

Nurturing Care to Improve Early Childhood Development:

Uganda Country Profile

Introducing Nurturing Care

Research indicates that in low- to middle-income countries, 43 percent of children under five years of age are at risk of poverty, poor health, poor nutrition, and other adversities, which threatens their ability to reach their developmental potential (Black et al. 2017). In Uganda, 63 percent of children under five years of age are at risk of poor development based on a composite indicator of stunting, extreme poverty, or both (Lu et al. 2016).

The U.S. Agency for International Development (USAID) recognizes early childhood as a critical stage of human development. Children’s early experiences directly affect their physical, cognitive, emotional, and social development, with lasting impacts on later success in school and life. The first 1,000 days—from pregnancy to age two years—are the foundation for lifelong learning and development. The brain develops more rapidly during the first 1,000 days than at any other period in life (Georgieff et al. 2018). Children grow best in an environment with nurturing care, which includes safe and secure surroundings, responsive parenting/caregiving, adequate maternal and child health care and nutrition, and opportunities for stimulation and early learning (see Figure 1; Britto et al. 2017).

There is growing momentum for integrated early childhood programming that engages multiple sectors, based on compelling new global evidence on the importance of reaching pregnant women and young children with holistic services. The 2016 Lancet series on early childhood development (ECD) and the World Health Organization’s (WHO) *Guidelines for Improving Early Childhood Development* (WHO 2020) emphasize the importance of holistic nurturing care through integrated services. Evidence from low- and middle-income countries indicates that combined caregiving and nutrition interventions are effective in improving children’s cognitive, language, and motor development compared with the current standard of care or nutrition interventions alone (Jeong et al. 2018). To date, there has been limited integration of responsive care and early learning in health and nutrition services. The Nurturing Care Framework (see figure) provides guidance to help children and families thrive through care for the individual child within a broader enabling environment of capable caregivers, empowered communities, supportive services, and enabling policies (WHO 2018).

This profile compiles national data alongside information on national policies and programs to highlight both the needs and opportunities for promoting optimal child development in Uganda.

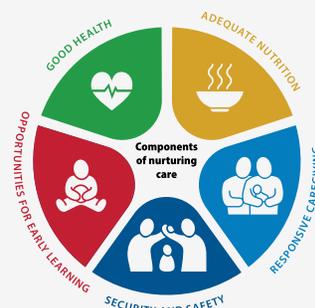


Figure 1: Components of Nurturing Care (WHO 2020)

-  QUICK LINKS
-  OUTCOMES
-  DATA
-  DATA
-  DATA
-  DATA
-  ENVIRONMENT
-  POLICIES
-  PROGRAMS
-  REFERENCES
-  DEFINITIONS

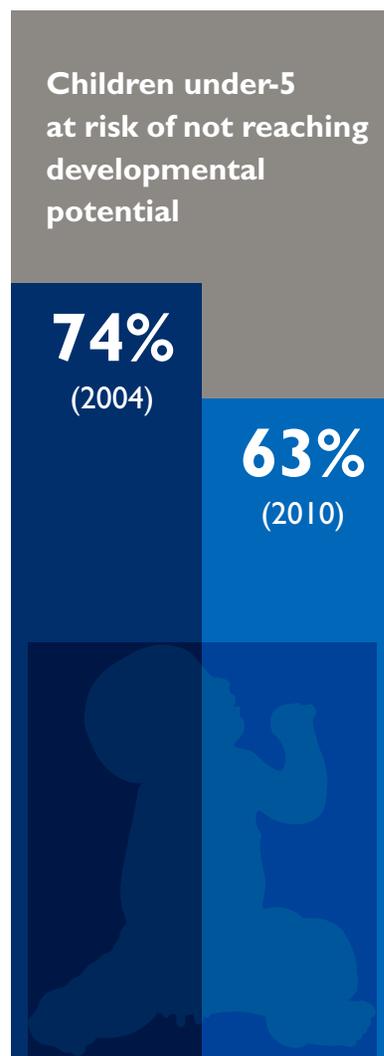
Child Development Outcomes

This profile presents data on nurturing care and early childhood development. The WHO's (2020) *Guidelines for Improving ECD* provide useful definitions of these two terms:

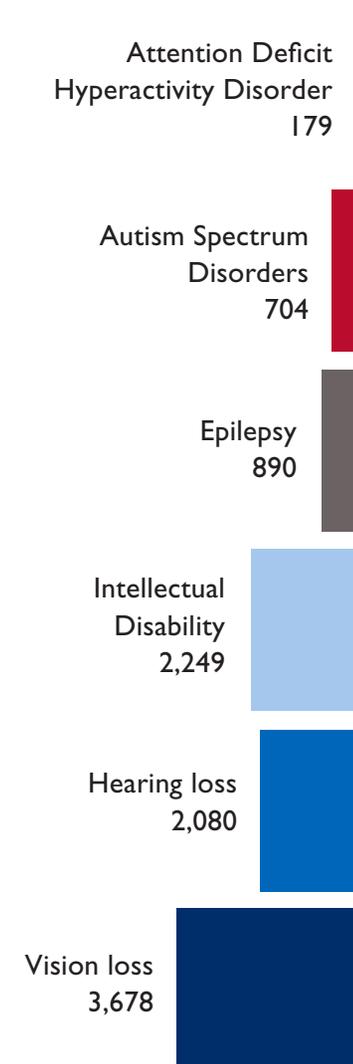
“Early childhood development: Refers to the cognitive, physical, language, motor, social and emotional development between 0–8 years of age.

