



A pupil at Kalwana Primary School in Kassanda district washes her hands in a handwashing unit installed by UNICEF based on guidelines for safe water access during Uganda's Ebola outbreak.

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for every child

Humanitarian Action for Children

Uganda

HIGHLIGHTS

- Uganda continues to face multiple humanitarian risks, including disease outbreaks, high numbers of refugees, climate shocks (floods, droughts), food insecurity and high rates of malnutrition.
- More than 89,000 children aged 6–59 months and 10,000 pregnant or lactating women are projected to suffer from acute malnutrition in the Karamoja subregion between February 2023 and January 2024.¹
- UNICEF will provide life-saving integrated multisectoral humanitarian assistance to children, adolescents, women and girls and people living with disabilities through partnerships with government authorities at all levels and with non-governmental organizations.
- The UNICEF response is informed by gender analysis and accounts for the differentiated risks, needs and capacities of women, girls, men and boys.
- In 2024, UNICEF requires \$28.4 million to reach 1.2 million people (including 612,000 women and girls and 138,000 people with disabilities) with critical humanitarian assistance in Uganda.

KEY PLANNED TARGETS



954,955

children and women accessing primary health care



432,779

primary caregivers receiving infant and young child feeding counselling



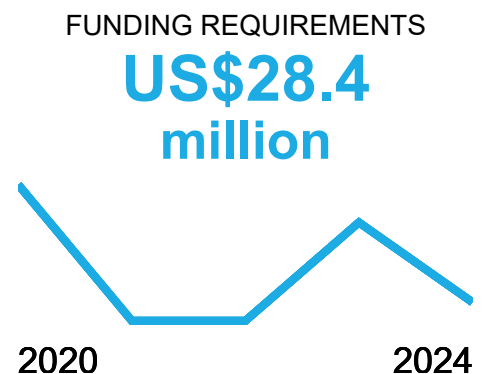
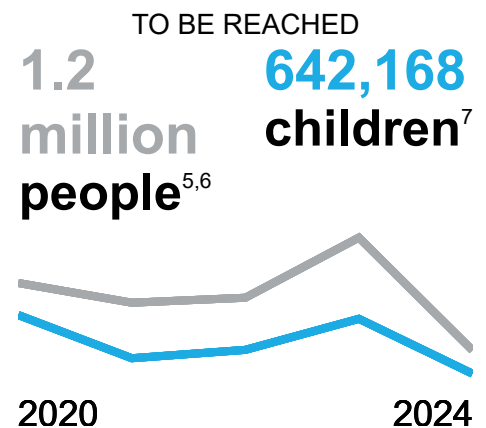
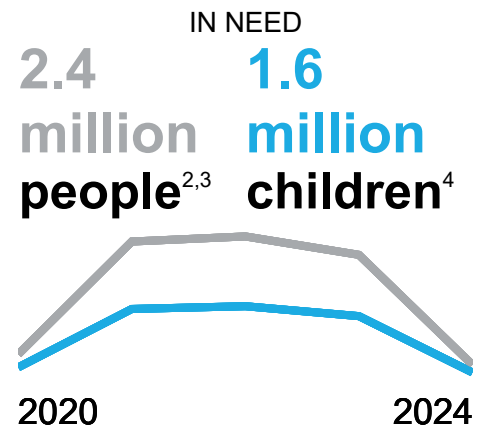
1.1 million

people accessing a sufficient quantity and quality of water



2.4 million

people reached with timely/life-saving information on access to available services



HUMANITARIAN SITUATION AND NEEDS

The humanitarian situation in Uganda remains serious as the country continues to face multiple risks including climate shocks, food insecurity, high rates of malnutrition, refugee influxes and such public health emergencies as Ebola virus disease, measles, cholera and other epidemic-prone diseases. More than 2.4 million people,⁸ including 1.6 million children,⁹ 1.3 million women/girls¹⁰ and 277,682 people with disabilities¹¹ are projected to need humanitarian assistance in 2024. The 2023 Integrated Food Security Phase Classification (IPC) report indicates a deteriorating nutrition situation in the Karamoja subregion, with more than 89,000 children aged 6–59 months and 10,000 pregnant or lactating women expected to suffer from acute malnutrition by January 2024;¹² 19,655 of these children will suffer from severe wasting.¹³

