. The 1991 census reported that 29 percent of Ugandan households are female-headed. Although the link between poverty, vulnerability and female-headed households is often assumed, this is not always a useful assumption as some female-headed households may be quite well off.

C. Physical/Health

- **Sexual harassment in the work-place,** by employers or contractors, is another source of vulnerability for women. It may lead to high rates of turnover, and hence instability of income flows, or a demeaning acceptance of harassment in the face of restricted options. This is an area where, along with legislation, social action by trade unions and women's organisations and legal literacy programmes have an important role to play.
- **Pregnancy** clearly imposes its own constraints on women to carry out their normal tasks, although most poor women take very little time out from their usual routine during pregnancy. Clearly there is set of social protection issues here relating to women's needs and constraints as mothers. The provision of childcare facilities at work or within the community remains one of the most widespread demands of women workers, particularly in urban areas, where social networks may be less well developed.
- **Other physical/health causes** include: HIV/AIDS, disability, and high fertility rates.

Table 5. Programme Analysis: Women

Category of Social Protection	Actual Initiatives	Vulnerable Groups and Outreach	Project/Actors
Social Assistance			
<i>State and private mechanisms</i>	Very few identified Gratuity Benefit	Public sector workers	MGLSD
<i>Non-state mechanisms</i>	Gifts; Extended family support; Self-help groups Religious Institutions		
Social Insurance			
<i>State and private mechanism</i>			
Maternity benefits	Various entitlements to length of maternity leave, depending on sector of employment		
Survivors benefits	Private insurance for private sector	A minority of private sector workers	NSSF
Capital provision	Provision of credit through MFIs		NGOs: UWFT; FINCA; Pride Uganda Govt: Entandikwa Scheme; PAP under NUSAF
<i>Non-state mechanisms</i>	Sharecropping Borrowing food CBOs and micro-finance programs Garden plots	Rural poor	
Social Services			
Legal aid	Free legal advice and court representation; training	Poor men and women	ACFODE, FIDA; Government ministries
Promoting development	Help all women participate in development; help women organise themselves		National Women's Council (1993)
Empowerment	Help to mobilise women		NAWOU (National Association of Women's Organisations in Uganda)
	Advocacy and sensitisation campaigns		WIDAF (Women in Law and Development in Africa)
	Offers psychosocial help and counselling	Women and girls who have been raped	Hope after Rape (local NGO) Women's Crisis Centre
	Provision of health services		Ugandan Women Doctors Association
	Promoting female literacy		FALP (functional adult literacy program)
	Promote advancement of women in rural areas		NSARWU
	Help with domestic violence		Slum Aid Project

Social Equity			
CEDAW		All	
Constitution(1995)	Equality of men and women Equal pay for work of equal value Affirmative action	All people	
National Gender Policy (1997)	Emphasises gender mainstreaming in all Government planning processes. Includes monitoring and evaluation	All people	MGLSD
The National Action Plan on Women (1999)	Achieve equal opportunities for women via empowerment through participation in social, economic and political development		MGLSD
The Local Government Act (1997)	Provides for women to form one third of the seats on local councils		
Law Reform Commission	Address discrimination		
The Land Act (1998)	Legislates against discriminatory land practices for women		
Domestic Relations Bill (draft)	Equal rights of men and women in, during and at dissolution of marriage	All people	
Affirmative action	Quotas for women in parliament and on local councils Quotas for girls at school		
UPE	Includes affirmative action to increase girls at school		
Equal Opportunities Commission			
Human Rights Commission	Adjudicates complaints on the violation of human rights		
The Penal Code	Prohibits: Trafficking of women Sex with a girl under 18 years (death sentence) Living off the earnings of a prostitute Procuring the services of a prostitute		

Are there gaps in social protection efforts to address gender inequality in Uganda?

An analysis of poverty issues within the PEAP show that gender analysis is limited, by comparison with poverty analysis. Key gender concepts are not defined and the treatment of gender mainstreaming has not been applied. This results in an *ad hoc* treatment of gender issues in some of the pillars and themes of the PEAP, but not in others. Keller *et al.* (2002) point out that key findings about gender inequalities do not appear in any of the PEAP strategies. No reference is made to Uganda's National Gender Policy, which implies that linkages between institutions, poverty reduction and gender are ill-defined.

Keller *et al.*'s analysis of multiple policies and strategies for agriculture, education, health, sexual and reproductive health and water show that gender, and its relation to poverty, is treated sporadically and very selectively. In some cases policies focus on women rather than on gender inequality *per se*. In the majority of cases there is a notable lack of any serious gender analysis and there were no examples of a sectoral policy or strategy where a gender perspective is mainstreamed.

Specifically, in relation to the national objectives contained in the four PEAP pillars, we would highlight the following key gender-vulnerability/poverty issues:

Market liberalisation and commercialisation of agriculture: The PEAP contains no analysis of the effects and impacts of liberalisation and market expansion on the current production patterns of the poor, subsistence farmers, let alone a gendered analysis. Research in the UPPAP shows that men and women have unequal opportunities to enter a liberalised market in agricultural and other products, that the benefits they receive from market-oriented production are unequal, and that decreased poverty as a result of market-oriented production privileges men. UPPAP also "draws attention to a widely known phenomenon in Uganda that when there is a market for a food crop, that has previously been grown for households consumption, control over disposal of that crop passes from women to men" (Keller, p.20). For instance, in Bushenyi, women's income from the sale of plantains declined when men took it over as a cash crop. In these types of situations women and children become vulnerable because women are prevented from accessing income and this may effect the nutritional status of household members.

When asked about their crop preferences, the differences in male and female answers were revealing. Women preferred cassava, beans, sweet potatoes and plantains because these crops contributed to household food security, whereas the top preferences for men were coffee and vanilla. These are cash crops where men control the majority of the income from their sale.

Another study by Kasante *et al.* (2000) found that in villages in Masindi and Mukono districts, poor women and men farmers are unwilling to diversify into non-traditional agricultural exports due to labour constraints. Women, especially, are more labour constrained than men, thus policies to promote non-traditional crops are likely to have a disproportionately negative impact on women.

Kakwanzi-Kezzaabu (2001) reports that since milk production has been commercialised, as in western Uganda, women have lost their right to control distribution of *ghee*; fresh milk is marketed by men, who market and control the income from the sales. Women have become vulnerable within the household as they have lost much of the bargaining power that the control of *ghee* formerly gave them. A similar gendered shift in the control of resources has also been observed in the fishing sector, in line with fisheries development and increased trade.

Implications:

- Macroeconomic policies have implications for household level gender relations, including unpaid activities that have strong gender links. Therefore, macroeconomic policies need to be explicitly pro-poor and supportive of gender equality.
- Reorientation of household production towards the market is not a high priority for women, or other severely labour-constrained households, as they reap unequal benefits from it. This is exacerbated by the finding that married women do not have equal bargaining power to influence decisions about the use of income from market-oriented production. Therefore, policies must be relevant to the circumstances of and to positively impact on the country's poor subsistence farmers, small-scale producers and poor workers in the informal sector.
- Social inclusion policies need to complement any macro-level liberalisation and private sector development policies.

Increasing the ability of the poor to raise their incomes: The PEAP focuses on eradicating poverty by improving the natural resource-based livelihoods of the rural poor (through implementing the PMA). It is argued that modernising agriculture will: (1) encourage those involved in subsistence farming to move into commercial farming; and (2) lead to an increase in formal and informal sector work opportunities for the poor. Research shows that this line of argument is questionable, that is, it is not clear that the majority of rural people who are currently engaged in subsistence agriculture can move into more intensive market-oriented agriculture. Research shows that reorientation of production for the rural poor is not a viable option and that the rural poor will diversify activities only as a survival strategy.

Looked at through a gendered lens, women, overall, have fewer options for earning income off-farm and their incomes are smaller than men's. However, female-headed households have more freedom than married women to make their own decisions about how they wish to diversify their livelihood activities.

Implications:

- Non-farm income earning options are important to the rural poor in order to survive in difficult times and to attempt to lift themselves and their families out of poverty. It must be recognised, however, that these options are structured by gender, with women having fewer options and lower earnings.
- The PMA will be strengthened if it is contextualised in the realities of current diverse livelihood patterns of rural female and male subsistence producers.

Access to land: The PEAP makes reference to the relationship between land for agricultural production and the ability of the poor to raise their incomes. It explicitly points out the inequalities in access to, and ownership of, land between men and women and the need to strengthen women's land rights. These inequalities can place many women and their dependants in risk of impoverishment. In addition, the Poverty Status Report (2001) points out the need to deal with legal provisions concerning co-ownership clauses and spousal land rights. Substantial research has been conducted on the links between gender inequality, land rights and poverty, which leads Keller *et al.* (2002) to conclude that no further research needs to be conducted these issues. Rather, what is needed is policy action and advocacy informed by existing research.

Health care and reproductive rights: The UPPAP reports that illness is the most frequent cause and consequence of poverty in Uganda. The PEAP focuses on improving health care service delivery through improved infrastructure, and better remuneration and training of staff. Little mention is made of gender issues in relation to the health sector.

The Uganda National Household Survey (2001) showed that 30% of female respondents, compared to 26% of male respondents, reported sickness or injury during the previous thirty days. Other research also reveals that women tend to be more vulnerable to illness than men. This is due to a variety of factors, such as gender-based violence, inadequate time and financial resources to access health care, inability to influence household decisions, and heavy workloads.

Keller *et al.* report that much of the current information about Ugandan women has to do with reproductive and sexual health. There is a gap in current information about health issues of other categories of people, such as the elderly, and children. There is also a need to begin thinking in terms of 'gender' rather than 'women', so that issues of male roles and masculine identities are seen as a key factor in improving health-related behaviour.

Recommendations:

1. A recent analysis of gender and policy in Uganda, prepared for the MGLSD, MFPED and DFID, analysed a range of Government initiatives, such as the PEAP, UPPAP, the PMA, the national water policy and other sectoral policies, and highlighted areas where gender issues need to be strengthened (Keller 2002). The recommendations from this study are sensible and comprehensive, and should be integrated in any forthcoming social protection strategy.
2. Many of the difficulties involved in provision of social protection for women relates to socio-cultural values that leave women in vulnerable positions. Clearly, social protection instruments designed for many categories of women must include a substantial 'transformative' element, in the sense that the power relations between men and women become more balanced. Appropriate legislation is necessary, but only goes a small way to changing sociocultural values. Efforts should continue to focus on education of men and women about their rights and about how to access their rights. A research finding shows that lack of male participation in rights awareness activities contributes to continued abuse of women (Barton, p.141). More effort should thus be focused on including men in sensitisation initiatives. A weakness of projects such as PEARL and the Slum Aid Project is that they do not adequately target men and boys in their sensitisation initiatives.

We have pointed out the importance of macro- and micro-level initiatives (legislation and working with people). Clearly, meso-level factors are as important for achieving social protection objectives. By meso-level we mean strengthening the institutional environment so that those individuals who are aware of their rights are able to access them relatively quickly and securely. For instance, the Slum Aid Project pointed out that weak institutions, such as the police force, remand centres and the local legal system, are huge barriers to women attempting to escape from abusive and violent relationship. Strengthening institutions as varied as the judicial system, the health distribution system and the police obviously needs to be an inter-ministry initiative.

3. There have been recent legal changes under the Land Act aimed at strengthening the land rights of women, dependent children and orphans through the requirement for consent of spouses, dependent children and Land Committees in the case of orphans to transactions in family land. In addition, discriminatory customary practices are outlawed. Forthcoming legislation seeks to address women's lack of inheritance rights and the possibility to increase married women's ownership stake in family property (proposed Domestic Relations legislation). Unfortunately the situation of women's, children's and orphans' land rights on the ground does not appear to have been improved by these recent legal changes. The limited research conducted to date suggests that while many people are aware of the changes, this has not translated into improvements in the security of land rights of many women. There are a variety of possible reasons for this, such as, inadequate knowledge on how to mobilise rights

claims; fear of legal procedures; lack of access to the legal system; cultural resistance; and commonly held beliefs about women's role in land management and ownership. There is need for a systematic identification of the practical difficulties women face in accessing their land rights, and for strategic actions which can be taken to improve the impact of legal changes on the ground to ensure that the land sector is meeting the needs of women and men, children and orphans.

We recommend that a survey be conducted with the purpose of identifying the main constraints that women face in attempting to mobilise their land rights. Once these constraints have been identified, programmes can be put in place that strengthen various institutions and sensitise the local population to the equal rights of all people to land and property. Pilot projects, such as communal farming, could be initiated in places where there is a high incidence of female-headed households. The government could help in securing tracts of land for groups of women to work on. Similar to the recommendation made for vulnerable children, we recommend that CBOs and local government should be involved in all social protection initiatives for women. We would also recommend that during the process of finalising the SDIP and the PEAP an effort is made to engage with the Ministry of Finance and the Budget Department to ensure that conditions attached to funding for local government is tied according to the new social protection initiatives that will be included in the revised PEAP.

4. As a specific initiative for the MGLSD, we recommend that a coordination and monitoring unit be set up, that would serve to minimise duplication of efforts; to ensure the support being given is being distributed to the most vulnerable groups of women; to enhance equitable provisioning of services; and to identify gaps in addressing the concerns of vulnerable women. This coordination unit could monitor and coordinate projects and programmes related to women and children.

CHILDREN

Estimates from the Department of Probation and Social Welfare indicate that about 4 million children in Uganda are vulnerable and live in difficult circumstances. This constitutes half of the total child population in Uganda. They include orphans (1.2-1.5 million), disabled children (0.8 million), children displaced due to insecurity (0.3-0.4 million) and about 4,000 street children. Some categories of children are more vulnerable than others. These include:

- Orphans
- The girl child
- Children with disabilities
- Abandoned children
- Child labourers
- Children displaced due to insecurity and calamities
- Street children
- Child prisoners
- Children who are not in school
- Children with HIV/AIDS
- Child-headed households.

