

ProjectTitle	ProjectCode	ProjectGroup	ProjectType	ProjectLoca tion	ProjCustTextValue 1	ProjectAct StartDate	ProjectActIs sueDate	IssueTitle	IssueFinding	IssueCategory	IssueUserCat egory3	RecommendationTitle	RecommendationText	EstimatedImpleme ntationDate
Uganda Country Programme Evaluation (2021-2025)	2825	Uganda CO	Country Programme Evaluation (CPE)	ESA	2821-2825	1/1/21	5/30/24	1. UNFPA should prioritise wide-ranging consultations during programme design and implementation, engaging stakeholders from national to district levels.	1. UNFPA should prioritise wide-ranging consultations during programme design and implementation, engaging stakeholders from national to district levels.	Accepted	High	Convene consultation meetings with national, district stakeholders including CSOs and marginalised groups to identify priority issues for new CPD and annual workplans	Convene consultation meetings with national, district stakeholders including CSOs and marginalised groups to identify priority issues for new CPD and annual workplans	12/31/2025
Uganda Country Programme Evaluation (2021-2025)	2825	Uganda CO	Country Programme Evaluation (CPE)	ESA	2821-2825	1/1/21	5/30/24	2. UNFPA should develop community-specific strategies that involve cultural leaders in districts with conservative attitudes towards family planning and SRHR.	2. UNFPA should develop community-specific strategies that involve cultural leaders in districts with conservative attitudes towards family planning and SRHR.	Accepted	High	Develop and implement evidence-based and gender-transformative community-based social behaviour change interventions to strengthen community-led mechanisms, foster enhanced social accountability, and provide community members, especially local opinion leaders, cultural and religious leaders, men and boys, and caregivers of young people with skills, to shift gender and social norms related to family planning, SRHR and GBV and harmful practices.	Develop and implement evidence-based and gender-transformative community-based social behaviour change interventions to strengthen community-led mechanisms, foster enhanced social accountability, and provide community members, especially local opinion leaders, cultural and religious leaders, men and boys, and caregivers of young people with skills, to shift gender and social norms related to family planning, SRHR and GBV and harmful practices.	12/31/2025
Uganda Country Programme Evaluation (2021-2025)	2825	Uganda CO	Country Programme Evaluation (CPE)	ESA	2821-2825	1/1/21	5/30/24	3. UNFPA should ensure structured coordination meetings with partners and local authorities, especially in refugee-hosting areas and remote districts, to optimise resources and service delivery	3. UNFPA should ensure structured coordination meetings with partners and local authorities, especially in refugee-hosting areas and remote districts, to optimise resources and service delivery	Accepted	High	Strengthen multi-sectoral coordination mechanisms at regional and district level, and support structured coordination meetings with partners and local authorities with a human capital development lens, especially in refugee-hosting areas and remote districts, to optimise integration, resource utilization and service delivery during programme implementation	Strengthen multi-sectoral coordination mechanisms at regional and district level and support structured coordination meetings with partners and local authorities with a human capital development lens, especially in refugee-hosting areas and remote districts, to optimise integration, resource utilization and service delivery during programme implementation	12/31/2025
Uganda Country Programme Evaluation (2021-2025)	2825	Uganda CO	Country Programme Evaluation (CPE)	ESA	2821-2825	1/1/21	5/30/24	4. UNFPA should institutionalize Continuous Quality Improvement (CQI) within HIV/SRH/GBV service integration.	4. UNFPA should institutionalize Continuous Quality Improvement (CQI) within HIV/SRH/GBV service integration.	Accepted	High	UNFPA shall support the implementation of the Health System and Service Integration Framework at national and sub-national levels to ensure that the Universal Health Coverage integrates a package of SRHR/HIV/GBV/TB/ mental health and nutrition. More specifically, UNFPA's response includes integration and expansion of district-level and community-based targeted approaches for CQI and HRI strengthening in all districts supported through UNFPA's 16th CPD. Ref: draft 16th CPD output and indicators: Increased availability, accessibility, and quality of equitable and integrated SRHR/HIV/GBV services, particularly for vulnerable and underserved populations, including adolescents, youth, and persons with disabilities, in both development and humanitarian settings. Performance indicators include: - Number of evidence-based policy dialogues and formal partnerships established with government, development partners, the private sector, or civil society to finance and advance national and global SRHR outcomes. - Proportion of institutional deliveries in UNFPA-supported districts. - Percentage of health facilities in target districts with the capacity and readiness to provide emergency obstetrics and newborn care services	UNFPA shall support the implementation of the Health System and Service Integration Framework at national and sub-national levels to ensure that the Universal Health Coverage integrates a package of SRHR/HIV/GBV/TB/ mental health and nutrition. More specifically, UNFPA's response includes integration and expansion of district-level and community-based targeted approaches for CQI and HRI strengthening in all districts supported through UNFPA's 16th CPD. Ref: draft 16th CPD output and indicators: Increased availability, accessibility, and quality of equitable and integrated SRHR/HIV/GBV services, particularly for vulnerable and underserved populations, including adolescents, youth, and persons with disabilities, in both development and humanitarian settings. Performance indicators include: - Number of evidence-based policy dialogues and formal partnerships established with government, development partners, the private sector, or civil society to finance and advance national and global SRHR outcomes. - Proportion of institutional deliveries in UNFPA-supported districts. - Percentage of health facilities in target districts with the capacity and readiness to provide emergency obstetrics and newborn care services	12/31/2026