Nurturing care: Characterized by a caregiving environment that is sensitive to children’s health and nutritional needs, responsive, emotionally supportive, and developmentally stimulating and appropriate, with opportunities for play and exploration and protection from adversities.”

In brief, nurturing care supports children to survive and reach their full potential and ECD represents the outcomes measured. Nurturing care is important for everyone, and is especially important in the earliest years of a child’s life from ages 0 to 3 as this is a period of rapid brain development that sets the foundation for later health and wellbeing. Data are presented for only four – nutrition, safety and security, health, and early learning – of the five domains of nurturing care because there are currently no global indicators and data on responsive caregiving. Detailed indicator definitions and sources are located at the end of the document. To access an indicator definition, click on the title of the indicator. The data presented here provide a country-level overview, and there is likely in-country variability due to population demographics or geography.

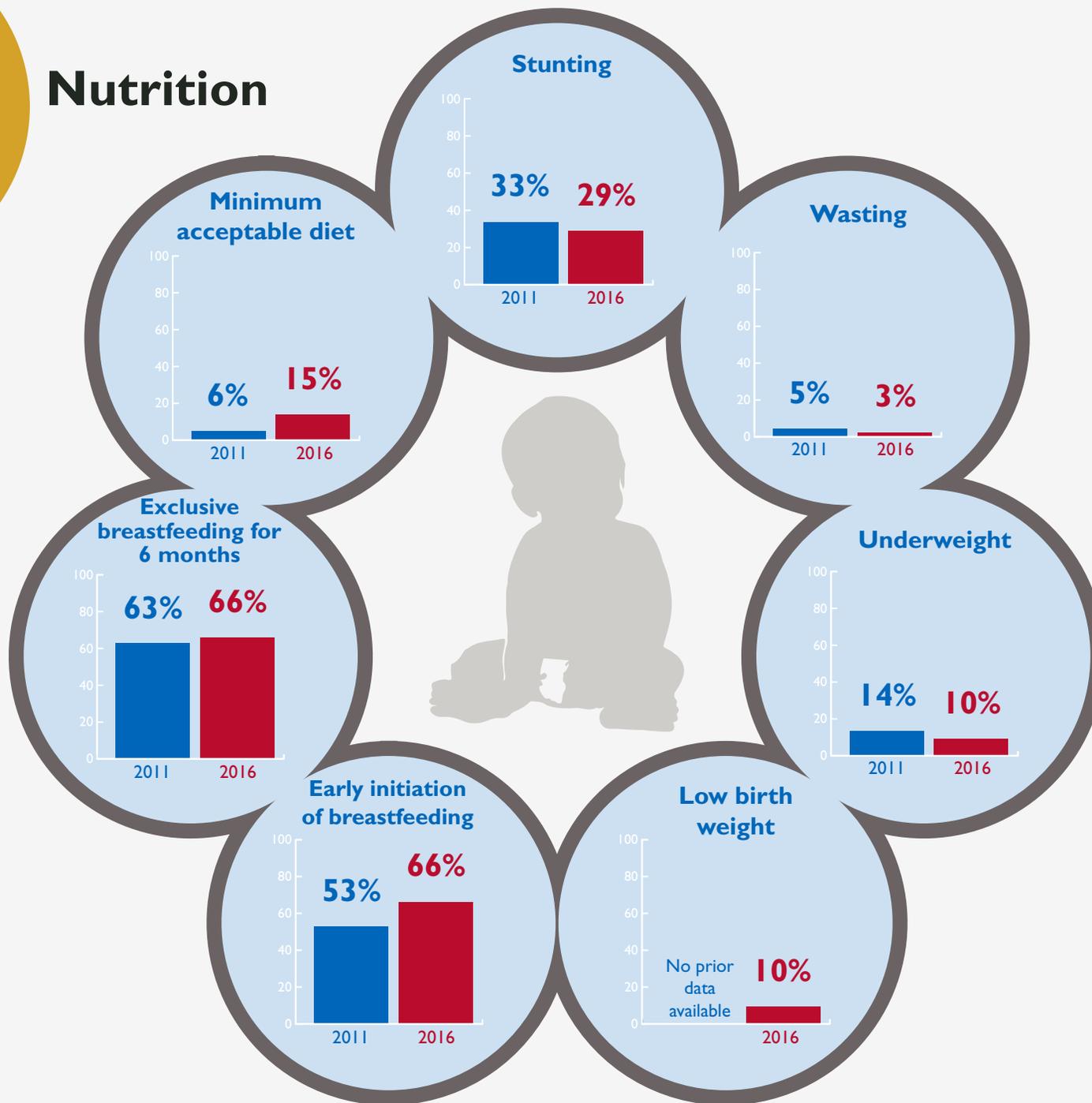


Developmental disability in **5** per 100,000 children under population





Nutrition





Early Learning



Health



Safety and Security



53%

Support for learning
(2015)



37%

Attendance in early
childhood education
(2015)



50%

Availability of
playthings
(2015)