Girls are considered to be more vulnerable than boys, as they are more likely to be denied access to education; more likely to be abused and defiled; and more likely to marry early. A situation analysis of the girl child in Uganda (1995) reported the specific vulnerabilities related to the girl child as opposed to the boy child:

1. Disabled girls are more likely to be sexually abused by their caregivers.
2. In situations where both parents have died the girl child assumes the role of mother, which often implies working for long hours, accompanied by physical and mental exhaustion. The pressure on the boy child in similar situations is not the same.
3. Girls are more likely to be withdrawn from education before boys in cases where families are facing economic difficulties.
4. Girls are more likely to drop out of school before completion due to the “strongly held belief that educated girls argue a lot over trivial issues and will never make good wives for their husbands” (The Girl Child Study, 1995, p.84).
5. During periods where the mother has a heavier workload, such as at harvest season, times of family members’ illness, new babies in the home, girls will be required to stay at home at the expense of their education.
6. Girls are more likely to be harassed at school by peers and teachers, leading to poor attendance.
7. Most communities do not recognise inheritance rights of female children, thus in the case of the death of both parents girls are more vulnerable to destitution than boys.
8. Female circumcision is practised among certain communities, such as the Sebei. This practice is humiliating and often leads to health complications such as anaemia, infections, complications in labour and sometimes death.
9. Differential socialisation of girls and boys imply that girls grow up with little ability to negotiate or bargain their rights within marriage, the household and the community.

The fact that girl children receive far less education on average than boys is reflected in the fact that the majority of those attending adult literacy programmes are women.

Another group of vulnerable children and their dependants are child-headed households. The 1991 Population and Housing Census enumerated 38,521 households that were headed by children below the age of 18 years. This comprised approximately one percent of all households. Among these households, 40% were headed by girls.

Adolescents

“Adolescents who get pregnant are seen as outcasts, which in many cases, causes family breakdown. The girl gets displaced; she is isolated at home, at school and from her spouse” (Moyo, focus group – Barton and Wamai, 1994, p.106).

In Uganda young people aged between 10 and 24 years make up approximately 33% of the population. The main vulnerabilities that adolescents face relate primarily to the poor status of their reproductive health. Reproductive health concerns include early marriages, early unwanted pregnancies, unsafe abortions, STDs, HIV/AIDS and low contraceptive use. Excepting contraction of STDs and HIV/AIDS, many of these concerns have negative impacts, specifically upon girls.

Gender-specific adolescent vulnerabilities include the following:

- The rate of contracting AIDS is six times higher among girls (15-19 years) than their male counterparts
- Adolescent pregnancies can lead to:
 - school dropout
 - poor parenting of new babies
 - higher maternal mortality than older women
 - a higher likelihood of obstetric complications

- premature birth and low birth-weight of babies
- Cultural norms mean that girls are less likely to obtain secondary or further education
- Inadequate access to services.

Box 3. Programme for Enhancing Adolescent Reproductive Life [PEARL]

Addressing adolescent reproductive health problems forms a major focus in the efforts of the Government of Uganda to improve the quality of life in the country. One specific programme that focuses on these concerns – the Programme for Enhancing Adolescent Reproductive Life (PEARL) – is run through the MGLSD and is co-funded by the Government of Uganda, UNFPA and the EU. The overall goal of the programme is “to enhance adolescent reproductive life through creating a more conducive environment and providing adolescents with appropriate reproductive health counselling and services” (PEARL information leaflet).

PEARL was initiated in 1997 in 4 pilot districts. Since then it has expanded and is currently run in 15 districts. It is anticipated that the programme will begin to work in four more districts in Northern Uganda soon. The programme target audience is broad, including adolescents aged 10-24 years, local authorities, community leaders and parents. PEARL has a number of specific activities and objectives, including:

- the provision of condoms and other prophylactics;
- the treatment of STDs and related problems through health centres at the county level (adolescents are exempt from user fees);
- sensitisation of adolescents and communities regarding reproductive health through training and information dissemination.

PEARL works with ‘peer mobilisers’ at the parish level, training them to be trainers and providing them with communication skills and the ability to mobilise young people in the communities that they work in. Typically there are 6 peer mobilisers at the parish level, two adolescent females and two adolescent males and one male and one female parent. The programme has successfully created an institutional framework and network for providing reproductive health services to adolescents through linking mobilised adolescents to the health service providers. The success of the programme is reflected by:

1. the fact that the EU recently decided to fund the programme;
2. the high demand for services by adolescents within the areas that it operates;
3. the decrease in reported number of sexual partners in the target districts;
4. the increase in reported use of condoms in the target districts.

Despite the apparent success of the project, it is still restricted in outreach. Also there has been little attempt to tailor the sensitisation programs to the specific needs of boys and girls. PEARL would like to expand its activities but is resource- and budget-constrained in its ability to do so.

Orphans

The formal definition of an orphan in Uganda is a child below 18 years of age who has lost one or both parents. According to the 1991 census there were approximately 1.2 million orphans, representing 11.3% of the national population of children, or one in nine children. Since 1991 the figures have increased quite dramatically with current estimates ranging from 2 to 2.3 million, or approximately 19% of Ugandan children (1 in 5 children).

Many sources state that the situation of orphans in Uganda has reached crisis proportions in terms of both the incidence of orphanhood and resource constraints for formal and informal care provisioning. The genesis of the crisis is often argued to relate to the high adult death rates resulting from war and civil unrest during the first two decades of Uganda’s brutal history since independence in 1962 (Wakhweya *et al.* 2002). Since then, HIV/AIDS, which exceeds all other causes of adult mortality, has become the primary cause of the escalating

orphan crisis. Due to the extent of the crisis, orphans constitute a vulnerable group in all regions of Uganda, however, in terms of the distribution of orphans it is clear that they are located predominantly in regions that are most affected by AIDS. 'Double parent' orphans are concentrated in the districts of Rakai and Masaka.

With approximately 25% of Ugandan households caring for at least one orphan, it is estimated that orphan households have an average of 7.2 members – at least 2 more dependants than the average Ugandan family (Wakhweya 2002). Given the size and demographic structure of these households it is often pointed out that vulnerability related to orphans is not individual-specific but is also reflected in the orphan household. Clearly some orphan households are likely to be less vulnerable to shocks, leading to less severe poverty outcomes than others, but in general orphan households are seen to be more vulnerable than non-orphan households.

Categories of vulnerable orphans include:

- Orphans in child headed households
- Orphans in grandparent headed households
- Orphans in impoverished households
- Orphans who are HIV-positive
- Orphans in households without siblings
- Orphans who become street children
- Orphans who are institutionalised
- Orphans who are refugees or IDPs
- Orphans who are abused
- Orphans who need fostering or adopting.

The majority of orphans are cared for within households, often through extended family networks. The majority of these households are headed by single widows; typically the surviving parent or grandparent. Interviews with programme directors in various orphan and abandoned children's projects revealed a belief that the traditional patterns of orphan care through kinship and fostering are becoming an increasingly precarious system for social protection due to being overstretched and burdened by increasing numbers of orphans. This observation was supported by a range of interviews and project documents. Increasingly, extended families are having difficulty coping with the financial and nutritional demands of caring for orphans. To the extent that this is true, the future outlook for orphans in terms of traditional systems of social protection provisioning looks bleak. This crisis situation leaves orphans in a precarious and vulnerable position. Interviews with representatives from UWESO confirmed this view, stating that traditional social protection systems for orphans are likely to collapse in conflict areas or regions hit by natural disasters. In their view, increasing social phenomena such as the incidence of street children, touts and wash-boys are suggestive that traditional social protection mechanisms may be breaking down.

Substantial evidence shows that the majority of households with orphans are headed by women, mainly because they are headed by widows, but also because women are more likely to take on the role as caregivers than men. Demographic predictions suggest that this situation is likely to change. Wakhweya et al. (2002) report that by 2010, 60% of orphans are projected to be maternal and double orphans whereas these groups currently constitute a much lower percentage (45% in 1995). This change will certainly have an impact on the household-level care of orphans.

The Situational Analysis of Orphans (2002) found that community mechanisms for supporting vulnerable members of the community are quite fragile and in many cases weak. There is little organised community support for households with orphans.

UAC has estimated that there are at least 183 organisations concerned with the support and care of orphans (Bakaki, 2000, p.11). Some of the larger organisations providing for children, and specifically orphans, are: MGLSD; Ministry of Health; Ministry of Education; UNICEF; Save the Children/UK; UCOBAC; UWESO; Action Aid; Feed the Children; many religious institutions and local-level CBOs. These constitute only a small number of initiatives. Donors have also been very active in funding activities and projects related to children. These include USAID; DFID; GTZ; NORAD; and SIDA. As the range of activities and number of organisations contributing to social protection initiatives for children and adolescents is so large, we simply provide a list of the types of programme these organisations are running.

Box 4. Uganda Women's Effort to Save Orphans [UWESO]

UWESO is a well-known national NGO, founded in 1986 by Mrs. Janet Museveni, the President's wife. UWESO is concerned with improving the lives of destitute and needy children affected by the death of their parents or guardians. The initiative began with the relief supply of basic necessities in response to the large amount of orphans resulting from war and civil unrest. It has since evolved to include HIV/AIDS and other orphans and has expanded its services to include welfare services, micro-credit to families with orphans, vocational training of orphans, agricultural projects and in some cases the payment of school fees.

Working in nine districts, the project targets families that have fostered, or care for, orphans mainly through the provision of micro-credit. Currently UWESO works with approximately 70,000 foster families which covers approximately 100,000 orphans. The micro-credit initiative, which constitutes a main part of their activities, has given approximately 11,500 small loans ranging from \$20 to \$500. The project does not identify new foster families for homeless orphans, rather to lend support to families that are already looking after orphans. While UWESO does not have a specific objective to work with women, 90% of people taking loans are women. The repayment rate is very high. Credit is used for diverse activities including small bakeries and trading. The other main area of UWESO activity is on training of orphans in business and vocational skills (such as carpentry, radio repair, hairdressing, etc.) that are marketable in the area where the orphan lives.

UWESO's membership, which includes volunteers, administrative staff and patrons, currently stands at around 7,500. Over the lifetime of the NGO a range of donors, national companies and individuals has provided funding. These include UNICEF, IFAD, USAID, DANIDA and the Belgium Survival Fund. The Belgium Survival Fund has recently provided a second grant of \$2.5 million.

A meeting with the Credit Officer and Financial Controller of UWESO highlighted some concerns with current provisioning for orphans that will need to be addressed in the future. First, UWESO is only operating in a few sub-counties in nine districts. In other words, very many orphans are not being reached by UWESO or other projects. The financial and human resources required to assist foster families are substantial and the NGO is constrained by limited resources. A strong recommendation was made for an increase in advocacy and lobbying around the rights and needs of orphans. This would require a mobilisation of national resources – probably a government initiative – that would necessarily entail a 'sensitisation' initiative whereby the public becomes informed of the plight of orphans and their needs.

In terms of the future:

- More resources are needed to expand the outreach of the programme.
- The programme ends in 2004 – there is a need to secure extension funding in good time so that projects are not interrupted.
- Replication for wider coverage is possible at the local government level (LC3). Resources from the local level should be used, and new projects established through CBOs and local NGOs.
- Currently they only work with rural families and orphans; but needs are also high in urban areas.
- UWESO makes no effort to classify orphans according to the nature of their vulnerability.

Legislation and regulations affecting children and adolescents

- The Ministry of Gender, Labour and Social Development has prime responsibility for child protection. Other Ministries with child protection responsibilities are the Ministry

of Justice, Local Government and Internal Affairs and Social Welfare Officers. Local NGOs also participate in protecting the rights of children. For instance, the Uganda Association for Women Lawyers (FIDA) caters for children's problems.

- Uganda is a signatory to the 1990 UN Convention on the Rights of the Child, the 1992 OAU Charter on the Rights and Welfare of Children, and the 1989 Convention on Elimination of all forms of Discrimination against Women (CEDAW).
- The Uganda National Programme of Action for Children (UNPAC) covers the care and protection of orphaned children, children affected by armed conflict and child labourers (many of whom are orphans).
- The National Council for Children was formed to co-ordinate monitoring and implementation for UNPAC.
- The Children's Statute (1996) makes provisions for issues related to orphaned children, such as appropriate care, adoption, fostering, institutional placement, juvenile and family courts, inheritance rights and provisions against child labour.
- A National Youth Policy is in place that addresses the human and social problems of youth and children, including orphans, resulting from poverty and deprivation, neglect and violation of human rights.
- The MGLSD is also committed to designing a nation-wide implementation strategy for sustainable support to orphans and destitute children.
- As part of the decentralisation plan each local government, or local council at sub-county, parish or village level is charged with the special care of children in general and, of orphans in particular.
- The Constitution.
- The Local Government Act, 1997.

Gaps in policies and programmes related to social protection for children

As pointed out in the *Situational Analysis of Orphans (2002)* there is no overview of the interventions carried out by the different stakeholders and no efforts to coordinate various efforts. This finding was confirmed in our interviews with various NGOs and CBOs that work with orphans, children and foster families. Additional research is therefore needed to establish the extent of provisioning for orphans and which can guide effective and coordinated interventions for this group in the future.

Recommendations:

1. Although the size of NGO involvement with orphans appears substantial, it is frequently pointed out that the support is far from adequate. A spokesman from UWESO confirmed this view. Wakhweya *et al.* (2002) report that many NGOs readily admit this themselves. To exacerbate the lack of support it is further reported that there is limited coordination of activities among the various NGOs and that an integrated system of financial support and monitoring is not in place. We recommend that a coordination and monitoring unit be set up, perhaps within the MGLSD, that would serve to minimise duplication of efforts; to ensure the support being given is being distributed to the most vulnerable groups of children; to enhance equitable provisioning of services, and to identify gaps in addressing the concerns of vulnerable children.
5. A second recommendation, emerging from consultations with various programme directors, is that an effort needs to be made to gather data on the range of groups of vulnerable children. This will help all organisations in their efforts to target the most vulnerable groups. Currently limited data exists on magnitude and nature of various vulnerable groups. For instance, data are lacking on street children and orphans, and gender-disaggregated data of different vulnerable groups. Collection of such data could

be conducted in conjunction with the Poverty Monitoring Unit in the Ministry of Finance. Currently an initiative is underway to include a 'vulnerability module' in the household survey being carried out for NUSAF in northern Uganda. It will be important for the MGLSD to engage with this initiative so that studies on vulnerability are not duplicated but instead becomes a coordinated effort pursued by various Ministries, not just one.