Uganda Country Programme Evaluation (2021-2025)	2825	Uganda CO	Country Programme Evaluation (CPE)	ESA	2821-2825	1/1/21	5/30/24	5. Improve timeliness of funding disbursement to enhance service delivery	5. Improve timeliness of funding disbursement to enhance service delivery	Accepted	Medium	Review current financial management practices and procedures, and develop an action plan with time-bound actions and detailed guidance and SOPs to address current bottlenecks. This will ensure timely resource flows to implementing partners, thereby addressing periodic delays in funding disbursements.	Review current financial management practices and procedures, and develop an action plan with time-bound actions and detailed guidance and SOPs to address current bottlenecks. This will ensure timely resource flows to implementing partners, thereby addressing periodic delays in funding disbursements.	12/31/2025
Uganda Country Programme Evaluation (2021-2025)	2825	Uganda CO	Country Programme Evaluation (CPE)	ESA	2821-2825	1/1/21	5/30/24	6. Increase data investment for evidence-based programming	6. Increase data investment for evidence-based programming	Accepted	High	Strengthen national and district-level data infrastructure to improve real-time data generation, and use for evidence-based planning and equitable resource allocation.	Strengthen national and district-level data infrastructure to improve real-time data generation, and use for evidence-based planning and equitable resource allocation.	12/31/2026
Uganda Country Programme Evaluation (2021-2025)	2825	Uganda CO	Country Programme Evaluation (CPE)	ESA	2821-2825	1/1/21	5/30/24	7. Enhance maternal health services through health systems strengthening	7. Enhance maternal health services through health systems strengthening	Partially Accepted	High	As per the draft 16th CPD, UNFPA aims to increase the percentage of health facilities in target districts with the capacity and readiness to provide emergency obstetrics and newborn care services from the baseline of 12.0% to its target of 30%. UNFPA will achieve this through the continued strengthening of CEmONC's functionality, focusing on health system strengthening for operative obstetrics, referrals, blood transfusions, and quality improvement mechanisms for accountability. Additionally, advocate for the implementation of the newly adopted health human resource structure.	As per the draft 16th CPD, UNFPA aims to increase the percentage of health facilities in target districts with the capacity and readiness to provide emergency obstetrics and newborn care services from the baseline of 12.0% to its target of 30%. UNFPA will achieve this through the continued strengthening of CEmONC's functionality, focusing on health system strengthening for operative obstetrics, referrals, blood transfusions, and quality improvement mechanisms for accountability. Additionally, advocate for the implementation of the newly adopted health human resource structure.	12/31/2026

Uganda Country Programme Evaluation (2021-2025)	2025	Uganda CO	Country Programme Evaluation (CPE)	ESA	2021-2025	1/1/21	5/36/24	8. Implement tailored interventions and recruit culturally and linguistically appropriate staff to enhance SRHR access in refugee settlements	8. Implement tailored interventions and recruit culturally and linguistically appropriate staff to enhance SRHR access in refugee settlements	Partially Accepted	Medium	Support the accreditation process of qualified refugee health workers (especially midwives) and continue to utilise community volunteers who are culturally and linguistically competent to support the health workers and community health interventions across refugee settlements. We shall continue to implement tailored SRHR/SBCC interventions (e.g., multilingual IEC materials, community dialogues, and refugee-led support groups) to increase access and utilization of SRHR services by refugee populations.	Support the accreditation process of qualified refugee health workers (especially midwives) and continue to utilise community volunteers who are culturally and linguistically competent to support the health workers and community health interventions across refugee settlements. We shall continue to implement tailored SRHR/SBCC interventions (e.g., multilingual IEC materials, community dialogues, and refugee-led support groups) to increase access and utilization of SRHR services by refugee populations.	12/31/2026