2%

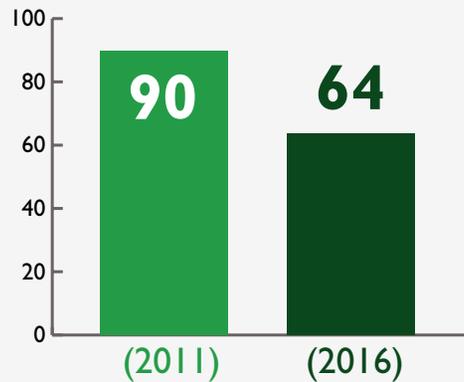
Availability of
children's books
(2015)

Preterm births



14% (2012)

Under-5 mortality rate



10%

Positive discipline
(2016)



37%

Inadequate supervision
(2016)



48%

Children living in
poverty
(2016)

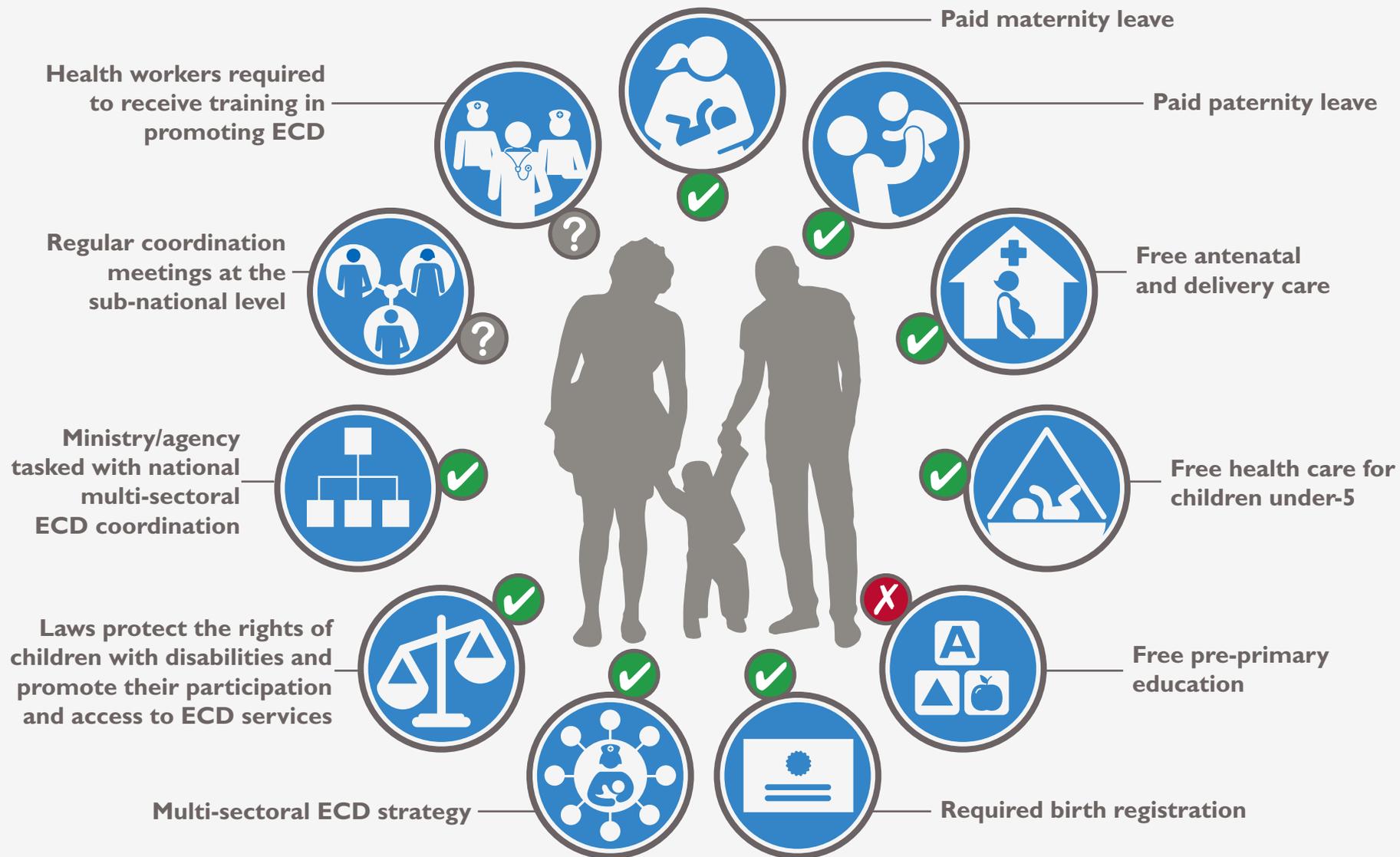


Children covered by
social protection systems

No data available



Policy Environment for Supporting Improved ECD



Key: policy in place no policy information not available



Overview of Policies Related to Improving ECD

The Ministry of Gender, Labour and Social Development is responsible for multi-sectoral coordination to improve ECD in Uganda.

Ministry of Gender, Labour and Social Development (MGLSD)



2016–2021

National Integrated ECD Policy (2016) and Action Plan (2016-2021)

The policy seeks to ensure equitable access to quality and relevant ECD services for holistic development of all children from conception to 8 years. Recognizing the multi-dimensional needs of young children, the policy provides direction and guidance to all sectors for quality, inclusive, coordinated, and well-funded ECD services and programs.