Uganda is the country in Africa hosting the largest number of refugees, with more than 1.5 million refugees, 57 per cent of them children.¹⁴ With a total of 69,965 arrivals in Uganda between January and August 2023, more refugee influxes are anticipated to arrive in 2024, including unaccompanied and separated children and people with disabilities. In refugee-hosting communities, access to education remains low, with the gross enrolment ratio for early childhood development (preschool) at only 48 percent, and for primary and secondary education at 88.5 percent and 12 percent, respectively.¹⁵ Out-of-school children, including girls, are exposed to protection risks. Floods cause damage to school infrastructure (latrines, classrooms, furniture and learning materials), disrupting access to quality learning. Food insecurity in the Karamoja subregion has also affected school attendance. The food security situation among the refugee population is deteriorating, with the recent IPC analysis projecting that more than 8,926 children will suffer from severe wasting in the coming months.¹⁶

Each year, floods impact nearly 50,000 people in Uganda.¹⁷ Between March and May 2023, more than 19,000 people¹⁸ were affected by floods, landslides, drought and heavy winds accompanied by hailstorms. Floods in the western, central and eastern regions of the country trigger the need for water, health, nutrition and food assistance. Every year, Uganda is also prone to public health emergencies that greatly affect communities, including children, women and people with disabilities. The residual social and economic impacts of the COVID-19 pandemic and the Ebola virus disease outbreak continue to exacerbate the already difficult situation. Currently, the country is actively responding to a cholera outbreak in Kayunga and Namayingo districts, which is predicted to worsen with the upcoming El Niño weather pattern. Other epidemic-prone diseases affecting Uganda include Rift Valley fever, malaria and measles/rubella.

SECTOR NEEDS



1.2 million
people in need of
primary health care¹⁹



781,080
people in need of
nutrition assistance²⁰



519,321
people in need of
GBV services²¹



1.6 million
children in need of
education support²²



1.8 million
people lack access to
safe water²³

STORY FROM THE FIELD



In Uganda's Karamoja subregion, more than half the population lives in absolute poverty. Annually, about 1,014 children under age 5 (out of a target population of 22,740) are expected to be referred to the nutrition ward at Moroto Regional Referral Hospital for treatment of severe malnutrition.

UNICEF's support to the nutrition crisis in Karamoja includes mass screening and detection, referral, integrated outreach programmes, supplying ready-to-use therapeutic food, therapeutic milk and medicines and carrying out water, sanitation and hygiene programmes. UNICEF provides mobile money cash-transfers and transportation vouchers to families with malnourished children to facilitate the children's timely treatment.

[Read more about this story here](#)

Ichumara Rachele eats ready-to-use therapeutic food at Moroto Regional Referral Hospital in July 2023. UNICEF supported activities to manage severe wasting in the Karamoja subregion.

In 2024, UNICEF will provide life-saving humanitarian assistance to affected populations in Uganda, including children, adolescents, women and girls and people living with disabilities. To do this, UNICEF will ensure strong links between humanitarian and development efforts, mainstream the prevention of sexual exploitation and abuse, integrate gender equality and gender-based violence risk mitigation and foster accountability to affected populations. UNICEF will align its humanitarian response in Uganda with the Comprehensive Refugee Response Framework, Grand Bargain commitments and the country programme document for 2021–2025, emphasizing disaster risk management and capacity strengthening at the district level.