6. While the MGLSD has the primary responsibility for child protection it remains restricted in pursuing activities to achieve this objective, due to a tight budget constraint and limited access to resources from Government. These constraints should be addressed.
7. It was reported in one interview that free drugs are available that minimise the transmission of HIV/AIDS from mother to child during pregnancy. However, officials working in the Ministry of Health informed us that, while this was true in theory, there are problems in the distribution of these drugs to local-level health service providers.
5. UPE has gone some way to addressing the orphan education problem. However, universal primary education could be supplemented with vocational training. Perhaps vocational training options should be included in the current debate around free universal secondary school education.
6. Meetings with officials from UWESO highlighted the importance of looking to CBOs and local government (LC3 level) as a possible route for future replication of UWESO activities. A meeting with LC3 officials in the sub-county of Wakiso in Wakiso District pointed to the constraints that are likely to hinder such replication. Much of the funding that local government receives from the centre is 'tied' in the sense that it has to be used for specific purposes. For this reason CBOs, while monitored by local government, rarely receive local government funds or resources; instead they rely on NGOs for support. We would recommend that during the process of finalising the SDIP and the PEAP an effort is made to engage with the Ministry of Finance and the Budget Department to ensure that conditions attached to funding for local government are tied according to the new social protection initiatives that will be included in the revised PEAP.
7. Many recommendations related specifically to orphans have been made in the recent Situational Analysis of Orphans, 2002. They are very comprehensive and should be included in social protection programmes specific to orphans.

Box 5. Naguru Children's Reception Centre

The Naguru Reception Centre began its activities in 1959 with the help of Save the Children/UK. The centre was set up to provide temporary care to vulnerable children, including abandoned children, disabled children and children whose parents are in prison. The reception centre was designed to care for approximately 20 children or between 2 and 7 years of age. Currently two regular staff at the reception centre care for 65 children between the ages of 1 and 17 years, however the physical capacity of the centre has not been increased. The capacity of the centre has been over-stretched for many years. The majority of the children currently cared for have been abandoned. Some are mentally and physically ill, others have parents in prisons and some are classified as 'unaccompanied', meaning they are lost children. For this latter case of children the objective of the centre is to locate the parents through a tracing and resettlement program. Obviously this tracing program is restricted to those children who are able to and/or old enough to communicate and those that do not mental disabilities. For the other groups of children the centre facilitates adoption and fostering although very few are adopted, approximately four a year.

The centre supports the educational advancement of the children by sending them to the local primary and secondary schools. The centre brings teachers into the centre to educate the 'unaccompanied children.' Once all means of tracing the parents have been exhausted then the children are sent to school.

Naguru Centre claims to be the only initiative of its kind in Uganda. Since 1974 it has been a government funded institution with no regular external support. The centre frequently comes under pressure to receive all types of children and more children than the facility can cater for. The director of the Centre believes that they

now function more as a rehabilitation centre for sick and disabled children. Except for a few religious institutions, very few other institutions care for these categories of children. Overcrowding and the increasing number of older teenagers means those children are becoming vulnerable, because of lack of care; sexual promiscuity; and low quality of care.

While the centre provides a crucial and invaluable service for vulnerable children within Uganda, it is over-stretched in terms of capacity and underfunded. The Rotary Club and individuals have given some gifts but these have been sporadic. The main problems and needs that this centre has are: (1) Only two regular day staff are on duty daily, whereas for adequate health provision it is estimated that there be one staff per four children and one staff per child in the event that the child is disabled; (2) The centre lacks appropriate facilities for caring for children with disabilities; separate institutions are needed for older boys and older girls; (4) Child tracing and resettlement is done only within national boundaries.

Child Labourers

Uganda is a signatory to the 1990 UN Convention on the Rights of the Child, and the ILO International Programme for the Elimination of Child Labour. The national constitution (article 34) prohibits child labour. Despite all these commitments, child labour exists in many parts of Uganda. The Uganda Participatory Poverty Assessment Report (2000) found that child labour and casual labour are two of the common livelihood coping strategies in Uganda.

Child labourers are often exploited and subjected to hazardous working environments. The effect of this is that their physical and mental health, and social development are adversely affected. Moreover, they are denied educational opportunities, which tend to restrict their future possibilities for improving their economic and social status. Many children in Uganda labour in order to obtain a living, especially those living in households that are already vulnerable due to poverty (such as those with missing adults and limited parental care). Many children are involved in employment without pay. Furthermore, they are vulnerable to physical, emotional or sexual abuse in the workplace.

In Uganda, the participation of children in domestic activities is regarded as part of their learning and preparation for adult life as well as making a contribution to the maintenance of the household. However, it is recognised that this “normal” work can become excessive (too heavy or dangerous) or exploitative, and be a form of child abuse. It is in light of this that a distinction between child work – that contributes to their own, their families’ and community development – and work that is hazardous, or which results in exploitation and harm to their rights and lives, is necessary. Hence, in Uganda, child labour is defined as “work that involves children in tasks which extend beyond normal roles of their own contribution to their own, their families’ and communities’ well-being and development.” Another definition is “children’s work that is assigned without due consideration of their age, gender and abilities or disabilities” (Uganda’s Report and Position on Child Labour, 1998). These definitions, however, do not provide insight into the meaning of “normal roles”, and the extent to which children should engage in them.

In Uganda, children are defined as people between the ages of 5-17. Child employment in Uganda does not vary much with respect to urban-rural residence, the sex of the household head or whether the children are in school or not. However, older boys and children in the Eastern region are more likely to work than other children. The chance for a child to be employed by someone outside the household is not directly related to the household’s wealth status. In 2000/01, 83% of boys and 88% of girls in Uganda were estimated to help with household chores such as cooking, cleaning, fetching water, etc. For both girls and boys, less than 5 percent work for someone outside their households. Generally, children age 10-14, rural children, children in the Central region, and children who attend schools are more likely to help with household chores than other children (Uganda Demographic and

Health Survey, 2000-2001). According to the 1991 census in Uganda, 23.2% of the children between 10-14 years old are involved in various work activities.

Forms of Child Labour in Uganda

The current situation of child labour in Uganda shows that the National Labour Policy supports “light work” being done by children. However, explanation on what constitutes ‘light work’ is not offered and there are no monitoring and enforcement mechanisms to prevent child labour. The implication of this is that there are relatively high levels of child labour abuse. Some of the worst child labour abuses in Uganda include:

- Heavy/dangerous domestic work such as working as domestic servants (house-boys and house-girls)
- Appalling working environment and hazardous tasks
- Commercial sex and sexual slavery, particularly during wars
- Delayed/denial of remuneration, underpayment for work done, and parents taking children’s earnings
- Casual labour without security, too long periods of working or work done at awkward times
- Carrying out tasks meant for adults to increase family earnings
- Drug trafficking and smuggling of merchandise across borders due to decisions made by adults, including their parents/guardians
- Involvement in military operations during armed conflicts
- Heavy tasks under early/child marriage and during pregnancy.

In Kampala, children are used as burglar’s helpers because they are small and can pass through small windows and ventilators. Many girls are also lured and forced into prostitution due to poverty and sometimes their guardians/parents. This is common in border towns like Malaba and Busia. In Mbarara and Kabarole children engage in petty crime and shady business transactions. Although there is no available data to ascertain the number of working children that are at risk, many employers keep their working children in isolation (domestic servants and commercial sex workers). The forms of child labour in Uganda vary from one district to another. From the study on child labour carried out by Mwaka and Tumushabe (1996) in collaboration with the Ministry of Labour and Social Welfare, Ministry of Gender and Community Development, UNICEF and the ILO, a summary of the forms of child labour show that in virtually all districts in Uganda, child workers are concentrated in domestic service, agriculture and the urban informal sector.

Causes of child labour-related vulnerability in Uganda:

- Poverty in families and communities
- Abandonment of children due to loss of parents or family crises
- High levels of illiteracy and ignorance
- Exploitative attitudes of some parents/guardians
- Shortage of family labour, impact of HIV/AIDS and unfair division of labour based on gender
- Negative impact of difficult economic conditions, including the effects of structural adjustment policies
- Natural and man-made disasters
- Lack of food security
- Uneven distribution of resources
- High dependency ratios in the communities
- Deficiencies in the education system, particularly at primary and secondary levels
- Armed conflicts and war

- Undifferentiated acceptably child domestic activities and harmful child labour
- Negative cultural attitudes, beliefs and practices due to benefits from child labour by children, employers, poor teachers and even parents.

Are there gaps in social protection efforts to address the issue of child labour in Uganda?

There is no comprehensive policy on eradication of child labour in Uganda. However, there are some programmes designed to better the situation of the Ugandan population, which are relevant to reducing the incidence of child labour in the country. At the national level, the National Constitution (Article 34) prohibits all forms of harmful and exploitative child labour. The Children's Statute No. 6 of 1996 covers the rights, care and protection of children. The review of labour laws carried out by the Uganda Association of Women Lawyers (FIDA) asserts that the legal rights of children involved in both formal and informal employment should be protected.

The Poverty Eradication Action Plan, PEAP, instituted in 1997 to eradicate poverty in Uganda by 2017, is another initiative towards the reduction or eradication of child labour, because poverty is one of the main causes of child labour in Uganda. The introduction of Universal Primary Education (UPE) in 1997 also represents a step towards transformation of children's lives. Under the UPE programme, the enrolment of children at primary school level as at April 1997 was 5,204,867 of whom 4,854,296 were beneficiaries of free education with 263,767 of them being orphans (Uganda's Report and Position on Child Labour, 1998). When the UPE is fully implemented and more children attend primary and secondary school education, then child labour is likely to decline. Currently, discussion is underway between the Ugandan government and NGOs/donors such as ILO and UNICEF on the state of child labour in Uganda and how to eradicate it.

At the sub-regional level, seminars and conferences have been held in the three East African countries (including Kenya, Tanzania in 1996 and Uganda in 1997) to ratify a number of conventions on labour legislation, including child labour. At the regional level, Uganda participated in the OAU Seminar on the Prevention and Elimination of Child Labour in Africa and adopted the resolutions of the 20th Session of the OAU Labour and Social Affairs Commission, and the 66th Ordinary Session of the Council of Ministers on the plight of African children who are subjected to child abuse.

Recommendations:

- It is not enough to be a signatory to conventions on the eradication of child labour, or even to adopt policies and programmes. Uganda needs to implement and improve monitoring and enforcement mechanisms to eradicate child labour.
- Poverty in households and communities, and other causes of child labour, need to be addressed pragmatically.
- Full implementation of the UPE (aged 5-17) is essential. This will lead to productive and gainful employment for children after their studies.
- Vocational skills training or special education is required for children who drop out of school, and disabled children.
- Ongoing education and information on the negative impacts of child labour should be included in the school curricula.
- Families and communities need to be regularly sensitised and educated on the hazards of child labour.

- New and revised legislation to militate against causes of child labour needs to be enacted through improved enforcement.
- Problems relating to armed conflicts, social and political instability need to be tackled decisively through deliberation, negotiation and dialogue.
- War-ravaged areas need to be rehabilitated.

Street Children

Out of about 4,000 street children, 1,000 are in Kampala (FOCA, 1992). From official figures provided in 1993, it is estimated that 3,827 street children live in 10 surveyed towns in Uganda (Munene 1993:27). Since then, the figure has probably increased substantially.

In Uganda, full-time street children are those children who sleep in the open, on verandas or on garbage dumps and survive during the day on the streets. These children are poor and spend most of their time living and working on the street, particularly in urban areas and border towns. It is significant to note that children of both sexes live and work on the streets, however the number of boys (96%) far outnumber the girls (4%).

A baseline night survey, carried out by the Friends of Children Association (FOCA) in collaboration with the Department of Child Care and Protection, on full-time street children in Kampala in 1996, reveals that from the 273 children they met:

- One-third did not have formal education (others are school drop-outs).
- Three-quarters do not have contacts with families/communities and many of them work to earn a living.
- The street children find their best friends among themselves and their worst enemies among the police and Local Defence Units.
- The majority of street children come from districts near Kampala and are on the street because of breakdown in their families.
- Girl street children get accommodation easily from exploitative men who abuse them as sex objects and housemaids.
- They have spent an average of 3½ years on the streets and many of them have future ambitions of returning to school or vocational training. Only a few agreed to go to resettlement homes.

Causes of street children-related vulnerability in Uganda:

- Child abuse or neglect by parents, especially stepmothers
- Some of the street children are abandoned or orphaned
- Civil insecurity
- Family disintegration
- Lack of adequate educational opportunities, school dropouts
- Poverty, particularly in rural areas
- Economic and social marginalisation
- Unbearable living conditions at home.

Programmes of social protection for street children in Uganda

Uganda is a signatory to the 1990 UN Convention on the Rights of the Child and the 1992 OAU Charter on the Rights and Welfare of Children. The ratification of these conventions through the Children's Statute No. 6 of 1996, which covers the rights, care and protection of children, is a legal framework that shows that the Uganda government is making some

efforts to protect all children, including street children. The PEAP is another initiative towards addressing the problem of street children if fully implemented.

The activities of NGOs are also commendable. For instance, Kampala City Council (KCC) provides a street children programme, which addresses the plight of street children. The Friends of Children Association (FOCA) and Street Children Desk (SCD) bridge the gap between the street children and the government and other interested parties of Uganda, through the Department of Child Care and Protection, by providing information to enable them make realistic interventions. The Orphans and Destitute Children Project (ODCP) is also active with regard to legal rights for street children.

Recommendations:

- There needs to be a joint initiative by Kampala City Council's (KCC) Street Children Programme, the police, Local Defence Units and other law enforcement agencies that deal frequently with the street children.
- Coordination of efforts and cooperation between all organisations that play a role in the lives of the street children must be encouraged.
- Efforts should be made to improve the condition of Naguru Remand Home and reduce the numbers of children in the Remand Home.
- Improve child-related Law Enforcement and Community Policing Concepts: the police force has embarked on 'community policing' and should be supported and encouraged to develop new, appropriate approaches towards street children.
- Families and communities need to be sensitised and educated on rights, care and protection of children.
- The most vulnerable group of street children (between the ages of 5 and 12) need special provision, such as access to food, clean water, health care and temporary night shelter.
- Educational and practical skills training should be introduced for street children so as to engage their productivity and enable them to earn income.

INDIGENOUS/ETHNIC MINORITY GROUPS

There are more than 40 ethnic groups in Uganda. The main divisions are between the Nilotic groups in the north and the Bantu groups of the south. There are several indigenous or minority groups, including Bakonjo, Batwa Pygmies, Sebei, Banyarwanda, and Banyankole. They belong to the class of the poorest and most vulnerable groups. The districts with the highest levels of minority groups in the north demonstrate significantly higher levels of poverty, marginalisation and underdevelopment than the national average. Although there are variations among the ethnic minorities in terms of economic development and cultural autonomy, they share some common characteristics:

- Isolation from other segments of Uganda's population and social exclusion within the community itself.
- Colonisation, marginalisation and decolonisation have deprived them of rights to control their own political, economic, cultural and social identity.
- They lack access to infrastructure and productive resources, and their collective and national rights to land, water and culture are not recognised.
- They are culturally and linguistically distinct from the rest of population.
- They are inhabitants of geographical marginal regions or common territory.
- They are committed to preservation of their ancestors' customs and traditions.