Save the Children



Ministry of Health (MOH)

 2013

Reproductive Maternal, Newborn and Child Health Sharpened Plan for Uganda

In alignment with Uganda's Vision 2040, and anchored in the National Development Plan (NDP) 2010/11 – 2014/15, this plan seeks to activate collective action towards achieving equitable accelerated improvements in maternal, newborn and child mortality in Uganda. The policy focuses primarily on pregnant women and children up to 2 years of age. The vision is to end preventable deaths and ensure a strategic shift to doing business and universal coverage of high impact health interventions using all three delivery platforms (communities, population-scheduled and individual clinical services). Towards this end, the plan proposes five strategic shifts to overcome the obstacles and prevent avoidable death. The plan implements the mother-child health passport to provide continuity in health care records from pregnancy through to early childhood with an aim of improving quality of care and caregiver knowledge to demand for services.

 2010/2011–2014/2015

Health Sector Strategic Plan III

Maternal and child health is a major component of the plan with the aim of improving the health of mothers and children and reducing maternal and neonatal mortality and morbidity. Other health care services include periodic well-child visits, immunization, growth monitoring promotion, screenings and check-ups for pregnant women, referrals, etc.

 2011–2016

Uganda Nutrition Action Plan (UNAP)

The UNAP provides an action plan to accompany the Food and Nutrition Policy. UNAP aims to reduce malnutrition through the promotion of multisector interventions with a lifecycle approach focused primarily in the first 1,000 days and women and girls of reproductive age. Primary interventions focus on improving infant and young child feeding and diets, social protection from shocks, advocacy for nutrition, and coordination of the action plan. Drafting of an updated action plan began in 2019.

 2003

Uganda Food and Nutrition Policy

The policy seeks to promote the nutritional status of all the people of Uganda through multi-sectoral, co-coordinated interventions that focus on food security, improved nutrition and increased incomes.

Promotion of nutrition interventions including exclusive breastfeeding, elimination of micronutrient deficiency, promotion of positive child-rearing practices, and strict adherence to the International Code for Marketing of Breastmilk substitutes are present in this policy.



Ministry of Education and Sports (MOES)

National Children's Authority

 2007

Early Childhood Development (ECD) Policy

The policy supports the provision of Early Childhood Care and Education (ECCE) services with the government being responsible for providing services for children between 6 to 8 years and the private sector for education services from 3–5 years.

 2008

The Education Act

The Education Act 2008 registers preprimary education as the first year of education and the Government of Uganda Curriculum Development Center has a learning framework for ECCE.

 2016

Children's Act Amendment

The act establishes protective legislation regarding the guardianship of children, inter-country adoption, and corporal punishment, among other issues. The act applies to all children below 18 years of age.