UNICEF's nutrition strategy will provide a life-saving response and promote long-term resilience in regions affected by severe wasting, in line with humanitarian–development nexus approaches. The strategy addresses underlying causes, including diseases like malaria and diarrhoea, inadequate infant feeding practices, poor sanitation and limited access to clean water. The response will strengthen strategic links with social protection, child protection, gender-based violence, WASH and health programming. Working closely with the social and behaviour change team, the nutrition response will address harmful normative behaviours and existing discriminatory gender practices that contribute to child wasting.

In 2024, the health strategy will focus on scaling up life-saving interventions among the populations at risk, using a primary health care lens. UNICEF will undertake deliberate efforts to integrate into the health response cross-sectoral dimensions including accountability to affected population, social and behaviour change, prevention of sexual exploitation and abuse, gender-based violence risk mitigation and disability inclusion. In partnership with the Government and other key WASH stakeholders, UNICEF will strengthen the humanitarian-development nexus by twinning life-saving WASH response with climate resilience actions and strengthen community management of WASH facilities for sustainability through training of community structures. UNICEF will support the development of integrated solar-powered water systems to benefit institutions and surrounding communities, strengthening their resilience to the impact of dwindling water availability due to climate change.

In child protection, UNICEF will support the government in training, equipping and deploying community-based para-social workers for timely identification and referral of children with protection needs. UNICEF will provide critical education supplies during emergencies, while strengthening the capacity of school systems for emergency preparedness and response. The UNICEF social protection response aims to bolster household resilience to shocks while contributing to strengthening the national social protection system, including the social protection single registry. This will be achieved by supporting humanitarian cash transfer schemes in four refugee-hosting districts and in six districts affected by acute malnutrition in the Karamoja subregion.

Progress against the latest programme targets is available in the humanitarian situation reports: <https://www.unicef.org/appeals/uganda/situation-reports>

This appeal is aligned with the revised Core Commitments for Children in Humanitarian Action, which are based on global standards and norms for humanitarian action.



Health and HIV/AIDS

- **205,521** children vaccinated against measles, supplemental dose²⁷
- **954,955** children and women accessing primary health care in UNICEF-supported facilities²⁸
- **95,551** pregnant and lactating women living with HIV receiving antiretroviral therapy²⁹



Nutrition

- **46,560** children 6-59 months with severe wasting admitted for treatment³⁰
- **432,779** primary caregivers of children 0-23 months receiving infant and young child feeding counselling³¹



Child protection, GBViE and PSEA

- **83,047** children, adolescents and caregivers accessing community-based mental health and psychosocial support³²
- **66,643** women, girls and boys accessing gender-based violence risk mitigation, prevention and/or response interventions³³
- **74,846** people with safe and accessible channels to report sexual exploitation and abuse by personnel who provide assistance to affected populations³⁴
- **1,660** unaccompanied and separated children provided with alternative care and/or reunified³⁵



Education

- **109,486** children accessing formal or non-formal education, including early learning³⁶
- **27,400** children and adolescents accessing skills development programmes



Water, sanitation and hygiene

- **1,053,845** people accessing a sufficient quantity and quality of water for drinking and domestic needs³⁷
- **1,167,579** people accessing appropriate sanitation services³⁸
- **991,828** people reached with critical WASH supplies³⁹



Social protection

- **2,510** households reached with UNICEF-funded humanitarian cash transfers



Cross-sectoral (HCT, SBC, RCCE and AAP)