- They are often excluded from governance and political decision-making processes by the dominating and governing groups of the state.

Forms and Causes of Minority Group-related Vulnerability in Uganda

Many members of minority groups are thought to descend from slaves brought to Uganda and are treated as low-status people. They suffer discriminatory practices and violence. They are generally not allowed to mix with the rest of the population and are used for hard labour. They have less access to education and fewer economic opportunities than other Ugandans. Many of them, who used to live on fertile agricultural land, have also been subjected to dispossession and displacement.

Recently, in Kibaale, Kyenjojo and Kumi districts, some leaders, including MPs, have been accused of promoting a campaign of ethnic hatred and discrimination against immigrant minorities. The district chairman-elect was rejected in Kibaale by the elite purely on account of his ethnicity (Mukiga). In Kumi, the local leaders issued an ultimatum to an alleged "alien" community of "Banyarwanda" and "Banyankole" to leave Kumi (New Vision, 21 June 2002), even though in the Constitution the "Banyarwanda", found mainly in Kisoro district but also spread out like the other tribes, are a recognised ethnic group.

Box 6. *The Batwa Pygmies*

The plight of the Batwa pygmies is illustrative of the problems facing minority groups in Uganda. They are located in south-western Uganda and belong to the pygmoid race of 300,000 persons scattered throughout East and Central African Equatorial region (Kabanankye and Wily, 1996). 3,000 Batwa are spread through 35 of Uganda's 39 districts. Traditionally, they were forest dwellers, but they have recently suffered eviction from forest-land (Mgahinga Game Reserve) because of voluntary and involuntary factors. These factors include population pressure due to "newcomers" entering their land and the biodiversity conservation movements in the early 1990s, which limited their access to forested areas. Thus, they have lost their territorial rights and accessibility to ancestral forested lands. The entire community of Batwa are poor and depend on begging as a form of livelihood. Most are landless – out of about 2,000 Batwa pygmies in Western Uganda, only 74 have land – and are widely regarded as people "with no rights". Tax exemption for this group is taken as a sign that the government does not recognise them. Although other minorities are represented in parliament through NGOs and CBOs, the Batwa pygmies are not. Other ethnic groups despise them. They rarely eat on the same plate with neighbours. Although, they have been living in isolation, they have not escaped the HIV/AIDS epidemic. Their housing conditions are very poor and they lack access to social services such as running water and health facilities. This group can be seen as chronically poor. Their children experience high rates of malnutrition and there is societal discrimination against them. As a result of all these problems, they are demotivated as a group and seem to be resigned to their situation.

Are there gaps in current social protection efforts for Minorities in Uganda?

Although the Ugandan constitution (Chapter 2, Articles 32 and 36 and Chapter 5) recognises minority groups and their rights, there is little evidence that Uganda is committed to addressing the problems of its multiracial and multi-ethnic diversity. This is because the "backwardness" of the minorities has been the subject of much debate in the mass media. On a positive note, the content of educational curricula and textbooks of school children portray Uganda's racial, ethnic, religious and linguistic diversity. Moreover, the revival of traditional kingdoms (Buganda, Toro and Bunyoro) in 1993 opened the way for the recognition of cultural diversity, which had been artificially abolished in 1967.

Some NGOs, particularly church organisations, have attempted to help minority groups. They include the Dioceses of Kigezi, Muhabura and Kinkizi, the Seventh Day Adventist Church and Church of Uganda (Anglican). For instance, when the Batwas resettled the

Adventist Church, through the Adventist Development Resettlement Scheme (ADRA), constructed iron roofed housing units for them, provided clothes and blankets for them, trained them in gardening, small livestock keeping and fishing, supported 8 children to schools through scholarship and supported the sick ones to visit nearest hospitals. The Church of Uganda also established “church schools”, primarily for their children.

Recommendations:

- The government needs to identify and revise the existing disparities in terms of productive resources, social services and per capita funding, which discriminates against ethnic minorities.
- Educational and vocational training programmes should be emphasised and strengthened for the children and adults of minorities respectively.
- The freedom and means of livelihood of minorities should be respected, especially with regard to land use. For instance, the Batwas can help in research on nature preservation, herbal medicine and sustainable environmental (forest management).
- The effective participation of minorities in public life, as well as in decisions that concern them at all levels, needs to be encouraged.
- Multicultural and intercultural education (e.g. education in mother tongue) need to be introduced to foster social cohesion and non-discrimination of the minorities.

CONFLICT-AFFECTED GROUPS

Conflict is one of the most significant causes of poverty and vulnerability in Uganda. In northern Uganda (Acholi and Karamoja), poverty is higher than in other parts of the country. Poverty actually increased by 8% in the north during the 1990s, while it fell (from 54% to 35%) for Uganda as a whole. The Participatory Poverty Assessment (1999) and the Poverty Status Report (2001) identified conflict and insecurity as the main cause of high and rising poverty in the north. Conflict-affected groups in Uganda include:

- | | |
|-------------------|---|
| Conflict-created: | <ul style="list-style-type: none"> ▪ Internally displaced persons (IDPs) ▪ Refugees ▪ Demobilised soldiers and youth ▪ People abducted by rebels ▪ War widows ▪ War orphans ▪ People disabled by conflict or landmines |
| Occupational: | <ul style="list-style-type: none"> ▪ Pastoralists ▪ Farmers in conflict zones ▪ Resettled IDPs and returnees |
| Geographic areas: | <ul style="list-style-type: none"> ▪ Northeast Uganda: Karamoja Region ▪ Northern Uganda: Acholi sub-region ▪ Western Uganda: Rwenzori Region |

This section focuses on two vulnerable groups: *internally displaced persons* (defined as Ugandans who have fled their homes because of civil insecurity and are living temporarily elsewhere in the country), and *refugees* (defined as people who have fled into Uganda from other countries because of conflict and insecurity in their home communities). This is followed by a discussion of a programme providing support to a conflict zone: the Northern Uganda Social Action Fund (NUSAF).

Government responsibility for refugees and IDPs falls under the Department of Disaster Relief, which was formed in 1998 and is located within the Office of the Prime Minister. The Department deals with disaster management, refugee policy, and coordinates humanitarian assistance appeals and activities. Costs of supporting refugees and IDPs are shared between the Government (the Ministry of Finance contributes 15% of total costs), international donor appeals (70%), and the people themselves (who contribute 15% in the form of gardening, or selling their labour).

Internally Displaced Persons [IDPs]

There are currently an estimated 850,000 IDPs in Uganda, though the figure changes constantly, mainly in the north but also in the west. Conflict and internal displacement have disrupted farming and other livelihood activities, undermined social services, destroyed physical infrastructure, and raised economic and social vulnerability. Social problems have increased – marital breakdown, rape, crime and violence, alcohol abuse, prostitution and HIV-prevalence – and new categories of vulnerable groups have been created – war widows and orphans, people disabled by conflict and landmines, demobilised youth, people abducted by rebels, traumatised conflict and rape survivors.

The objective of Uganda's disaster management policy is to ensure and facilitate the early return and resettlement of IDPs to their previous homes. Priority needs are:

1. to restore security, both globally (in Uganda) and in their communities of origin;
2. to rehabilitate destroyed physical and social infrastructure in home communities;
3. to provide people with the means to recover (e.g. seeds and hoes for farmers).

Internal displacement has affected the economy (lost production, lost livelihoods, lost education) and society (alcohol abuse, promiscuity and crime are generally higher in displaced communities), which makes rehabilitation difficult. In Gulu, people have been in camps for 16 years and have become effectively 'urbanised' and dependent on assistance. Many do not choose to return to farming, and would prefer to remain urbanised, so they need vocational training (e.g. carpentry) and microcredit (e.g. for trading) – but this is provided only to a limited extent, mainly by donors and NGOs in the form of projects rather than comprehensive programmes. Instead of supporting new livelihood opportunities, there is an emphasis on agricultural assistance, mainly supported by FAO, because the assumption is that IDPs will return to farming some day. Efforts focus on 'returning' people, not on 'transforming' their livelihoods to meet their expressed preferences.

IDP camps have been in Uganda since 1987, run with assistance from UN agencies and NGOs, who provide relief assistance (food, drugs, shelter, water and sanitation and other basic needs), as well as livelihood support (education, vocational training, microcredit). District Disaster Management Committees have recently been formed, but are still new. Their mandate is to assess IDPs (their numbers and needs) and coordinate responses to meet these needs. Providing activities for IDPs is vital – idleness and boredom in the camps breeds alcoholism, violence and crime. People should not be left idle, but should be encouraged to become self-reliant.

It is important not to forget, in the focus on conflict reduction and the search for sustainable security, that people living in or returning to conflict areas remain highly vulnerable, at least until their livelihoods have been restored and infrastructure and social and economic services have been rehabilitated. A case in point is provided by Rwenzori region, in Western Uganda. As the security situation has improved in western Uganda, so large numbers of IDPs have returned to their homes, but large numbers also remain in camps, dependent on external assistance and unable to pursue viable livelihoods. Donors and government should

support vocational training and other programmes to assist IDPs and ex-combatants to pursue sustainable livelihoods.

Rebel groups such as the ADF in western Uganda exploit dissatisfaction among the local population, which is partly about lack of livelihood opportunities and lack of access to social services. Social infrastructure has been destroyed and it is difficult to persuade teachers and health workers to work in conflict-affected regions, so these regions have some of the most overcrowded classrooms in Uganda. This suggests that the provision of social services (including social protection) has great potential to contribute to peace and stability in the region. Donor assistance in western Uganda is dominated by humanitarian programmes for IDPs – food, shelter, clothing – and by infrastructure rehabilitation efforts – water and sanitation, health, education, roads. Relatively little donor assistance is focused on supporting livelihood activities and broader development initiatives.

Refugees

In June 2001 there were 230,000 refugees in Uganda, most from Sudan, others from Rwanda, D.R. Congo, Burundi, Somalia, Kenya, Ethiopia and Eritrea. Rwandese refugees have been in Uganda for 30 years – though many have now repatriated – while Sudanese refugees have been coming and going intermittently since the 1960s. Uganda provides an effective and comprehensive programme of support to refugees, based on two principles: a shift from *parallel systems* to an *integrated approach*; and a focus on promoting *self-reliance* rather than *dependence* on aid.

Previous refugee policy amounted to ‘parallel development’. UNHCR and other agencies would provide basic needs and infrastructure to refugees, which created resentment among locals who saw refugees getting special treatment and more resources than themselves. In 1999 the Government and UNHCR introduced the Self-Reliance Strategy, which aims to integrate the provision of services for refugees with those provided to local people, and assists the refugees to become self-reliant. All resources that were previously earmarked for refugees are now pooled at the local government or District level. For example, District Development Plans should include provision of integrated and comprehensive healthcare, education services and infrastructure to benefit all people living in the area.

Uganda also practices an unusually generous policy of giving land to refugees and locating them in ‘settlements’ rather than ‘camps’. This allows refugees to farm and promotes their self-reliance, which can be seen as a form of social protection – and one that does not result in dependency on handouts.

Box 7. Northern Uganda Social Action Fund [NUSAF]

NUSAF is a World Bank-funded project that applies the ‘social action fund’ model to a particularly disadvantaged region of Uganda. It aims to distribute resources to communities in 18 districts, at a total cost of \$100 million over a period of 5 years. Target groups include: IDPs, returned abductees, orphans, female-headed households, PWDs and PLWA. This represents a cross-section of ‘conventionally vulnerable’ and ‘conflict vulnerable’ groups, and makes it difficult to determine whether NUSAF is essentially a post-conflict rehabilitation initiative or a variation on an old-style ‘integrated rural development programme’.

Despite targeting many groups that would normally qualify for social assistance transfers, the main activities at the individual level funded by NUSAF include support to income-generating activities, vocational skills training and provision of tool-kits to allow beneficiaries to pursue trades. At the community level, there are plans to involve ‘traditional’ and specially created structures in the delivery and rehabilitation of community assets (education, health, roads and water supplies) through participatory and demand-driven mechanisms.

Several concerns have been raised about NUSAF. Critics argue that it bypasses more appropriate nationwide

initiatives, such as the PEAP, PMA, and Local Government Development Programme – which the donors are assisting through budget support – in favour of a regional programme that concentrates resources in only one part of the country, using separate funding modalities and a delivery model that may or may not be replicable in other districts. Instead of implementing a parallel programme, these critics argue for strengthening and integrating Government systems and programmes that are already in place or are being planned. This study team endorses concerns about setting up parallel structures, and returning to the ‘projectisation’ of development, which appears to contradict other trends in Uganda. The study team has two additional concerns about NUSAF.

- (1) Experience from evaluations of other Social Funds reveals that the nature of ‘community participation’ and the extent to which activities are genuinely ‘demand-driven’ are often ambivalent at best and deeply problematic at worst.
- (2) The institutional fragility and ongoing civil insecurity in Northern Uganda makes NUSAF a highly risky programme, not only for the donors and their investment but also for the planned beneficiaries or participants should this initiative fail to deliver.

Table 6. Conflict-Affected Vulnerable Groups and Social Protection Initiatives

Vulnerable Groups	Numbers Affected	Main sources of Vulnerability	Active Programmes	Agencies
IDPs:	850,000		<u>Relief:</u> Food, clothes, shelter, healthcare, water & sanitation	<ul style="list-style-type: none"> ▪ Government (MGLSD, Disaster Management) ▪ Donors (WFP, IOM, UNICEF, USAID) ▪ NGOs (World Vision) ▪ CBOs (churches)
Western Uganda	190,000	ADF rebels	<u>Livelihoods:</u> Government Restocking Project, ‘Food-for-training’, NUSAF	
Karamoja	200,000	Karamajong warriors (cattle raiding)		
Acholi	460,000	Lords Resistance Army		
Refugees	230,000	Conflict and insecurity in neighbouring countries (Rwanda, Sudan, DR Congo)	<u>Relief:</u> Food, clothes, shelter, healthcare, water & sanitation <u>Livelihoods:</u> education, vocational training, microfinance, IGAs	<ul style="list-style-type: none"> ▪ Government (MGLSD, Disaster Management) ▪ Donors (UNHCR; WFP, FAO, DANIDA) ▪ NGOs (World Vision, ACORD, CARE) ▪ CBOs (churches)
Abducted children & Child soldiers	6,600	Conscription, trauma, sexual abuse	Reception & reintegration Support for the rights of children in conflict	<ul style="list-style-type: none"> ▪ CPAR, DANIDA, Red Barna, GUSCO, ACORD, MGLSD

Note: Because conflict activities and insecurity episodes in Uganda are very fluid, information provided in this table may already be out of date, and needs constant monitoring.