Uganda Country Programme Evaluation (2021-2025)	2025	Uganda CO	Country Programme Evaluation (CPE)	ESA	2021-2025	1/1/21	5/36/24	9. Strengthen district health teams/systems, train community health workers, and foster partnerships with local authorities to sustain SRHR, GBV, and HIV prevention services	9. Strengthen district health teams/systems, train community health workers, and foster partnerships with local authorities to sustain SRHR, GBV, and HIV prevention services	Accepted	Medium	Support the scale-up and implementation of the National Community Health strategy, which aims to provide an integrated package of services on SRHR/GBV/HIV through engagement and advocacy for increased domestic allocation, private sector and ODA in national SRHR partner platforms, the Development Partner Group on Health, and Regional and District Level Health Coordination Platforms. Additionally, UNFPA will integrate district-level and community-based targeted approaches for CQI and HRI strengthening and expansion into UNFPA RMNCAH projects implemented under the 10th CPD.	Support the scale-up and implementation of the National Community Health strategy, which aims to provide an integrated package of services on SRHR/GBV/HIV through engagement and advocacy for increased domestic allocation, private sector and ODA in national SRHR partner platforms, the Development Partner Group on Health, and Regional and District Level Health Coordination Platforms. Additionally, UNFPA will integrate district-level and community-based targeted approaches for CQI and HRI strengthening and expansion into UNFPA RMNCAH projects implemented under the 10th CPD.	12/31/2025
Uganda Country Programme Evaluation (2021-2025)	2025	Uganda CO	Country Programme Evaluation (CPE)	ESA	2021-2025	1/1/21	5/36/24	10. Review existing and scale up effective social norm change interventions to address harmful social norms that drive tolerance of GBV and harmful practices and constrain uptake of SRHR services are required	10. Review existing and scale up effective social norm change interventions to address harmful social norms that drive tolerance of GBV and harmful practices and constrain uptake of SRHR services are required	Accepted	High	Conduct a review to improve and identify evidence-based indicators for social norm change interventions addressing GBV and SRHR. Then, scale up the most effective models across all districts of programme implementation, reaching community members (with a focus on adolescents, men, and community leaders) to reduce negative norms and values condoning SGBV and increase uptake of SRHR services.	Conduct a review to improve and identify evidence-based indicators for social norm change interventions addressing GBV and SRHR. Then, scale up the most effective models across all districts of programme implementation, reaching community members (with a focus on adolescents, men, and community leaders) to reduce negative norms and values condoning SGBV and increase uptake of SRHR services.	12/31/2025
Uganda Country Programme Evaluation (2021-2025)	2025	Uganda CO	Country Programme Evaluation (CPE)	ESA	2021-2025	1/1/21	5/36/24	11. UNFPA and partner MDAs should apply diagnostic tools, such as the Social Norms Exploration Tool (SNET) and the Getting Practical Toolkit, for designing and implementing social norm-shifting interventions.	11. UNFPA and partner MDAs should apply diagnostic tools, such as the Social Norms Exploration Tool (SNET) and the Getting Practical Toolkit, for designing and implementing social norm-shifting interventions.	Accepted	High	UNFPA and partner MDAs will train programme staff and implementing partners on the use of diagnostic tools such as the Social Norms Exploration Tool (SNET) and the Getting Practical Toolkit, and ensure that all newly designed or adapted social norm-shifting interventions within the programme integrate findings from these tools.	UNFPA and partner MDAs will train programme staff and implementing partners on the use of diagnostic tools such as the Social Norms Exploration Tool (SNET) and the Getting Practical Toolkit, and ensure that all newly designed or adapted social norm-shifting interventions within the programme integrate findings from these tools.	12/31/2026
Uganda Country Programme Evaluation (2021-2025)	2025	Uganda CO	Country Programme Evaluation (CPE)	ESA	2021-2025	1/1/21	5/36/24	12. UNFPA should consolidate programme reach within existing districts rather than extending into new areas, to balance geographical expansion and resource efficiency.	12. UNFPA should consolidate programme reach within existing districts rather than extending into new areas, to balance geographical expansion and resource efficiency.	Accepted	High	Conduct a programme footprint and resource mapping exercise to assess and determine the extent and resource needs for expansion of coverage, cost-effectiveness, and service quality within existing districts.	Conduct a programme footprint and resource mapping exercise to assess and determine the extent and resource needs for expansion of coverage, cost-effectiveness, and service quality within existing districts.	12/31/2026
Uganda Country Programme Evaluation (2021-2025)	2025	Uganda CO	Country Programme Evaluation (CPE)	ESA	2021-2025	1/1/21	5/36/24	13. Improve data collection and monitoring systems, to help identify underserved populations, and guide tailored, disability-inclusive and adolescent-focused interventions that bridge existing coverage gaps.	13. Improve data collection and monitoring systems, to help identify underserved populations, and guide tailored, disability-inclusive and adolescent-focused interventions that bridge existing coverage gaps.	Accepted	Medium	Support MOH and DLGs on upgrading data collection and monitoring systems (incl. HMIS and DHIS2 systems) and train district health and facility staff to integrate, analyse, and utilize disaggregated data on age, sex, disability, and location for identification of underserved populations, including boys, adolescent girls, and persons with disabilities (PWD), and guide tailored, disability-inclusive and adolescent-focused interventions to bridge existing coverage gaps.	Support MOH and DLGs on upgrading data collection and monitoring systems (incl. HMIS and DHIS2 systems) and train district health and facility staff to integrate, analyse, and utilize disaggregated data on age, sex, disability, and location for identification of underserved populations, including boys, adolescent girls, and persons with disabilities (PWD), and guide tailored, disability-inclusive and adolescent-focused interventions to bridge existing coverage gaps.	12/31/2026