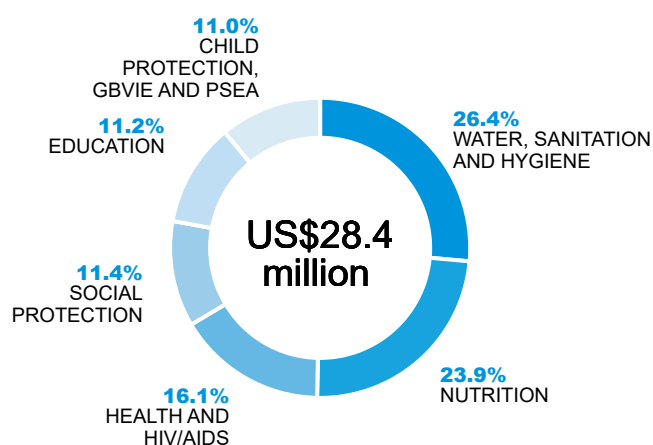
- **2,385,382** affected people (children, caregivers, community members) reached with timely and life-saving information on how and where to access available services⁴⁰
- **126,356** people engaged in reflective dialogue through community platforms
- **399,353** people sharing their concerns and asking questions through established feedback mechanisms

FUNDING REQUIREMENTS IN 2024

UNICEF appeals for \$28.4 million⁴¹ to reach 1.2 million people (including 612,000 women and girls and 138,000 people with disabilities) with critical humanitarian assistance in Uganda. Although the budget has decreased by 34 per cent compared with 2023 (due to the end of the Ebola virus disease outbreak), funding is still needed for risk monitoring and preparedness as the country continues to face significant risks of Ebola and other health outbreaks, given the Ebola alerts in neighbouring countries and population and refugee movements into Uganda. This appeal will enable UNICEF to support vulnerable communities affected by climate shocks including recurrent droughts, floods and disease outbreaks.

UNICEF requires \$6.5 million to respond to the drought-induced nutrition crisis in the Karamoja subregion, without which 19,655 severely wasted children are at risk of dying due to lack of access to treatment. The funding requirement for nutrition remains high in 2024 due to the increased cost of nutrition supplies, in particular ready-to-use therapeutic food. In addition, \$11.5 million will allow UNICEF to ensure a timely and integrated humanitarian response in the refugee-hosting districts. Without this amount, children in refugee-hosting districts will not be able to enroll in school, and nearly 9,000 children with severe wasting may die due to lack of access treatment services.

Furthermore, \$6.3 million will enable UNICEF to respond to disease outbreaks, including cholera and other outbreaks anticipated to affect 1.2 million people. In addition, it will enable Uganda to ensure adequate preparedness for Ebola virus disease and other disease outbreaks. Without sufficient and timely funding, UNICEF will be unable to deliver sustainable results in health, nutrition, WASH, child protection and education. Multi-year support will allow UNICEF to strengthen the resilience of communities, districts and line ministries across Uganda.



Sector	2024 requirements (US\$) ^{42,43}
Health and HIV/AIDS	4,587,173
Nutrition	6,791,402 ⁴⁴
Child protection, GBVIE and PSEA	3,118,907
Education	3,172,683
Water, sanitation and hygiene	7,515,236
Social protection	3,245,055
Total	28,430,456