Recommendations:

1. There is a big gap between disaster management and restoring livelihoods. In western Uganda, rebel activity has ceased, so donors are withdrawing their assistance, leaving the local people with nothing except “all the peace in the world”. They urgently need help with basic needs and economic activities, but little is forthcoming. Disasters are not over when the conflict stops. Diverting essential resources to disaster management also holds back development, by reducing resources available for essential activities in other needy districts. This is why planning should focus on reducing disasters and resolving conflicts.
2. Social protection to IDPs and refugees should not be limited to basic needs such as food. Assistance should be provided to support IDPs, ex-combatants and other conflict-affected groups to move into non-agricultural livelihoods if they choose.

PEOPLE WITH DISABILITIES

The vicious circles and linkages between poverty, vulnerability and disability are a subject of much discussion in Uganda (see for example NUDIPU 1992; Uganda Society of Disabled Children 1993; Oxfam 1989). Available information is, however, neither coherent nor comprehensive, thus making it of limited use as a tool to influence policy. Even where data exists, it tends to be inadequate. The 1991 Population and Housing Census enumerated 190,493 disabled people out of a total population of 16,671,705 (or 1.14%), which seems a gross underestimate considering the country's recent history of war, poor immunisation and inadequate health services. If the WHO estimate of about 10% disabled in any given population were taken as an approximation of disability prevalence, the 1991 Census would have returned a total of at least 1,670,000 disabled people. Given the current population estimate of 23 million people Ugandans, the number of disabled people in Uganda would be about 2.3 million. The most recent estimate of the number of children and adolescents with disabilities in the country is 325,000 (USDC 2000).

Other estimates, based on a combination of figures from the World Health Organisation, Ministry of Health, the National Union of Disabled Persons of Uganda (NUDIPU) and other sources suggest the following distribution concerning the nature of disabilities:

Table 7. Disabilities in Uganda

Type of disability	% of population	Estimated number of people
• Visual (ocular) impairment	1.0	200,000
• Hearing impairment/communication difficulty	2.0	40,000
• Mental retardation	0.4	80,000
• Loss of sensation	0.2	40,000
• Mobility disability/skeletal impairment	2.5	500,000
• Mental illness	0.2	40,000
• Epilepsy	4.0	800,00

While epilepsy is not an obvious and highly visible form of disability, it affects more people than other types of disability. Unfortunately, epilepsy is highly stigmatised, attached to superstitions, thus most affected people live and suffer in secrecy. Epileptics are often rejected, feared and marginalised, and affected children are also excluded from education (Uganda Ministry of Health/WHO 1998). Recent findings of the World Psychiatric Association estimated that mental illness in Uganda affects approximately 1.05 percent of the population (210,000 people). The high prevalence is due to civil strife, HIV/AIDS, work related stress, poverty and natural disasters. Approximately 500,000 people in Uganda have movement disabilities. Of these, 1 percent (200,000) are in the moderate to severe category and required assistive devices to overcome their disabilities.

John Okidi and Gloria Kempaka's Overview Paper on the Chronic Poverty Situation in Uganda observed that of all the persons with disabilities (PWDs) who were enumerated, 50 percent had never been to school, 4.6 percent had received secondary and tertiary education, and only 3.8 percent had received vocational training (Okidi and Kempaka, 2001). The paper further states that:

"An undeniable link exists between poverty and disability. The discrimination and marginalisation that accompanies disability denies the disabled equal access to opportunities for development. The low level of education among

PWDs heightens their vulnerability and enhances their dependence on others, because without any training they are unable to engage in income generating activities and to sustain themselves”.

Evidence from the two phases of the Uganda Participatory Poverty Assessment Process (UPPAP) also suggests a strong link between disability, vulnerability and “extreme and recurrent poverty” (Republic of Uganda 2001). Access to work was often denied “on account of inability to perform physical tasks” and women with “minor” disabilities were hurriedly married off so that they could eke a living from some household. Those with more severe disabilities on the other hand were stigmatised and often denied access to resources, even of their families (Republic of Uganda 2001).

Negative attitudes, mostly arising from harmful cultural practices, are considered to be one of the important factors responsible for the marginalisation of persons with disabilities in Uganda. For example, in an article by Mukiibi in the NUDIPU Newsletter (NUDIPU 1999 No.1) parents of children with mental disabilities and the children themselves were considered to be a “curse” in some Ugandan cultures, and as such were being banished from their communities.

Literature on specific forms of disability is lacking in Uganda. Where such literature is available it raises some interesting issues. On mental health, for example, the Ministry of Health and Action on Disability and Development (ADD) estimate that there are between 500,000 and 1,000,000 mentally ill adults in Uganda (Ministry of Health/ADD 1999). Baingana’s estimate of persons with mental disability is 766,898 of who 183,389 are estimated to be with severe mental retardation (Baingana 1996). On the other hand the Education Assessment Resources Programme (EARS) estimates the prevalence of learning difficulties at 16.9 percent, and cerebral palsy is reported to be the leading cause of mental illness. Other causes include German measles, meningitis and malnutrition (EARS 2000).

Studies by USDC (1999) and UNICEF (1994), on disability impact and coping mechanisms for children with disabilities, indicated that dependency, social isolation, rejection, vulnerability and powerlessness characterised the experience of disabled children. Many disabled children, the studies conclude, especially adolescents and adults, are exploited (including sexual abuse) and are discriminated against, and denied access to social economic activities. Penny’s (2000) Study on school access points out that children without disabilities are cruel to their disabled counterparts, nicknaming, punching, slapping, beating, teasing and bullying. Baingana and Neema (1999) also observe that children with behavioural disabilities can be destructive to both family and community property, which the parents are unable to replace or pay for. Because of isolation, children with disabilities do not get enough care and they suffer poor health. A further study by UNICEF (2000) provided more detailed insights into the causes and vulnerability consequences of disabilities of children.

Causes of vulnerability for disabled people in Uganda:

- **Negative attitudes leading to social exclusion:** Disabled people face various forms of exclusion, isolation and neglect and this condemns them to perpetual poverty. Due mainly to sociocultural reasons, the majority of disabled people in Uganda are still isolated and hence they cannot participate in community gatherings and activities. Negative attitudes towards disabled persons also mean that disabled people are considered “incapable of doing anything” and have nothing to offer. They are “invisible, confined to their homes, hidden from public view, left to cope alone with their problems”.

Similarly, there is low investment in people with disabilities, who face discrimination in their families, in society, in service provision, employment and social circles. Local

governments, also, which should be taking the lead in promoting positive change at the local level, do not take disability as a priority in their programmes, and are too resource-constrained to provide help. Government planners under-evaluate the magnitude of the problem and allocate very few resources to PWDs.

Negative cultural practices are largely responsible for the marginalisation of persons with disabilities (PWDs) in Uganda. Among some ethnic groups, mothers of children with learning disabilities are banished from their families, and society as a whole, because “their” children are considered to be a curse to the family. Once a disabled child is viewed by the society and family as a curse from God, the likelihood of the affected family to seek appropriate rehabilitation and other opportunities for improvement of the child’s livelihood declines.

- **Inadequacy of policies and programmes:** Existing policies and programmes that focus on poverty eradication, such as Plan for the Modernisation of Agriculture (PMA) are inadequate in addressing the needs of disabled people, and may indeed be exclusionary.
- **Public awareness and access to information by disabled people is limited:** Although the number of disabled people in the Ugandan population is considerable, most members of the public are unaware of the difficulties experienced by PWDs. Often, they see charity as the only way of addressing the disability challenge. This lack of awareness entrenches negative attitudes and leads to further exclusion. Many parents of disabled children are simply unaware about how to care for their children and what services may exist.
- **Disability appliances (aids) are not affordable or accessible:** A large number of disabled people in Uganda are in need of mobility appliances and other disability aids. These aids and related services are either not available or too costly to access. People with multiple disabilities are most affected by the lack of access.
- **Limited skills and education:** Most disabled people in Uganda, particularly the youth, lack productive skills due to inadequate education. This limits their opportunities for finding income-earning employment.
- **Disabled people in Uganda lack confidence:** A sizeable proportion of people with disabilities in the country lack confidence, and as a result many fail to perform to their potential. The reasons for this lack of confidence are both external and internal. “We know and we even feel that we are not trusted, listened to or accepted”, said one NUDIPU official.
- **The policy environment is positive, but implementation is weak:** The Uganda Constitution specifically promotes and protects the rights of disabled people in its provisions (in articles: 21, 32, 39, 59, 78, 107, 118, 144, 180 and 185), and in the National Objectives and Directive Principles of State Policy (objectives 6, 16 and 24). Other policies are, in theory, also supportive. Disabled children are, for example, supposed to be given preference in accessing Universal Primary Education (UPE) opportunities. But there are extremely limited Braille facilities for blind children, no schools or teachers for profoundly deaf children, an absence of mobility appliances for physically disabled children, or even inadequacies in the physical environment in schools (appropriate toilet facilities, ramps, wide doors, etc).
- **The “liberalised market” is restrictive and unfair:** Disabled people in the Ugandan context are expected to “compete” on the same grounds with able-bodied people with respect to the market. The cost of a tricycle or wheelchair, for example, is over Shs.200,000/-, and no subsidies exist for people with disabilities.

The legal and institutional framework for addressing disability issues

Uganda is one of the few countries in the region that boasts of comprehensive legal provisions for inclusion of people with disabilities in the country's development process. The main framework for this is the 1995 Uganda Constitution which enshrined in it specific provisions on disability. The Constitution emphasises achievement of:

- (a) fair representation of marginalised groups (including disabled persons), and
- (b) recognition of the rights and dignity of persons with disabilities.

These aspirations are further articulated by article 35 where it is specified that "persons with disabilities have a right to respect and human dignity and that the state and society shall take appropriate measures to ensure that they realise their full mental and physical potential". Parliament was charged with the responsibility of enacting laws appropriate for the protection of persons with disabilities.

According to Article 21 of the Constitution, all persons are equal before and under the law in all spheres of political, economic, social and cultural life in every other aspect and shall enjoy equal rights. The Constitution further stipulates that a person shall not be discriminated against on the ground of sex, race, colour, ethnic origin, tribe, birth, creed or religion, or social economic standing, political opinion, or disability. Discrimination is interpreted to mean giving different treatment to different persons attributable only or mainly to their respective descriptions by sex, race, colour, ethnic origin, tribe of birth, creed or religion, social or economic standing, political opinion, physical or mental disability.

On the other hand, Article 32 further stipulates that the state shall take affirmative action in favour of groups that are marginalised on the basis of gender, age, disability or any other reason created by history, tradition or custom, for the purpose of redressing imbalances which exist against them. Furthermore, the Parliament shall pass relevant laws, including laws for the establishment of an Equal Opportunities Commission, for the purpose of achieving the above objective. With respect to language, the Constitution dedicates itself to promotion and development of sign language for the deaf.

The Local Government Act provides the major institutional legal framework that facilitates the participation of people with disabilities in their own governance. It provides for the representation of disabled people at the various Local Council levels. At the practical level, for example, this meant the election of 46,218 councillors in the whole country (LC1 to LC5 levels). [Table 8](#) shows the number of disabled councillors elected to the different levels in the election year 1998.

Table 8. Councillors with Disabilities at Different Local Council Levels, 1998

Administrative	Local Councils	Number of units	Number of PWDs by level
Village	LC I	39,668	39,668
Parish	LC II	4,507	4,507
Sub-county	LC III	893	1,786
County	LC VI	167	167
District	LC V	45	90
Total		45,280	46,218

Numbers aside, the biggest challenge so far has been that nearly all disabled people elected to these offices are new to politics or even the functioning of organisations. They lack skills in advocacy, lobbying, planning, and leadership.

Thus both the legal and institutional framework are fully supportive of disabled people in Uganda. Despite this support, the practical application of the letter and spirit of the law is extremely tenuous. This matter becomes particularly evident when one examines the actual programmes in place for poverty eradication in Uganda.

Gaps in current Policies and Programmes

Overall it must be said that existing policies and programmes that focus on poverty eradication, such as the PEAP and the Plan for the Modernisation of Agriculture (PMA) are inadequate in addressing the needs of disabled people, and may indeed be exclusionary. In spite of the importance attached to the PEAP framework, it does not specifically mention disability as a key target. Similarly the PAF does not target people with disabilities. This is shown by the fact that disabled people are not visible in the utilisation of PAF funds.

By its own admission, the PMA realises that there is a category of the poor who have no assets and are unlikely to benefit directly from PMA interventions. Disabled people are disproportionately represented in this category, hence they are generally excluded from participating in the PMA. By extension, disabled people who are unable to benefit from PMA are most unlikely to benefit from the National Agricultural Advisory Services (NAADS), a “demand-driven client oriented and farmer-led agricultural service delivery system”.

The objective of the new Land Act (1998) is to create an enabling environment for the participation of all stakeholders in effective planning management and use of Uganda’s land resources. Many have already expressed a fear that it is mostly local elites who own a large proportion of land and who are likely to make critical decisions even when the Land Act is implemented, and it is suggested that the prospects for disabled people can only be remote.

The decentralisation programme is a key vehicle for promoting local level development. The process involves substantial transfers of political, financial and planning responsibilities from the central government to local councils. It also empowers the local authorities to take increasing responsibility for the delivery of services and promotion of popular participation and empowerment of local people in decision-making. As already indicated, the Local Council structure on which local governance revolves has representation of people with disabilities. Regrettably, the disabled councillors on most councils are not well inducted in the business of the councils. Neither do the councils possess adequate funds to implement their priority programmes. This makes it particularly difficult for disabled people to benefit from the process of decentralisation, especially given that they are still excluded from other funding frameworks, such as the PMA.

What is being done?

At the NGO and CBO level: A number of NGOs and CBOs focusing on disabled persons’ needs and rights exist in the country. At the district level, these NGOs are organised into District Unions (to date there is a total of 56 District Unions). All district unions form the National Union of Disabled Persons of Uganda, NUDIPU, which is the national umbrella organisation. The national and district level organisations are mainly involved in advocacy and policy-influencing work on behalf of their members.

A wide range of membership-based disability NGOs and CBOs provide support to disabled persons at village, parish and sub-county levels. For example, the Agency for Accessible and Sustainable Agriculture (AGASA) in Wakiso District targets mostly farmers with disabilities – building skills, facilitating familiarisation visits, and coordinating support for accessing credit.