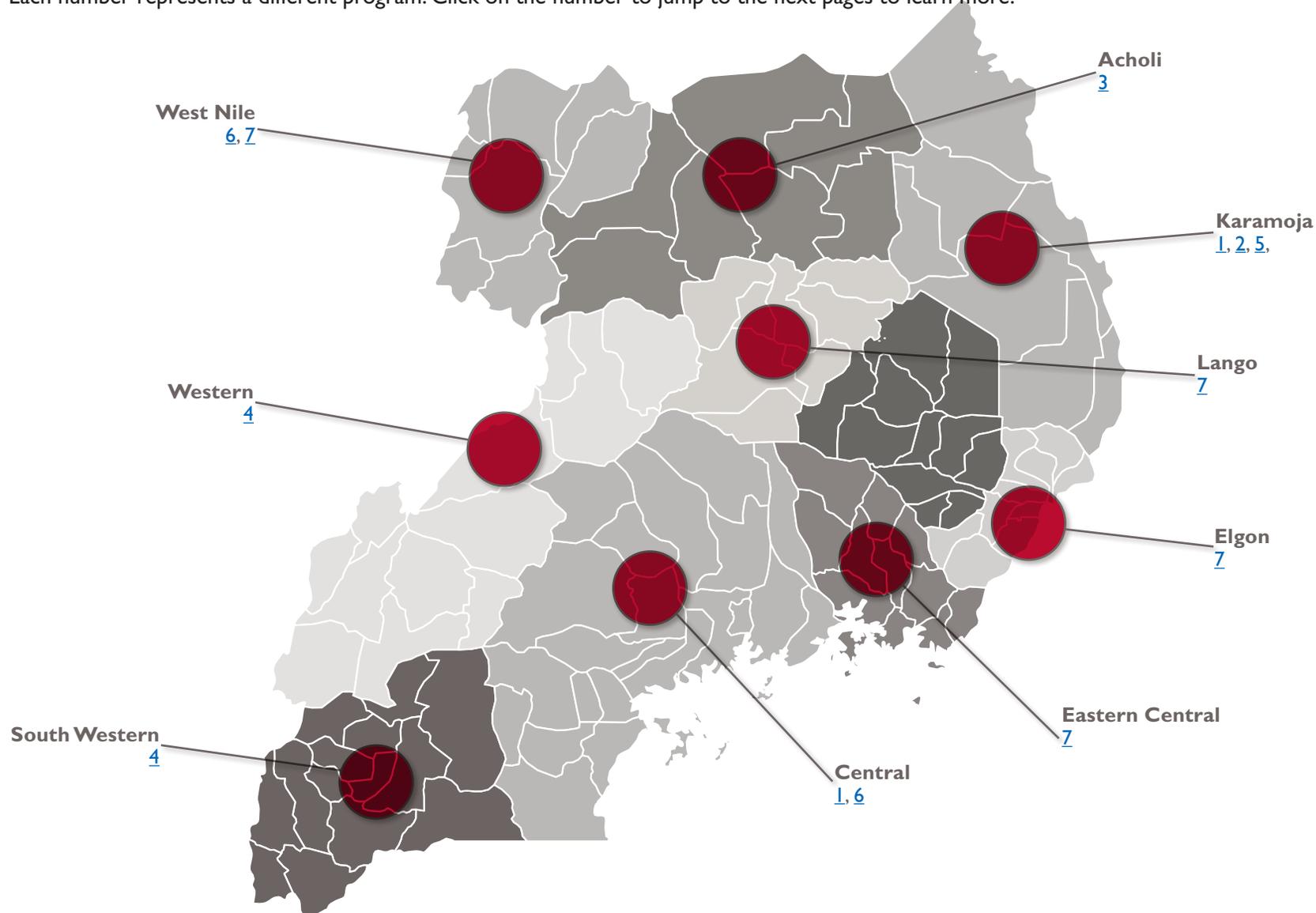


Save the Children



Current and Recent Programs for Improving ECD

Each number represents a different program. Click on the number to jump to the next pages to learn more.



Current and Recent Programs for Improving ECD

Program	Overview	Key Activities
1. Boost for the Youngest	<p>Implementer: Save the Children</p> <p>Timeline: 2015-ongoing</p> <p>Regions: Wasiko district, Central Uganda and Karamoja</p> <p>Key Government Partners: Ministry of Gender, Labour and Social Development (MOGLSD); Ministry of Health (MOH)</p> <p>Funders: Bainum Family Foundation</p>	<p>Save the Children implements the Government of Uganda endorsed package “Boost for the Youngest (BFY) Early Stimulation program” in Wakiso district, Central Uganda; and plans are underway to start programming in humanitarian contexts in Northern Uganda. BFY is an evidence-based parenting package informed by Save the Children’s Building Brains approach, which has been adopted by the Ministry of Gender, Labor and Social Development. The approach comprehensively addresses the nurturing care framework (NCF) and, at-risk families receive additional support through home visits and linkages to support services. The goal of BFY is to ensure that all caregivers, including fathers, grandparents, and young mothers develop the skills, knowledge, and attitudes to provide nurturing care in a responsive and protective manner. Through the training of trainers, mentorship, and coaching, health workers at health facilities and Village Health Teams are trained to counsel, conduct group sessions, and home visits.</p>
2. Apolou	<p>Implementer: Mercy Corps</p> <p>Timeline: 2018–2022</p> <p>Regions: Karamoja</p> <p>Key Government Partners: Not available</p> <p>Funders: USAID</p>	<p>The purpose of this program is to provide inclusive and effective governance for food and nutrition security for adolescent girls, pregnant and lactating women and for children under-5. The program also aims to reduce the incidences of Water, Sanitation and Hygiene (WASH) related diseases as well as to improve livelihoods, income, food security and potentially influence early caregiving practices.</p>
3. Household Resilience Project	<p>Implementer: ChildFund</p> <p>Timeline: 2018–2020</p> <p>Regions: Kitgum</p> <p>Key Government Partners: District Government</p> <p>Funders: ChildFund Korea</p>	<p>This project addresses the high rates of under-nutrition well as the underlying livelihood factors that characterize the northern region of Uganda. The goals of the project include improved access to high impact nutrition, health care information and services to 400 caregivers with undernourished infants and young children, and improved food security among 400 households of caregivers of children 0–5 years. To achieve this goal, key interventions include counselling materials on family child health care practices, household nutrition assessments for children under-5, caregiver sessions on nutritional practices and other child health care practices, provision of equipment to ECD centers and therapeutic feeding centers, etc.</p>
4. Sustainable Outcomes for Children and Youth Program	<p>Implementer: Catholic Relief Services (CRS)</p> <p>Timeline: 2015-2021</p> <p>Regions: South Western and Western Uganda</p> <p>Key Government Partners: MOGLSD</p> <p>Funders: USAID</p>	<p>The Sustainable Outcomes for Children and Youth (SOCY) program is designed to improve the health, nutrition, education and psychosocial wellbeing of orphaned and vulnerable children, as well as reduce abuse, exploitation and neglect among this population in 24 districts of south western and western Uganda. SOCY supports caregivers to nurture strong beginnings for children 0–5 years through enhanced physical, cognitive, social, psychological, language, and emotional development essential for transitioning into later childhood. The program targets caregivers and children affected by HIV; malnourished children and teen mothers. Messages are provided at household level by lay social workers and social workers. These offer direct services and referrals and linkages for child protection, HIV and other health and nutrition services, parenting education, and household economic strengthening interventions. SOCY also promotes family and community empowerment in childcare, and prevention of child abuse and gender-based violence.</p>