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ENDNOTES

1. Integrated Food Security Phase Classification (IPC), Uganda: Karamoja IPC Acute Malnutrition Analysis, February 2023–January 2024, IPC, 15 June 2023.
2. In 2024, the number of people in need is significantly decreased due to end of the outbreak of Ebola virus disease. This figure is based on projected number of people affected by food insecurity (IPC report, 15 June 2023); floods (International Organization for Migration, multi-hazard report, 3 August 2023); health emergencies (Cholera Response Plan, 2023); refugees and the vulnerable population hosting the refugees (Uganda Comprehensive Refugee Response portal, August 2023). It includes 1.2 million women/girls and 246,560 people with disabilities (per Uganda Functional Difficulties Survey 2017, which notes a disability prevalence of 17 per cent among adults and 7 per cent among children). For health emergencies, the cholera outbreak was projected to be exacerbated by floods and to spread with an attack rate of 0.04/1,000 population. To avoid double counting, the districts with the highest numbers of people in need were selected across all the hazards and the number of people in need in different age groups were added (adults accessing sufficient and safe water (795,837), and children accessing formal and non-formal education, including early learning (1,589,545).
3. UNICEF is committed to needs-based targeting, which means covering the unmet needs of children; and will serve as the provider of last resort where it has cluster coordination responsibilities.
4. The figure represents the number of children in need of formal or non-formal primary and secondary education, including early learning. Of this figure, 810,668 are girls and 111,268 are children with disabilities (per the Uganda Functional Difficulties Survey 2017, which notes a disability prevalence of 7 per cent among children).
5. UNICEF is committed to needs-based targeting, which means covering the unmet needs of children; and will serve as the provider of last resort where it has cluster coordination responsibilities.
6. This figure constitutes close to 50 per cent of the number of people in need. The others will be covered by other sector members, including United Nations agencies, non-governmental organizations and the Government of Uganda. In 2024, the target is significantly lower due to end of the outbreak of Ebola virus disease, the main driver for the 2023 target. The current target is estimated based on the highest target of number of people accessing appropriate water and sanitation services. Of this figure 595,465 are women and girls and 132,272 are people with disabilities (per the Uganda Functional Difficulties Survey 2017, which notes a disability prevalence of 17 per cent among adults and 7 per cent among children).
7. The calculation is based on children under 18 years of age, representing 55 percent of Uganda's population based on the latest population projections for 2023 from the Uganda Bureau of Statistics. Of this figure, 327,506 are girls and 44,952 are children with disabilities.
8. Based on the projected number of people affected by food insecurity (IPC); floods (IOM), health emergencies (Cholera Response Plan, 2023), and refugees and the vulnerable population hosting the refugees (Uganda Comprehensive Refugee Response portal, August 2023).
9. Children constitute 55 per cent of the population according to the 2023 population projection, Uganda Bureau of Statistics.
10. Women and girls constitute 51 per cent of the population, Uganda Population and Housing Census, 2014.
11. Seven per cent of children and 17 per cent of adults live with disabilities in Uganda (Uganda Functional Difficulties Survey 2017).
12. IPC, Uganda: Karamoja IPC Acute Malnutrition Analysis, February 2023–January 2024, IPC, 15 June 2023.
13. Ibid.
14. Uganda Comprehensive Refugee Response portal, 2023.
15. Ministry of Education and Sports, Second Education Response Plan for Refugees and Host Communities in Uganda 2021/20-2024/25.
16. Uganda Refugee IPC Acute Malnutrition Analysis, 2023.
17. World Bank: Climate risk country profile: Uganda, World Bank, 2020, available at <https://www.preventionweb.net/publication/climate-risk-country-profile-uganda>.
18. IOM, Uganda Multi-hazard Infographic, 4 May 2023.
19. Calculated as 100 per cent of people affected by cholera and others and eligible for cholera response plus 100 per cent of all children under age 1 affected by cholera and others eligible for measles vaccination plus 100 per cent of all pregnant women affected by cholera eligible for goal-oriented antenatal care. Cholera projection figures are taken from the Ministry of Health Cholera Response Plan, 2023.
20. The number of pregnant women attending infant and young child feeding counselling during antenatal care is based on the Uganda Bureau of Statistics population projection for 2024. The population affected by malnutrition is based on IPC, Uganda: Karamoja IPC Acute Malnutrition Analysis, February 2023–January 2024, IPC, 15 June 2023.