A training programme in special education exists for the disabled people at the Institute of Teacher Education, Kyambogo (ITEK), the national teacher training institution of Uganda. In 1992, 170 teachers had special education training for the disabled while 65 primary schools ran special programmes for them (MoES, White Paper, 1992).

Evidence shows that Uganda had 7 hospitals that have capacity for corrective surgery, 4 vocational rehabilitation centres, 1 orthopaedic workshop, 3 orthopaedic surgeons, about 50 physiotherapists and no native-speaking speech therapists throughout the country as at 1994. Moreover, most of these resources for the disabled and other people with special needs are located in the urban centres and probably serve 3% of the disabled who require them (USDC 1994).

Other efforts by the government to protect the disabled include the establishment of the Community-Based Rehabilitation Strategy. However, this has not been supported with enough funding and it depends on close collaboration with donors and NGOs supporting the disabled. Examples of such NGOs and donors include OXFAM, Action on Disability and Development (ADD), Action Aid, Norwegian Association of the Disabled (NAD), USAID, DANIDA, British Red Cross, and others. Ugandan groups working for or run by the disabled include NUDIPU, Kisumba Foundation for the Disabled and the Uganda Society for Disabled Children, among others.

Recommendations:

- **Enact Disability Law:** No law currently exists on disability to give force to the positive policy statements or to protect and support disabled people legally.
- **Support a wide-ranging awareness campaign:** A need exists for broadening the campaign on disability awareness at all levels and using all available instruments. Disability issues should be engrained in all policy documents and programmes, and in both formal and informal education.
- **Implement agreed provisions:** Failure to implement agreed provisions serves to discourage advocacy of disability rights. The UNDP Country Cooperation Framework 2001-2005, for example, outlines targets for improving disabled people's livelihoods, but none of these has so far been implemented.
- **Support local level institutions to organise:** The role that CBOs and NGOs can play in fostering social protection can be quite considerable. These organisations need to be supported to organise themselves, hence capacity development.
- **Provide subsidies for disability aids (assistive devices):** The cost of disability aids is considerable and poor disabled people cannot be expected to purchase these in the open market.
- **Different categories, different needs:** Different categories of disabled people have different social protection needs, and programme design must take into consideration these differing needs.

THE ELDERLY

Definition of old age

The United Nations defines older persons as those aged 60 years and above. In Uganda, however, as is the case in most other African countries, a number of attributes other than age are often used to tell older persons from younger ones. This is due to the absence or non-functioning of the birth registration system, ignorance about chronological age and perceived social roles and functions performed by people at various ages. Attributes that are relevant to old age in Uganda include working status, physical features (greying of hair, failing eyesight and 'old-age diseases' such as arthritis) and social-cultural aspects (such as seniority status – e.g. being a chief – and the number of grandchildren one has). The elderly can enjoy a high status in rural communities. Older people support their families by caring for children, managing their homes and taking part in day-to-day activities around the home. They are the custodians of cultural norms and values and they play a vital role in the dissemination of these values from one generation to another. Such contributions of older people are usually unpaid and unrecognised but form an indispensable part of development.

Due to low life expectancy in Uganda, by the time one gets to his/her late 40s s/he is already considered to be an older person. Retirement from the workforce based on chronological age is also used to denote entry into old age. Retirement from the civil service of Uganda is at 60 years of age. It is worth noting that the proportion of the working population employed in the formal sector is less than 10 percent, which implies that the bulk of people outside the service who would otherwise be retired by virtue of the retirement age goes unnoticed and thus their numbers are unregistered.

Definitions of the *elderly* are strongly influenced by gender considerations. The age set of defining old age for women has commonly been five years or so younger than for men, notwithstanding women's greater life expectancy (Prakash 1997). In Uganda, as in many other societies, many consider menopause – a biological marker – as an indicator of old age in women. A woman is also deemed old in comparison to men, when her children marry and bring home in-laws and grandchildren.

The Demographic Picture

Although the AIDS pandemic is reducing life expectancy in affected countries, the elderly population of Uganda will certainly continue to grow. Elsewhere in Africa, the population of older people, currently estimated at 38 million, is projected to reach 212 million by 2050. Butler (1997) postulates that the steadily ageing population poses a challenge of devising ways to provide for the needs of an increasing number of elderly citizens within the context of poor economies and inadequate social security systems. Increased poverty, changing family structures and the impact of HIV/AIDS compound these challenges.

The elderly constituted 4.11 percent (686,260) of the 16,671,705 Ugandans enumerated in the 1991 Population and Housing Census, and this number has certainly increased since. The data reveal a higher concentration of the older population in the rural than urban areas, which is an expected pattern in light of the fact that 89 percent of the Ugandan population is rural. In addition, there is substantial out-migration of the young and middle-aged people from rural to urban areas in search of better socio-economic opportunities, leading to higher proportions of older people in rural areas.

The role of older persons in Uganda's economic development

Uganda's economy is mostly rural and agricultural. Most people thus work in the agricultural sector with no fixed or regular income or any economic compensation in old age, rendering

them totally vulnerable. While labour can provide a source of living for poor people who lack other assets and income, a key factor of older people's poverty is their diminished capacity for labour in the informal sector and their exclusion from formal labour markets (Heslop and Gorman 2002). Most ageing people face similar obstacles to greater economic participation, including lack of access to land and limited land use rights, greater difficulty in obtaining bank loans, less technical assistance and training from extension services, and restricted employment opportunities exacerbated by higher rates of illiteracy.

In the absence of publicly financed social security (e.g. pensions schemes) for people outside formal employment, the economic survival of most elderly persons in Uganda hinges on the economic standing of their children, who are viewed as providers of old age security by their parents.

Literacy, education and the elderly

Literacy levels in Uganda are low. It is estimated that 58.9 percent of the population are literate (UBOS 2002), a modest improvement from 54 percent in 1991 (MFPED 1994). This improvement is due mainly to the Universal Primary Education (UPE) policy of Government, which was launched in 1997. This policy however, targets only primary school-age children. This implies that older persons who had not attained education when still young are not targeted under this programme. There have however, been isolated cases in some districts where some elderly people joined the school system upon the introduction of UPE to learn some basic reading and writing skills.

Table 9 presents data on the literacy levels of older persons in Uganda for 1991. Literacy levels decrease with increases in age (from 24 percent among the 60-64 age cohort to only 12 percent among the 80+). The gender gap in literacy levels is much wider in these cohorts compared to other age groups.

Table 9. Literacy Levels of Older Persons in Uganda, 1991

Age Group	Male	Female	Total
60-64	38.4%	11.15	24.0%
65-69	34.6%	8.7%	21.8%
70-74	26.6%	7.4%	16.8%
75-79	25.6%	6.3%	16.6%
80+	17.4%	5.3%	11.7%
Crude National Literacy rate	63.5%	44.9%	54.0%

*Compiled from the 1991 Population and Housing Census, Analytical Report Vol. 1
Ministry of Finance, Planning and Economic Development, 1994*

Unfortunately, older people continue to be excluded from education, training and awareness creation programmes. This is probably due to the general belief that they are not useful to national development.

Lack of access to education earlier in life means that high proportions of older people are unaware of their rights, thus compounding poverty and lack of opportunities in later life. In addition, illiteracy affects access to information since much information is communicated through written documents, such as newspapers. This also hampers their entry into skills development courses, which may require some basic literacy and numeracy skills. Lack of technical skills to exploit available income generating and life improving opportunities are both a cause and symptom of poverty (Okidi and Mugambe 2002). Failure to read and write implies inability to articulate one's needs and priorities to higher levels for programme action.

The higher levels of illiteracy among older persons thus implies that they also lack a strong voice to articulate their needs to different fora.

Employment and Income Security

Employment means receipt of wages and other forms of payment for one's labour, and thus represents a main means of avoiding poverty. The International Labour Organisation (ILO) estimates that nearly half of older persons aged 60-64 and more than a quarter of those over 65 years of age were 'economically active' in 1990 (Lloyd-Sherlock 1999). By 1991, 58 percent of the population aged 60+ in Uganda was still participating in economic activities. As expected, the proportion of males was higher (63%) than that of females (53%). A number of writers point to this phenomenon of high economic participation rates by older persons, which they attribute to poverty as a significant motivating factor. Such high rates of economic activity among the elderly could be interpreted as a reflection of better income security during old age. However, older people in Uganda are more likely to be involved in agricultural, informal and part-time employment, which is less rewarding and is associated with irregularities in terms of cash earnings. Nevertheless, there is a need to investigate the compelling factors to work among older persons and establish whether they are any different from those of younger persons.

Formal social security systems cover a small percentage of the population in Uganda. Most older workers are in the informal or self-employed sectors, mostly agriculture. The only social support the government provides to the elderly in Uganda is through the pension scheme, but this only goes to former public servants in the Uganda civil service. The civil service itself is small and employs about 20 percent of the working population. By virtue of this, it is clear that those who formally retire at the age of 60 are few and form an almost insignificant proportion of the elderly in Uganda.

In addition, monies offered through social security establishments are very meagre, and disregard the effects of inflation. The impact of the pension on older people's welfare is weakened by the absence of complementary structures and policies that provide access to health services, financial and marketing opportunities. The formal work environment in Uganda is not 'user-friendly' for older persons. In most Ugandan institutions, for example, older people are forced to work on a 'contract basis' when they near retirement age. Changing jobs in one's fifties is almost impossible since organisations consider one old by virtue of being near retirement age. Some are even forced to retire to create room for younger people while they still have something to contribute, a scenario that has been created by massive unemployment of younger persons.

Regarding income security of older persons, policies on social security are narrowly focused, and do not encompass formal, traditional, informal and semi-formal employment systems.

Social support and care for the elderly

Most elderly people in Uganda live below the poverty line. Access to regular income and social security provisions is difficult for the elderly. For instance, the National Security Scheme of Uganda presently holds about 800,000 accounts, but only 300,000 of them are active in terms of regular contributions. Furthermore, the Ugandan Public Service caters for about 25,000 pensioners, of whom 20,000 are in the army. The benefits are not only very small but the process of accessing these benefits is tedious and difficult for the elderly.

By and large, the elderly in Uganda are too weak to perform productive work and are economically dependent on others such as children, relatives and neighbours to survive. They lack care, protection, basic necessities, personal effects and independence. Many experience loneliness, deprivation of property and segregation/isolation, which exposes

them to psychological disturbance and untimely death. Increasing numbers of the elderly even bear the burden of looking after their grandchildren with their meagre resources due to migration or death of the parents of the children.

In Uganda, like in the rest of Africa, the family is still the central institution for caring for older people. This however, has been weakened by many factors including modernisation, urbanisation, and other influences that come with globalisation (Adietey-Sorse 2000). These have led families to live great distances apart, communicating through modern technology, reducing opportunities to help each other even at times when the support is most needed. The situation is worsened by the changing family structures witnessed in most of Africa, affecting family composition and functions. Family bonds have been weakened by the need to ensure survival in the cash economy, thus increasing their vulnerability and impacting negatively on older people. The associated costs of care for older persons have gravely affected people's attitudes towards living with older relatives.

Society's negative attitude towards older people is partly due to the costs of caring for older people. Nevertheless, living with married children and co-residence with a married son and his family are still more prevalent and socially acceptable in Uganda than institutionalisation of the elderly, which remains unusual and draws social disapproval in many quarters. There is, however, no guarantee that the informal social protection provided by the extended family will continue in the coming years, especially given the effects of HIV/AIDS, which has also contributed to a general lack of care for older persons. Many younger people have died leaving behind their aged relatives whom they would otherwise have cared for. In a number of cases, those who die leave orphans who have to be taken up by the grandparents. This drains the entire resource base for the elderly who, in addition to meeting their basic needs, have to pay for the health, education and other costs of their young dependants.

Health and the elderly

Older people throughout Africa often cite health as a priority issue. Findings from Phase 1 of the Uganda Participatory Poverty Assessment project (UPPAP 1) reveal that the most frequently mentioned cause and impact of poverty was poor health (MFPED 2000). The capacity to earn a living or participate in family and community life, as well as a sense of personal well-being, are all governed by health status. Common health problems of the elderly include hypertension, stroke, diabetes, heart disease, trachoma and blindness that often lead to complications and permanent incapacity. Poor health means withdrawal of older people from productive activity and may render them dependent, disabled and thus vulnerable in a number of ways. Such health problems are compounded by lack of adequate income to pay for health care and drugs. Poverty at the family level also causes older people's health problems to be addressed only after other family priorities are met.

In Uganda, there is a lack of specialised geriatric services attending to the health needs of older people. This is compounded by general exclusion of health of older people in the curricula of health training institutions; and a total absence of government systems allowing older people to access free medical services. In addition, older people are excluded from primary health care systems. The geographical inaccessibility of health service delivery centres in Uganda also poses a great hindrance to utilisation of these services by the population of all ages, including the elderly. It is a fact that very little is known about the specific nutritional needs of older people in Africa, and malnutrition has also been observed among the elderly (Ochola 2000), hence worsening their health status. Failing health and rising health expenses are a major source of worry and stress among the elderly.

The need to improve the health service delivery system and make it friendly to the elderly is obvious. This necessitates inclusion of the elderly as a special category in health training systems, provision of specialised geriatric services in the health care delivery system, and

provision of avenues through which older people can access the country's health services more easily.

Older women and poverty

Older women in Uganda are more likely to be widowed, to live alone and in poverty. The poverty profile by the Ministry of Finance, Planning and Economic Development notes that the poorest 20 percent in urban areas includes a high number of elderly women (MFPED 2000). In the countryside, problems of being widowed generally impact more on older women than older men. Problems faced include being "replaced by younger wives" in places where polygamy is still practised. Widowhood makes an important difference to the quality of life of older women, the most obvious effect being the lowering of socio-economic status of the widow and hence her vulnerability to poverty. Older women and widows are often forced to give up an independent household and move in with children or relatives, which is in itself a blow to their self-esteem. This naturally implies loss of decision-making power and dependency to the children who may not also have much to offer in light of the rampant poverty in most communities. Social stigma surrounds widows and their decision-making power in the family gets drastically reduced after the death of the husband. Many widows also feel economically exploited and alienated. Discrimination in property and inheritance laws impact more on older women than older men. Similarly, allegations of witchcraft in rural communities tend to be targeted more at older women. Thus the gender dimension of ageing needs to be a more prominent feature of all agendas for policy action.