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Program	Overview	Key Activities
5. Nuyok	<p>Implementer: CRS Timeline: 2017–2022 Regions: Karamoja Key Government Partners: MOH, MOGLSD Ministry of Agriculture and Animal Industry, Ministry of Water and Sewerage Funders: USAID</p>	<p>Nuyok, a Karamojong word meaning “it is ours,” aims to build resilience to shocks, enhance livelihoods, and improve food and nutrition security for vulnerable rural families in four districts of Karamoja region in North Eastern Uganda. Nuyok uses an integrated approach to address food and nutrition security in Karamoja. The program builds community and institutional capacity to enhance resilience to shocks and stresses and improve vulnerable households’ livelihoods, health, and nutrition outcomes. Nuyok has successfully addressed malnutrition risks and increased protective factors at multiple levels for maternal and child health and nutrition through linkages with existing government and community structures. Nuyok’s nutrition activities focus on children in the first 1000 days to 5 years and pregnant and lactating women. The mother-care group approach, coupled with male change agents, are drivers of change at household level to ensure that children’s nutrition needs are met to reach their full potential.</p>
6. Madrasa Early Childhood Program Uganda (MECPU)	<p>Implementer: Aga Khan Foundation Timeline: 2013-2020 Regions: Seven districts in Central Uganda and one district in West Nile Region Key Government Partners: MOH, MOGLSD, and Ministry of Education and Sports (MOES) Funders: Johnson and Johnson (2013–2015); ELMA Foundation and AKFUSA (2017–2020)</p>	<p>MECPU supports parents of children below 3 years delivered through the Village Health Teams (VHTs) who provide information on health and nutrition initiatives, basic screening for common illnesses and referral of household members that are ill. Using a Training of Trainers approach, district health and education officials are trained on the UNICEF/WHO Care for Child Development (CCD) model to support parents and community ECD centers. The interventions have also aimed at increasing coordination between preschools, health facilities, and the home (the three spheres of influence of ECD) to improve the health and nutritional status of boys and girls aged 0-3.</p>
7. Community Led Action for Children (CLAC)	<p>Implementer: PLAN International Timeline: Ongoing-2025 Regions: East Central (Kamuli and Buyende districts), Eastern (Tororo district), Northern (Lira and Alebtong districts), West Nile Region (Nebbi, Arua, Yumbe and Adjumani districts) Key Government Partners: MOES, MOGLSD, MOH, and Ministry of Local Government Funders: UNICEF, ELMA Foundation, Lego Foundation, Plan International, King Coffee, Comic Relief, RED Charity Austria</p>	<p>Plan International Uganda ECD Program aims at supporting the optimal development of young children during the first eight years of their life using the Community Led Action for Children (CLAC) approach. This is a holistic community-based ECD model that empowers families and communities to fulfill children’s rights to ECD services, particularly for vulnerable children. CLAC focuses on improving the health, nutrition status, cognitive and social development of children. CLAC approach is inspired by the “4 Cornerstones to Secure a Strong Foundation for Young Children.” It is based on an integrated system of child and family services that offer a continuum of care for children right from home, through preschool, and to the early years of primary. CLAC also uses training packages developed by the government for implementation.</p>

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References and Background Sources

- Black, Maureen, Susan P. Walaker, Lia C.H. Fernald, Christopher T. Andersen, Ann M. DiGiorolamo, Chunling Lu, et al. 2017. "Early Childhood Coming of Age. Science through the Life-Course," *The Lancet* 389(10064): 77–90, doi: 10.1016/S0140-6736(16)31389-7
- Britto, Pia .R., Stephen J. Lye, Karrie Proulx, Aisha K. Yousafzai, Stephen G. Matthews, Tyler Vaivada, Rafael Perez-Escamilla, et al. 2017. "Nurturing care: Promoting Early Childhood Development," *The Lancet* 389(10064): 91–102, doi: 10.1016/S0140-6736(16)31390-3.
- Georgieff, Michael K., Sara E. Ramel, & Sarah E. Cusick. 2018. "Nutritional Influences on Brain Development," *Acta Paediatrica* 107(8): 1310-1321, doi: 10.1111/apa.14287.
- Jeong, Joshua., Emily Franchett, and Aisha K. Yousafzai. 2018. *World Health Organization Recommendations to Support Early Child Development in the First Three Years of Life: Report of the Systematic Review of the Evidence*. Boston: Harvard T.H. Chan School of Public Health.
- Lu, Chunling, Maureen M. Black, and L.M. Richter. 2016. "Risk of Poor Development in Young Children in Low-Income and Middle-Income Countries: An Estimation and Analysis at the Global, Regional and Country Level." *The Lancet Global Health*, 4: e916-22, doi: 10.1016/S2214-109X(16)30266-
- World Bank. 2012. *SABER Early Childhood Development Country Report: Uganda*. Washington, DC: World Bank Group.
- World Health Organization (WHO), United Nations Children's Fund, World Bank Group. 2018. *Nurturing Care for Early Childhood Development: A Framework for Helping Children Survive and Thrive to Transform Health and Human Potential*. Geneva: World Health Organization.
- WHO. 2020. *Improving Early Childhood Development: WHO Guideline*. Geneva: World Health Organization.

In addition to references listed here, information was gathered on programs through reviewing publicly available information from organizational websites or publications as well as via direct communication with program implementers.