21. The projected number of children (and caregivers) in need of mental health and psychosocial support is based on projections of food insecurity (IPC, 2023), floods (IOM, August 2023), health emergencies (Cholera Response Plan, 2023), refugees and the vulnerable population hosting the refugees (Uganda Comprehensive Refugee Response portal, August 2023) who will need child protection services.
22. The number of people in need is based on refugee school-age children 3–18 years and host community school-age children in refugee-hosting subcounties in 12 refugee-hosting districts. Source: Second Education Response Plan for Refugees and Host Communities in Uganda.
23. Estimated to be 50 per cent of the refugee population, guided by the UNCHR gap analysis for 2022; The number of people in need due floods is estimated to be 50 per cent of people affected by floods (based on the UNICEF report on anticipated impacts of El Niño, previous government and partner reports on the extent and impacts of flooding). The number of people in need due to health hazards is based on 50 per cent of affected population; 50 per cent of people are likely to lack access to WASH services during health emergencies, guided by the current epidemiological data for the cholera outbreak in Uganda and within the subregion.
24. This appeal is aligned with the revised Core Commitments for Children in Humanitarian Action, which are based on global standards and norms for humanitarian action.
25. UNICEF is committed to empowering local responders in humanitarian crises in a variety of ways. The revised Core Commitments made investing in strengthening the capacities of local actors in the humanitarian response a mandatory benchmark for UNICEF action. A more localized response will improve humanitarian action and is fundamental to achieving better accountability to affected populations.
26. Beyond the UNICEF targets for these interventions, other humanitarian partners are expected to reach the remaining children/families in need.
27. Constitutes 99 per cent of the number of people in need.
28. Calculated as 77 per cent of the number of people in need. This includes mainly women and children and 109,820 people with disabilities. The gap will be covered by the World Health Organization (WHO), the Ministry of Health and other health sector partners.
29. Calculated as 95 per cent of the people in need (100,580), based on estimated number of pregnant women living with HIV, which is based on an estimated pregnant women making up 4 per cent of total refugee and host community population; and on regional HIV prevalence data from the 2020 HIV survey.
30. Calculated as 46 per cent of the number of people in need. The gap will be covered by the Ministry of Health and other nutrition sector partners. In the refugee settlements, the gap will be covered by UNHCR and World Food Programme.
31. Calculated as 64 per cent of the number of people in need. The gap will be covered by the Ministry of Health and other nutrition sector partners.
32. Calculated as 16 per cent of the number of people in need. The gap will be covered by UNHCR, WHO, the Ministry of Gender, Labour & Social Affairs and other sector members.
33. Calculated as 21 per cent of the number of people in need. The gap will be covered by UNHCR, UNFPA, UN-Women, the Ministry of Gender, Labour & Social Affairs and other protection sector members.
34. Calculated as 18 per cent of the number of people in need. The gap will be covered by UNHCR, UNFPA, UN-Women, Ministry of Gender, Labour & Social Affairs and other protection sector members.
35. Calculated as 6 per cent of the number of people in need. The gap will be covered by UNHCR, sector members and the Ministry of Gender, Labour & Social Affairs.
36. Calculated as 9 per cent of the number of people in need. The gap will be covered by UNHCR, the Ministry of Education and Sport and education sector members.
37. Calculated as 60% of the PIN. The remaining gap will be covered by UNHCR, WASH Sector Members and the Government.
38. Calculated as 61 per cent of the number of people in need. UNHCR, the Government and WASH Sector members will cover the gap.
39. Calculated as 68 per cent of the number of people in need. UNHCR, the Government and WASH sector members will cover the gap.
40. The population targeted is higher than the total number of people/children to be reached because the target includes mass media outreach.
41. The funding requirement has decreased by 34 per cent mainly due to a decrease in targets as a result of the end of the outbreak of Ebola virus disease. However, the cost for nutrition remained high due to a 30 per cent increase in the price of ready-to-use therapeutic food, and the cost of delivering treatment services.
42. Thirty per cent of emergency response funding is dedicated to cross-sectoral areas as follows: social and behaviour change and accountability to affected populations, 10 per cent; disability inclusion, 5 per cent; PSEA, 5 per cent and gender programming, 15 per cent.
43. All sectors set aside 10 per cent of their total budget for social and behavioural change communication activities. The funding requirement for these activities will add up to \$2,314,387.
44. The cost of nutritional commodities (ready-to-use therapeutic food) has increased by 30 per cent, thus increasing the nutrition funding requirement substantially.