Human rights and governance

Some examples of abuse, though not well documented, are: older people are accused of everything from witchcraft to preventing or causing too much rain – for this they have been tortured and assaulted. Rape and violence by family members towards older relatives has been found to be alarmingly common in some places in Uganda. Age is a barrier to employment and older people in the country's formal employment sector were the first targets of retrenchments when structural adjustment policies were introduced. Education and training programmes systematically exclude older people and so deny them opportunities to develop new skills that could help sustain them. When food is in short supply, social pressures often penalise older people in intra-household food distribution. Theft of property by family members is common and inheritance laws actively discriminate against older women. Legal systems fail to protect the rights of older people.

In order to improve popular participation and decision making at the lower levels, Government instituted the decentralised system of government in 1993 through the Local Councils Statute. This system of governance was later enshrined in the 1995 Constitution of Uganda, and amplified by the Local Governments Act of 1997. Through this framework, critical powers and functions (planning, budgeting, legislation, personnel, democratisation, financial management) were devolved to the Local Councils, which are constituted by democratically elected councillors. Marginalised groups of the youths, women and disabled persons also elect representatives to these councils to enable articulation of their needs and hence their integration into the entire planning and service delivery systems. The elderly, however, are not well represented on these councils. Exclusion of elderly persons from leadership and decision-making institutions is a great barrier to their full participation in the political and socio-economic life of their communities. This exclusion reinforces and deepens poverty in old age (Ahenkora 1999).

HIV/AIDS and the elderly

The effects of HIV/AIDS on all sections of the society are immense. There has been much discussion of the effects of the pandemic on the sexually active age groups. Unfortunately,

very little has been done to explore its effects on older people due to the assumption that older people are not sexually active, thus denying them AIDS education and putting them at risk. Older people play a major role by caring for people affected by HIV/AIDS and then bringing up orphaned grandchildren. The impact of taking care of orphans drains them emotionally. Their finances are depleted since most of them have no source of income, but they are required to take care of the family's health and material needs.

As the AIDS pandemic continues to pose challenges in the country, there is a need to include the elderly in the awareness raising campaigns about HIV/AIDS, increase attention to the effects of AIDS on older people, support the changing role of older people and identify coping mechanisms to help older people support their children and grandchildren.

Programmes and Policies of Social Protection for the Elderly in Uganda

The 1995 Constitution of Uganda recognises the value and rights of the elderly. Article 32 of the constitution states that: "the state shall make reasonable provision for the welfare and maintenance of the aged". The improved governance of the NRM government of Uganda has recognised the elderly by involving them in decision-making processes. Internationally, Uganda is a party to all UN conventions and treaties regarding the equal treatment of people, including the elderly. Major reviews have been done to improve the Ministry of Public Service and National Social Security Fund (NSSF) that are responsible for pensions and provident funds. Uganda is now witnessing growth in private pensions and savings. The government has also established a Department of the Elderly and Disability and appointed a Minister of State for Elderly and Disability Affairs. These actions are beginning to integrate the elderly into the mainstream of Ugandan society. The national goals and policies of the newly formulated National Policy for the Elderly in Uganda also show some commitment on the part of Uganda government to better the lot of the elderly. These goals and policies are summarised thus:

1. Adherence to the United Nations principles for older persons adopted on 16 October 1991 (Resolutions No. 46/91). These include participation, dignity, independence, self-fulfilment, and care for the aged since ageing is a natural phase of an individual's life cycle, career and experience.
2. Equal opportunities, empowerment, healthy environment and economic prosperity for all, including the elderly.
3. Government and NGOs and all concerned are saddled with responsibility for the most vulnerable among the poor, including elderly people of whom many are women from rural areas.

From the government's standpoint, one key factor in the success of Uganda's poverty eradication strategy lies in strengthening delivery institutions and systems to ensure efficient and effective utilisation of resources. Households headed by the elderly were singled out as some of those that are likely to be expenditure poor (MFPED 2001). In most cases, however, programmes designed to alleviate poverty prohibit the inclusion of poor older people, for example, credit programmes that require an initial saving, may prove difficult for some older people to access. Low incomes make it hard for people to save for their older years. Many people enter their older years with limited assets, and these are quickly exhausted as earnings reduce. This makes older people more vulnerable to poverty. In older age there may be a reduced ability to work – as work abilities are dependent on relatively good health. There is a need for inclusion of the elderly in poverty eradication strategies for effective realisation of the fruits of government's poverty eradication efforts. Policy development must challenge and overcome the invisible barriers of prejudice (ageism) that prevent older people from playing a full part in the development of their societies. This can be done by involving

older people in poverty reduction processes, such as the development of Poverty Reduction Strategy Papers and design of programmes to alleviate poverty.

PEOPLE LIVING WITH HIV/AIDS

HIV/AIDS was first observed in Uganda in 1982 in rural Rakai district. Uganda has one of the highest rates of reported HIV/AIDS cases per population in the world (2,314 per million population by June 1993).³ In 1994, one-tenth of the Uganda population was infected with HIV and expected to die prematurely from AIDS and related diseases. By December 1999, about 55,861 clinical AIDS cases, which represent a small proportion of all cases, were reported. Moreover, 1,438,000 persons were estimated to have been infected by HIV while 838,000 people were estimated to have died due to AIDS (Ministry of Health 2000).

Table 10. Reported AIDS Cases in Uganda

Year	New Cases	Cumulative Total*
1983	17	17
1986	893	910
1987	2,731	3,624
1988	3,625	7,249
1989	5,556	12,805
1990	7,150	19,955
1991	10,235	30,190
1992	8,332	38,522
1993	5,353	48,875

* All previous cases need to be added by year-end.

Source: ACP, HIV Surveillance December 1993

Table 10 shows reported AIDS cases in Uganda between 1983 and 1993. 1991 recorded the highest figure of 10,235 new cases. Although new reported cases of AIDS appear to be decreasing, many sources say this is doubtful and misleading. The AIDS Commission of Uganda reported in 1994 that the actual number of HIV/AIDS cases is probably 5-7 times higher than reported cases. It attributes lack of diagnostic facilities, costs of confirmatory testing and stigma experienced by sufferers as the causes of under-reporting of HIV/AIDS. Nonetheless, Uganda has made significant and commendable progress in controlling the spread of the disease.

HIV/AIDS in Uganda has spread throughout the country, however, its prevalence varies from one district to another. The incidence of AIDS is high in Kampala, Masaka, Rakai and Jinja districts. The implication is that these districts constitute highest prevalence of risk in terms of social and personal vulnerability. Groups of Ugandans most vulnerable to HIV infection include alcoholics, young girls, youth, men who inherit widows, and polygamous families.

Causes of HIV/AIDS-related vulnerability in Uganda

HIV/AIDS is a major health and socio-economic disaster that in Uganda is mainly transmitted through heterosexual intercourse. Some common causes of HIV/AIDS contraction in Uganda are indicated below:

- Casual sex with prostitutes.
- Having many sexual partners.
- Having sex without using condoms.

³ ACP, HIV Surveillance December 1993.

- Having sex with homosexuals.
- Marital infidelity.
- Sexual practices, cultural norms (such as formal and informal polygamy, inheritance of widows, etc) and unarticulated social expectations, which contribute to high-risk behaviours among the most vulnerable groups – women, girls and adolescents.
- Low quality of support available to people who develop symptoms of AIDS and the unwillingness of affected people to seek assistance due to social stigma, which leads to further transmission of the disease.
- Blood transfusions and injections.
- Seeking protection from traditional healers (who often use non-sterile instruments) by infected people, which escalates the transmission of the disease.
- Girls are particularly vulnerable to pressures for early sex from older men due to lack of financial support. This exacerbates the AIDS epidemic.
- Poverty, which drives women (and some men) into economic survival strategies such as commercial “prostitution” or “transactional sex” (where sex is traded for presents or goods), also expose Ugandans to high risk of sexually transmitted disease.
- Prolonged family separations due to economic and employment pressures such as those affecting civil servants, soldiers, plantation or rural workers, which leads to the partners having sex with other people in their different stations.
- Behavioural factors such as drinking alcohol and peer pressure among the youth, leading to promiscuity and a higher likelihood of contracting HIV/AIDS.
- Poor knowledge of how to avoid HIV/AIDS

In a study conducted by the Uganda Demographic and Health Survey, 2000-2001, the high level of awareness about HIV/AIDS among the Ugandan population (99.7 percent of women) is not matched by the knowledge of how to avoid contracting the virus. This study showed that many Ugandans are only aware of three main methods of avoiding HIV/AIDS. These are: using condoms, abstaining from sexual relations, and having one sexual partner. Although people are aware of AIDS, the causes and consequences of the epidemic are poorly understood, particularly amongst women, in remote rural sites such as Kapchorwa, Kotido and Moyo (UPPAP 2000).

Impacts of HIV/AIDS in Uganda

“People are not sure of their lives (future) because of the AIDS scourge” (Apac, plenary).

Today, HIV/AIDS is regarded as a “household disease” in Uganda because almost all households have lost relatives or friends to the disease. Of the total cases reported by December 1993, children accounted for 8.2 percent while adults made up 91.8 percent. More than 80 percent of the adults were between 16-40 years old, 47.7 percent being men and 52.3 percent women (STD/AIDS Control Programme, 1994). Undoubtedly, HIV/AIDS is the most serious health problem in Uganda and it is the leading cause of premature death for adults (Kadama 1993). Disruption of society and economic destabilisation due to the high level of HIV/AIDS related deaths and the loss of productive capacity poses a serious problem for the future development of Uganda.

Some national predictions made in 1990, based on the epidemic effects of AIDS, are now evident: decreasing agricultural production associated with decreased agricultural exports and less foreign exchange (Armstrong and Ainsworth, 1991). This is because Uganda’s economy is dependent upon agricultural production, and this in turn depends on a healthy labour pool. With the devastating effect of AIDS, agricultural fields are left lying fallow after death of the people who tended them (UAC 1993). In interviews carried out in Rakai district, people say: *“The AIDS scourge is reducing the most able and skilled people who would develop the district”*.

With the introduction of the relatively stable NRM government in Uganda, the economy, which was damaged by 2 decades of civil unrest, started recovering, but the AIDS epidemic is putting stress and strain on the nation. Even the health facilities have been stretched in trying to meet the needs of those with HIV/AIDS, which has resulted in patients with non-HIV conditions being crowded out of hospitals (Armstrong and Ainsworth, 1991). For instance, in 1992 the Ministry of Health estimated that 50-70 percent of adult patients in Uganda's major hospitals had HIV-related illnesses (Asiimwe 1992). There have been increases in the dependency ratio (numbers of children and elderly per economically active adult) in many parts of Uganda, particularly Rakai and Masaka, due to AIDS. Poverty has also deepened among Ugandan families due to AIDS as families sell off assets (land, animals, buildings) to care for a terminally ill member, pay burial costs or support the household after a death (Seeley 1993). In 1993, it was believed that more than one million children had been orphaned as a result of AIDS (UAC 1993).

Programmes of Social Protection for Controlling and Preventing HIV/AIDS in Uganda

In Uganda, HIV/AIDS has received a commendable response by collaboration among the government agencies, NGOs, religious groups, cultural groups, community groups, research institutions and networks of infected persons. There were more than 320 AIDS control agencies listed in Uganda in 1991, which are involved in AIDS education, prevention or care (UAC, Inventory of Activities, 1992). These organisations are involved with training of health workers and counsellors, treating sexually transmitted diseases, distributing condoms, supporting families caring for persons with AIDS/HIV and educating the community about prevention of the disease through direct health education.

At the government level, the NRM government of Uganda was one of the first in Africa and the developing world to acknowledge and recognise the presence of the AIDS epidemic. Consequently, in 1986, it established the National AIDS Control Programme (ACP) in the Ministry of Health with support from World Health Organisation to oversee AIDS education, home care, counselling, research and monitoring of the epidemic. In February 1987, ACP started a mass health education campaign to prevent the spread of the disease in Uganda. However, this campaign has been hampered by inadequate supply and distribution of condoms, as well as widespread resistance to change in sexual behaviour.

The establishment of the Uganda AIDS Commission in 1992, with a multisectoral mandate, is another impressive step taken by the Ugandan government to combat the epidemic and protect the victims of AIDS. The Multisectoral AIDS Control Approach (MACA) recognises that since AIDS affects all sectors of society, such as health, education and agriculture; these sectors will have different and unique capabilities to contribute to the effort of prevention and control of AIDS. Over the past years, many Knowledge-Attitude-Practice (KAP) studies have been conducted in different districts to ascertain levels of awareness of AIDS, specific knowledge about transmission, and behaviour change among the people.⁴

The Uganda Red Cross Society (URCS), one of the 178 national Red Cross Societies in the International Federation of the Red Cross and Red Crescent (IFRC), has an active initiative of protecting people who are already infected with HIV/AIDS through its HIV/AIDS related anti-stigma campaign. In 2002, URCS launched a two-year campaign against stigma and discrimination of people living with HIV/AIDS, in accordance with the new commitment of IFRC to "making a difference in the lives of the vulnerable" during the 10th anniversary of the World Disasters Report. The World Disasters Report 2002, launched by IFRC and URCS, show that for more than 10 years, these societies have been in the forefront of campaigning

⁴ See, for example, Forester *et al.* 1988; McCombie, 1990; van der Meeren 1992; Neema *et al.* 1993; and Toupouzis 1994.

for reduction of the risks that natural disasters (HIV/AIDS being a major disaster) pose to vulnerable communities around the world, including Uganda. The five-year strategic plan (2002-2006) of URCS to predict, prevent, respond and mitigate the impact and vulnerability of HIV/AIDS on the Ugandans is another step in the right direction.

Recommendations:

- There is a need for continuous sensitisation concerning HIV infections and AIDS-related conditions, particularly in rural and remote areas.
- Safe practices and support for HIV/AIDS sufferers observed in many parts of Uganda need to be transferred to all areas, particularly those where HIV/AIDS is still rising.
- Sufferers of HIV/AIDS need to have access to affordable drugs so that they can live full and useful lives within their communities.

AGRICULTURAL WORKERS

The most important income-producing sector of the Ugandan economy is agriculture. It accounts for 43 percent of the country's GDP, employs 80 percent of the labour force, and is the major contributor to the livelihoods of over 85 percent of Uganda's population who live in rural areas but earn less than half of national income (Plan for Modernisation of Agriculture: Eradicating Poverty in Uganda). The majority of the rural population is engaged in farming (crop production), fishing and livestock agriculture, and agriculture is the key occupational activity for both the poor and non-poor, particularly women. [Table 11](#) shows the 1997 poverty profile for adults by occupation.