USAID Maternal and Child Survival Program



Indicator Definitions and Sources

DESCRIPTOR	INDICATOR DEFINITION	DATA SOURCE
Child Development		
Children under-5 at risk of not reaching developmental potential	Percent of children under 5 years who were exposed to stunting or extreme poverty	Lu, Chunling, Maureen M. Black, and L.M. Richter. 2016. "Risk of Poor Development in Young Children in Low-Income and Middle-Income Countries: An Estimation and Analysis at the Global, Regional and Country Level." <i>The Lancet Global Health</i> , 4: e916-22, doi: 10.1016/S2214-109X(16)30266-2.
Developmental disability in children under-5	Rate of developmental disability per 100,000 children under-five years, disaggregated by six forms of developmental disability [epilepsy, intellectual, hearing loss, vision loss, autism spectrum disorder (ASD), and attention deficit hyperactivity disorder (ADHD)]	Global Research on Developmental Disabilities Collaborators. 2018. "Developmental disabilities among Children Younger than 5 Years in 195 Countries and Territories, 1990–2016: A Systematic Analysis for the Global Burden of Disease Study 2016." <i>The Lancet Global Health</i> , 6: e1100-21, doi:https://doi.org/10.1016/S2214-109X(18)30309-7.
Children ages 36–59 months that are not developmentally on track	Percentage of children (aged 36-59 months) not developmentally on track in at least 3 of the 4 following domains: literacy-numeracy, physical, social-emotional and learning	Uganda Bureau of Statistics and ICF. 2018. <i>Uganda Demographic and Health Survey 2016</i> . Kampala, Uganda and Rockville, Maryland, USA: UBOS and ICF. Uganda Bureau of Statistics and ICF. 2012. <i>Uganda Demographic and Health Survey 2011</i> . Kampala, Uganda and Rockville, Maryland, USA: UBOS and ICF.
Early Learning		
Support for learning	Percentage of children (aged 36–59 months) with whom any adult household member has engaged in 4 or more activities to provide early stimulation and responsive care in the last 3 days	Uganda Bureau of Statistics and ICF. 2018. <i>Uganda Demographic and Health Survey 2016</i> . Kampala, Uganda and Rockville, Maryland, USA: UBOS and ICF.
Attendance in early childhood education	Number of children age 36–59 months who are attending an early childhood education program	Uganda Bureau of Statistics and ICF. 2018. <i>Uganda Demographic and Health Survey 2016</i> . Kampala, Uganda and Rockville, Maryland, USA: UBOS and ICF.
Availability of playthings	Percentage of children under age 5 who play with 2 or more types of playthings	Uganda Bureau of Statistics and ICF. 2018. <i>Uganda Demographic and Health Survey 2016</i> . Kampala, Uganda and Rockville, Maryland, USA: UBOS and ICF.
Availability of children's books	Percentage of children under age 5 who have 3 or more children's books	Uganda Bureau of Statistics and ICF. 2018. <i>Uganda Demographic and Health Survey 2016</i> . Kampala, Uganda and Rockville, Maryland, USA: UBOS and ICF.



DESCRIPTOR	INDICATOR DEFINITION	DATA SOURCE
Health		
Preterm births	Proportion of live births that preterm (before 37 completed weeks of gestation)	Chawanpaiboon, Saifon, Joshua P.Vogel, Ann-Beth Moller, Pisake Lumbiganon, et al. (2019). Global, Regional, and National Estimates of Levels of Birth in 2014: A Systematic Review and Modelling Analysis. <i>The Lancet Global Health</i> , 7: e37-46, doi.org/10.1016/S2214-109X(18)30451-0
Under-5 mortality rate	Deaths of children under five years per 1,000 live births	United Nations Inter-Agency Group for Child Mortality Estimation. 2019. "Under-Five Mortality Rate--Total." Accessed from https://childmortality.org/data on July 28, 2020.
Nutrition		
Stunting	Percentage of under-fives falling below minus 2 standard deviations (moderate and severe) from the median height-for-age of the reference population	Uganda Bureau of Statistics and ICF. 2018. <i>Uganda Demographic and Health Survey 2016</i> . Kampala, Uganda and Rockville, Maryland, USA: UBOS and ICF.
Wasting	Percentage of children under 5 years of age falling below -2 standard deviations (moderate and severe) from the median weight-for-height of the reference population	Uganda Bureau of Statistics and ICF. 2018. <i>Uganda Demographic and Health Survey 2016</i> . Kampala, Uganda and Rockville, Maryland, USA: UBOS and ICF.
Underweight	Percentage of under-fives falling below minus 2 standard deviations (moderate and severe) from the median weight-for-age of the reference population	Uganda Bureau of Statistics and ICF. 2018. <i>Uganda Demographic and Health Survey 2016</i> . Kampala, Uganda and Rockville, Maryland, USA: UBOS and ICF.
Low birth weight	Proportion of births that are low birth weight (less than 2,500 grams)	Uganda Bureau of Statistics and ICF. 2018. <i>Uganda Demographic and Health Survey 2016</i> . Kampala, Uganda and Rockville, Maryland, USA: UBOS and ICF.
Early initiation of breastfeeding	Proportion of children breastfed within 1 hour of birth	Uganda Bureau of Statistics and ICF. 2018. <i>Uganda Demographic and Health Survey 2016</i> . Kampala, Uganda and Rockville, Maryland, USA: UBOS and ICF. Uganda Bureau of Statistics and ICF. 2012. <i>Uganda Demographic and Health Survey 2011</i> . Kampala, Uganda and Rockville, Maryland, USA: UBOS and ICF.
Exclusive breastfeeding for 6 months	Proportion of children under 6 months who are exclusively breastfed	Uganda Bureau of Statistics and ICF. 2018. <i>Uganda Demographic and Health Survey 2016</i> . Kampala, Uganda and Rockville, Maryland, USA: UBOS and ICF. Uganda Bureau of Statistics and ICF. 2012. <i>Uganda Demographic and Health Survey 2011</i> . Kampala, Uganda and Rockville, Maryland, USA: UBOS and ICF.