Table 11. Poverty Profile for Adults by Occupation and Location in Uganda, 1997

Occupational Activity	Share of Population			Poor			Non-poor		
	R	U	T	R	U	T	R	U	T
Agricultural Worker	74	12	65	77	30	74	72	9	59
Not employed	9	24	11	11	25	12	7	24	11
Economically active but not usually employed	4	5	4	4	3	4	3	5	4
Professional, Administrative, or Clerical work	3	10	4	2	2	2	3	11	5
Service Worker	11	49	16	7	40	8	14	50	22

Source: 1997 Household Survey, Uganda Poverty Profile: What do we know about the poor?

Despite the importance of agricultural workers to the economy of Uganda, they have remained vulnerable to poverty, due to many causes. Some of these causes are pointed out in the next section.

Causes of Agricultural Workers-related vulnerability in Uganda

- In Uganda, isolation of agricultural workers leads to their vulnerability to poverty. This is because many communities or districts are isolated in terms of distance, poor roads and transport, resource allocation or insecurity. The consequences are lack of communication and market information, insufficient trade, limited access to social services such as health care, limited marketing opportunities and exclusion of agricultural workers from development processes.

- Agricultural workers in Uganda still make use of simple tools and implements (hoes and *pangas*), which make their work labour-intensive, with women providing 60-80 percent of the labour for cash crops sold in local markets and food crops for home consumption (Topouzis 1994).
- Evidence shows that agricultural workers tend to have larger families as a strategy to generate low-cost labour for expanding the family's economic base. This has led to increasing poverty and vulnerability, since they are not able to support the children.
- Over-consumption of alcohol has reduced time and labour available for cultivation.
- Hired labour is unaffordable for economically vulnerable agricultural workers such as orphans, widows, single parents or disabled people who have access to land.
- Lack of access to credit or assets to use as security, as well as low literacy and rights awareness of agricultural workers (particularly among women) predispose them to vulnerability.
- Lack of technical support and training, such as agricultural research and extension, also negatively affects the agricultural workers.
- Public insecurity due to war and insurgency causes displacement of agricultural workers through loss of access to farmland, etc.
- Widespread environmental degradation, soil degradation and poor farming practices, such as susceptibility of coffee to coffee wilt disease, leaves the future of agricultural workers and the Ugandan economy more generally in a precarious situation.

Box 8. Commercial Agricultural Workers in Uganda

The UPPAP (2002) carried out research on how commercial agricultural production was influencing workers' lives in four sites: casual workers on the Mwera Tea Estate in Mubende; contract migrant workers and casual labourers on the Kagira Sugar Estate in Jinja; workers in Butema village in northern Bugiri, adjacent to the Tilda rice growing scheme; and workers in Godia village in Arua where the majority of residents grow tobacco for the British American Tobacco (BAT) Company.

Madhvani Company employs workers in Mwera and Kakira estates. These workers are very poor, working just to obtain a means of basic survival. From 506 people employed in Mwera, over 200 are casual workers, mainly employed to pick tea, on 3-month verbal contracts. They lack security, which makes them very vulnerable. It is reported that many workers offer bribes to their supervisors in order to retain their jobs. Women workers are not entitled to maternity leave, but are laid off and have to re-apply if they wish to work again. Younger, more energetic and productive workers are now being employed to replace elderly casual workers who are laid off.

According to the law (Employment Decree No 4/75), workers can only be employed for 6 months on casual terms, after which they will become permanent staff. However, the Madhvani Company continuously re-employs workers on casual contracts, mainly because NSSF contributions and other social security benefits do not have to be paid for casual workers. This represents exploitation of the workers, which greatly increases their vulnerability to poverty outcomes. Moreover, the workers are not provided with protective clothing against chemical sprayers and snakes, which makes them vulnerable to ill health or even death. On the issue of vulnerability, a worker states that: *"There are foxes and snakes that live in the tea bushes. In addition the dew makes our skin around the thighs peel off. We are not allowed to make an alarm when we see a snake as they may scare other workers and halt work."*

The numbers of hours that the casual and contract workers are expected to work (7am-6.30pm daily) are not only too long but also they are poorly remunerated. About 30% of the casual workers are single women and have multiple partners to get shelter and earn some income from the men. This makes them vulnerable to contracting STDs and HIV/AIDS. Some casual workers live in mud and wattle houses in poor conditions, with their children crowded in one room. Their children often indulge in anti-social behaviour due to their difficult

upbringing. Many casual workers are illiterate, lack skills, have very limited horizons and income and cannot afford health treatment. Hence, they have unpredictable futures, which causes them to focus on practical, current needs that retain their status quo (UPPAP 2002:4).

The case of commercial agricultural workers in the four research sites is similar to other agricultural workers all over Uganda. Generally, they experience appalling working and living conditions, job insecurity, poverty and lack access to productive services.

Recommendations:

- There is a need for stronger and better union representation, such as the National Union of Plantation and Agricultural Workers of Uganda (NUPAWU) and District Labour Officers, to cater for the interests and integration of all agricultural workers, particularly the oppressed.
- Government should institute employment legislation that better protects the rights of workers and put in place inspection and enforcement machinery to ensure that the legislation is carried out by both employers and employees.
- The government needs to revise the minimum wage legislation in Uganda. This will force private employers to increase the minimum wages for their staff.
- Government needs to strengthen the Occupational Health and Safety Inspectorate of the Ministry of Gender, Labour and Social Development so that it can work effectively with District Labour Officers, to protect workers from being exposed to hazardous working conditions.
- Better access to credit, improved support from agricultural extension services, and subsidies for agricultural inputs would help the agricultural workers who own their farmland or production.
- Improved access to markets and communication can serve as strategies to achieve better returns from agricultural investments by the agricultural workers who work for themselves.

LOW-PAID WORKERS

There are two categories of workers in Uganda that are particularly vulnerable and in need of social protection: low-paid formal sector workers, and informal sector workers. The main issues of relevance here are:

- (1) the reform of social security provisioning;
- (2) extension of social security to the informal sector;
- (3) deregulation and labour laws.

Reform of formal sector social security

The National Social Security Fund (NSSF) provides a form of contributory pension to private sector employees. It is complementary to the Government of Uganda pension scheme – though there are plans to merge and rationalise the two schemes in the near future – while all other Ugandan citizens fall outside formal pension provisioning.

The NSSF ‘pension scheme’ only applies to registered private sector firms with 5 or more employees; it does not cover small enterprises with less than five employees, the self-employed, or the unemployed. The reasons for this include the low and erratic earnings of

small enterprises, self-employed informal sector workers, and small farmers, which makes it difficult for NSSF to collect contributions from these groups. [Table 12](#) summarises the number of NSSF clients in 2001, by category.

Table 12. NSSF client profile, 2001

Current account-holders	420,000
Active (paying-in) members	119,000
Annual claimants (retirees)	5,200
Annual claimants (other)	10,000
Estimated coverage	88%

The NSSF provides a single financial product – a provident fund that is paid for by members' contributions. Employees contribute 5% of their gross income and employers contribute 10%. These contributions are invested in a provident fund. When members reach 55 (retirement age in the private sector) they receive what they contributed, plus interest (minimum 2.5%, currently 4%) in a single lump sum payment. Contribution to NSSF is mandatory for all workers aged 16-55 years. The unpopularity of this service is evident in high degrees of evasion and effort expended by NSSF Enforcement Officers in monitoring firms and trying to enforce compliance. Most workers don't see the value of being forced to give up part of their income for a benefit that won't materialise until 20 or 30 years time. For their part, employers resent paying 10%, arguing that this imposes costs on business that are too high.

All this will change when the proposed social security reforms are implemented. In 1993/94, a UNDP/ILO project followed by a regional consultation process with NSSF members concluded that a monthly pension following retirement provided better social protection for the elderly than a provident fund pay-out. In 1994 a conference and a Joint Consultative Committee (government, employers, NSSF) recommended the transformation, which was authorised by Parliament in 1995. The NSSF failed to implement this reform, partly because of pressure from employers, who were arguing for reduced employer contributions and liberalisation of the social security sector. However, the transformation will happen soon, reflecting members' expressed preference for a monthly payment and the fact that a lump-sum payment encourages squandering the pay-out while a monthly pension provides more effective social protection for the elderly.

At present the NSSF is a legal monopoly, but the sector is being liberalised and will become competitive. Liberalisation will require a government regulatory agency to ensure compliance – workers will be required to join at least one pension scheme, though not necessarily the NSSF. This will motivate the NSSF to expand the range of financial services that it offers, in order to attract clients (rather than enforce participation).

Social security for informal sector workers

The informal sector is the second largest employer in Uganda after agriculture, employing 1.5 million people (24% of the labour force, or 85% if agriculture is excluded), but it provides lower and more erratic incomes than the formal sector (private firms, government and the civil service), as well as a complete absence of social protection to workers. Workers in the informal economy have no unemployment benefits, no health insurance, no maternity benefits, no recourse to injury or disability compensation, and no prospect of drawing a pension on retirement. Women are over-represented in the informal sector, which heightens their vulnerability.

Every year there are 320,000 new entrants to the workforce in Uganda, but the government provides only 2% of the jobs that are needed. So many people go into the informal sector – including retrenched civil servants – because of lack of opportunities in the formal sector. The informal sector is large mainly because it is an employer of last resort. It is sometimes pointed out that the informal sector is a giant in terms of employment creation, yet its presence in terms of capital creation and contribution to public finances is barely visible. Even worse, informal sector workers (e.g. petty traders) are often harassed by the police and bureaucrats, rather than supported.

It is very difficult to conceive of comprehensive social protection programmes for very poor countries like Uganda. The Western approach of “getting out what you put in” doesn’t work when most people are only taking out but not making any contributions. It follows that other ways must be found of extending social security coverage to informal sector workers, who are typically excluded from formal social security arrangements. There are proposals to establish a new National Social Security Scheme, which will draw informal sector and self-employed workers into the formal social protection system. Local Councils might be used to collect contributions from farmers and others (instead of the current Graduated Tax).

Dissatisfaction with the NSSF model among low-paid workers, including informal sector workers, centres on their reluctance to put some percentage of their meagre earnings into a NSSF-style pension scheme, and then not see the benefits until they are old. They need a broader range of financial services and products to choose from. Formal social protection providers should be more responsive to what different types of workers need and want.

Box 9. Micro-health insurance for informal sector workers in Uganda

FASERT – the Foundation for Advancement of Small Enterprises and Rural Technologies – is an organisation that works with informal sector workers in Kenya, Tanzania, and Uganda. Originally FASERT was called ‘Federation of Informal Sector Associations’, but it changed to ‘Small Enterprises’ because of the stigma that attaches to the informal sector. Membership is mostly women, also out of school youth, small traders, micro-enterprises, in both urban and rural (non-farm) areas.

FASERT is implementing an ILO project called ‘STEP’ (‘Strategies and Tools against Social Exclusion and Poverty’), using ILO’s Community-Based Training, not to ‘transfer’ skills but to build on economic opportunities and knowledge that is already there. Informal sector workers lack social protection. Informal systems – *muno mukabi* (‘friend in need’) – is the only available system, based on mutuality. It is used mainly for funerals: people help each other with funeral expenses.

FASERT is promoting micro-health insurance, supported by ILO. If a micro-entrepreneur falls ill s/he has nothing – work and income simply stop. FASERT works with groups of at least 30 people practising the same occupation (e.g. metalworkers) who pool money into a fund that they control themselves. The groups are based on mutuality and peer pressure. The funds cannot cover major diseases that are very expensive – AIDS, cancer. It deals better with opportunistic illnesses – fever, flu, malaria. Members get a ‘swipe card’ with their photograph as an ID, and use this to claim benefits at participating hospitals and health clinics.

So far there are 17 groups on the scheme. This represents a very limited outreach, mainly because FASERT faces resource constraints. But it is voluntary – being funded by members’ contributions – whereas NSSF contributions are compulsory, and NSSF members try to evade paying in because they do not value the financial service provided by NSSF.

Deregulation and labour law

One of the key areas of macroeconomic reform in Uganda is deregulation. In making the case for “creating an enabling environment for rapid and sustainable economic growth and structural transformation”, the PEAP argues for “removing the constraints to investment and private sector development”. However, this sets up a potential conflict between the *economic*

objective of rapid private sector growth, and the *social* objective of ensuring adequate protection for workers. The Deregulation Unit within the Ministry of Finance is responsible for creating and monitoring Uganda's deregulation project.

It is argued that deregulation can have a major impact on poverty reduction, through creating a more conducive environment for small businesses and minimising burdensome legislation that affects the trading activities of the poor. For instance, trading licensing arrangements have been seen as a regressive fee-system that impedes business development, including trade of the poor. On the other hand, criticisms have been expressed that the current policy prioritises the objective of economic growth and investment over the need to protect public interests from exploitation and abuse.

While the Government of Uganda has firmly committed itself to poverty eradication via economic growth through promoting the private sector, a concern remains that radical deregulation is likely to have detrimental effects on the poor, especially the working poor. Labour standards and regulation can be used to protect public interests in a number of ways, including protecting citizens against exploitative employment contracts; making provisions for adequate maternity leave; and dealing with issues of child labour. The MGLSD is concerned that the deregulation process is reviewing existing labour regulation within very narrow economic principles. That is, it is focusing on the short-term cost implications of labour laws that hamper the dynamic emergence of a competitive business environment. This narrow focus risks neglecting many social and long-term economic costs that workers are likely to face; in other words, it emphasises the business environment and the employer at the expense of the employee.

One of the greatest challenges for the MGLSD is how to protect workers, especially those in the informal sector, from exploitation and unsafe work environments (in terms of physical health and personal safety). The majority of Ugandans work in this sector, however, the labour standards regulating this sector are very weak. A draft Employment Policy has been prepared that deals with many issues related to worker rights and labour market regulation.

Recommendations:

1. It was expressed in interviews with various officials in the MGLSD that the efforts of the Labour Commission on employment policy have been marginalised and dwarfed by initiatives taken by the Ministry of Finance. We recommend that the MGLSD builds its capacity in this area by training its Labour Officers and staff in the Planning Unit and Policy Analysis Unit in labour economics, law and policy analysis. This will strengthen the Ministry's capacity in technical issues related to labour legislation and employment policies, and may assist the MGLSD in engaging the Ministry of Finance (an institution dominated by economists) on issues related to employment policy.
2. We recommend that a forum for dialogue be set up as a joint initiative between the MGLSD and the Deregulation Project that brings various stakeholders, such as the Federation of Ugandan Trade Unions, civil society organisations, the Federation of Ugandan Employers, and workers associations. This forum will give an opportunity for various groups to discuss issues raised by various plans under the deregulation project, and will provide an avenue for the MGLSD to bring its draft employment policy onto the agenda.