DESCRIPTOR	INDICATOR DEFINITION	DATA SOURCE
Nutrition (continued)		
Minimum acceptable diet	Proportion of children 6–23 months who are fed a minimum acceptable diet	Uganda Bureau of Statistics and ICF. 2018. <i>Uganda Demographic and Health Survey 2016</i> . Kampala, Uganda and Rockville, Maryland, USA: UBOS and ICF. Uganda Bureau of Statistics and ICF. 2012. <i>Uganda Demographic and Health Survey 2011</i> . Kampala, Uganda and Rockville, Maryland, USA: UBOS and ICF.
Safety and Security		
Positive discipline	Proportion of children 1–14 years who reported using only non-violent forms of discipline in the past month	Uganda Bureau of Statistics and ICF. 2018. <i>Uganda Demographic and Health Survey 2016</i> . Kampala, Uganda and Rockville, Maryland, USA: UBOS and ICF.
Inadequate supervision	Percentage of children under age 5 left alone or under the supervision of another child younger than 10 years of age for more than 1 hour at least once in the last week	Uganda Bureau of Statistics and ICF. 2018. <i>Uganda Demographic and Health Survey 2016</i> . Kampala, Uganda and Rockville, Maryland, USA: UBOS and ICF.
Children living in poverty	Poverty headcount ratio at \$1.90 a day, age 0–14 is the percentage of population age 0-14 living on less than \$1.90 a day at 2011 international prices.	World Bank. 2020. Poverty and Equity DataBank. Accessed from https://datbank.worldbank.org/reports.aspx?source=poverty-and-equity-database# . Last Accessed July 28, 2020.
Children covered by social protection systems	Effective coverage of child and family benefits as part of main social security programs and social protection	Data not available.
Policies		
Paid maternity leave	The country has a paid maternity leave policy or law	The Employment Act, 2006 (Act No. 6). <i>The Uganda Government Gazette - Acts Supplement No. 5, 2006-06-08, Vol. XCVIX, No. 36, pp. 1- 74</i> . Kampala: Republic of Uganda.
Paid paternity leave	The country has a paid paternity leave policy or law	The Employment Act, 2006 (Act No. 6). <i>The Uganda Government Gazette - Acts Supplement No. 5, 2006-06-08, Vol. XCVIX, No. 36, pp. 1- 74</i> . Kampala: Republic of Uganda.
Free antenatal and delivery care	Antenatal visits and delivery services are provided free of charge at public facilities	Nabyonga Orem J, Mugisha F, Kirunga C, Macq J, Criel B. 2011. "Abolition of User Fees: The Uganda Paradox." <i>Health Policy and Planning</i> , 26 (Suppl 2): ii41-ii51.
Free health care for children under-5	Child health services are free to all, or free for children under age-five under national health insurance schemes	Nabyonga Orem, Juliet, Frederick Mugisha, Christine Kirunga, Jean Macq, Bart Criel 2011. "Abolition of User Fees: The Uganda Paradox," <i>Health Policy and Planning</i> , 26 (Suppl 2): ii41-ii51, doi: 10.1093/heapol/czr065



DESCRIPTOR	INDICATOR DEFINITION	DATA SOURCE
Policies (continued)		
Free pre-primary education	Government provides free pre-primary schooling before primary school entry	World Bank. 2013. Systems Approach for Better Education Results Database: Early Childhood Development. Accessed from http://saber.worldbank.org/ on July 14, 2020.
Required birth registration	Law or policy requires registration of births	World Bank. 2013. Systems Approach for Better Education Results Database: Early Childhood Development. Accessed from http://saber.worldbank.org/ on July 14, 2020.
Multi-sectoral ECD strategy	Country has an explicit multi-sectoral ECD strategy	Ministry of Gender, Labor and Social Development (2016). <i>The National Integrated Early Childhood Development Policy</i> . Kampala: Republic of Uganda.
Laws protect the rights of children with disabilities and promote their participation and access to ECD services	Laws in place to protect the rights of children with disabilities and promote their participation and access to ECD services, including healthcare and ECCE	Ayisega & Nizeyimana. (no date). "Inclusion of Children with Disabilities in Early Childhood Care and Education: Coping in an Overstretched System," ILO Inclusion of People with Disabilities in Uganda Fact Sheet, accessed at https://www.ilo.org/wcmsp5/groups/public/---ed_emp/---ifp_skills/documents/publication/wcms_115099.pdf on July 28, 1010.
Ministry/agency tasked with national multi-sectoral ECD coordination	Country has a ministry/agency tasked with multi-sectoral ECD coordination at the national level	Ministry of Gender, Labor and Social Development (2016). <i>The National Integrated Early Childhood Development Policy</i> . Kampala: Republic of Uganda.
Regular coordination meetings at the sub-national level	Regular coordination meetings between the different implementing actors at the sub-national level	World Bank. 2013. <i>Systems Approach for Better Education Results Database: Early Childhood Development</i> . Accessed from http://saber.worldbank.org/ on July 14, 2020.
Health workers required to receive training in promoting ECD	Health workers required to receive training in delivering ECD messages (developmental milestones, childcare, parenting, early stimulation, et)	World Bank. 2013. <i>Systems Approach for Better Education Results Database: Early Childhood Development</i> . Accessed from http://saber.worldbank.org/ on 14 July 2020.



USAID ADVANCING NUTRITION

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