



**THE REPUBLIC OF UGANDA**

# **THE NATIONAL INTEGRATED EARLY CHILDHOOD DEVELOPMENT POLICY OF UGANDA**

**Ministry of Gender, Labour and Social Development**

**March 2016**







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## **Abbreviations and Acronyms**

<b>ACRWC</b>	-	African Charter on the Rights and Welfare of Children
<b>AIDS</b>	-	Acquired Immune Deficiency Syndrome
<b>AU</b>	-	African Union
<b>CFPU</b>	-	Child and Family Protection Unit
<b>CPC</b>	-	Child Protection Committees
<b>CRPD</b>	-	Convention on the Rights of People with Disabilities
<b>CwDs</b>	-	Children with Disabilities
<b>DOVCC</b>	-	District OVC Coordination Committee
<b>ECD</b>	-	Early Childhood Development
<b>ECDE</b>	-	Early Childhood Development and Education
<b>EFA</b>	-	Education for All
<b>EID</b>	-	Early Infant Diagnosis
<b>FIDA</b>	-	Uganda Association of Women Lawyers
<b>GOU</b>	-	Government of Uganda
<b>NIECD</b>	-	National Integrated Early Childhood Development
<b>IMCI</b>	-	Integrated Management of Childhood Illnesses
<b>MTCT</b>	-	Mother to Child Transmission
<b>NCC</b>	-	National Council for Children
<b>NCD</b>	-	National Council for Disability
<b>NCDC</b>	-	National Curriculum Development Centre
<b>NDP</b>	-	National Development Plan



<b>NSPPI</b>	-	National Strategic Program Plan of Interventions
<b>OVC</b>	-	Orphans and Other Vulnerable Children
<b>PwDs</b>	-	People with Disabilities
<b>SOVCC</b>	-	Sub-county OVC Coordination Committee
<b>SPSWO</b>	-	Senior Probation and Social Welfare Officers
<b>SWSCC</b>	-	Sub County Water and Sanitation Coordination Committee
<b>TTIs</b>	-	Teacher Training Institutions
<b>UDHS</b>	-	Uganda Demographic Health Survey
<b>UHRC</b>	-	Uganda Human Rights Commission
<b>UNCRC</b>	-	United Nations Convention on the Rights of Children
<b>UNESCO</b>	-	United Nations Education, Scientific and Cultural Organization
<b>UNICEF</b>	-	United Nations Children Fund

## **Foreword**

The Government of Uganda recognizes the critical importance of an Integrated Early Childhood Development (IECD) framework in ensuring children's rights to survival, protection, development and participation. These fundamental rights form a concrete path for the wellbeing of a child and are indeed a foundation for the country's future peace, security and prosperity.

ECD targets children from conception to 8 years and has been proven through various research to contribute to social, economic and human development, increase of workforce productivity, and poverty reduction.

As a signatory to the global and regional frameworks such as the United Nations Convention on the Rights of Children (UNCRC), Education for All (EFA), SDGs and standards on the rights of the child, Uganda is committed to using ECD as a platform for ensuring the fulfillment of the rights of children in the country.

The Government of Uganda is cognizant of the fact that effective ECD programming requires effective integration and harmonization of policies and programs across sectors and has therefore developed the National Integrated ECD policy of Uganda targeting children from conception to 8 years.

The responsibility for the successful implementation of the National Integrated ECD policy of Uganda lies with the Government sectors, civil society organizations, private sector, communities and families. All these stakeholders need to work together in a more effective and coordinated way to support the holistic development of Young children. I therefore call upon all sectors to embrace this policy with renewed commitment to enable the Ugandan children grow and develop to their full potential.

For God and my Country,



**JANAT B. MUKWAYA (HAJAT)**  
**MINISTER FOR GENDER, LABOUR AND SOCIAL DEVELOPMENT**

## **1 INTRODUCTION**

Integrated Early Childhood Development (IECD) is a comprehensive approach to policies and programs designed for children from conception to eight years of age, their parent and caregivers purposely to help the child grow and thrive physically, mentally, emotionally, spiritually, morally and socially. IECD includes a variety of strategies and a wide range of services to provide basic health care, adequate nutrition, nurturing and stimulation within a caring, safe and clean environment for children and their families. IECD therefore calls for multi-sectoral collaboration to fulfill these developmental needs of young children.

Early childhood is a special and crucial period during which the brain develops fastest, is most malleable, highly impressionable and most amenable to change. Environmental influences and supports especially responsive care, nurture, stimulation, adequate nutrition and health care have the greatest impact on the brain development.

Evidence from science indicates that if children are not given timely and adequate opportunities for good nutrition and adequate stimulation, they lose opportunities for good physical and intellectual growth that cannot be made up for at later stages. These impacts last long into adulthood and impacts on the health, behaviors and learning abilities of children as adults.

Program evaluation and research has demonstrated that high quality ECD programs enhances the child's language, emotional, intellectual and social skills which are essential for transitioning well and participating in formal schooling. Children with these skills and experiences are more likely to enroll on time, stay in school and perform well. In the long run, ECD reduces class repetition, school dropouts, and related costs of schooling and overall increases efficiency in education.

The combined attainments in health, nutritional, educational and social development during early childhood do not only generate benefits to individual children and families but also saves money for governments through better school achievements that reduce wastage in education, greater income and taxes from

skilled and economically productive individuals, healthy and responsible citizenship that reduces costs of ill health, anti-social behaviors and social inequities.

The Government of Uganda recognizes the importance of the early childhood development and has put in place programmes and interventions that enhance the growth and development of young children.

## **2 SITUATIONAL ANALYSIS**

### **2.1 Demographic Characteristics**

Demographically, the country has a population of 34.9 million people (Census, 2014), with an average annual growth rate of 3.03%, giving an estimated population of 42.4 million people by 2020. The average household size is 4.7 persons, with a Sex Ratio of 94.5 males per 100 females. An estimated 72% of the population live in rural areas as compared to 28% in urban centres. 49% of Uganda's population is under the age of 15 and with 18.5% of the total population being under-five. Children between the ages of 0-8 years were approximately 10.7 million.

### **2.2 Child Health**

#### **2.2.1 Mortality**

The child mortality trends suggest a need for more significant improvements. Whereas Neonatal Mortality Rate is estimated to have achieved the target of 23 deaths per 1,000 live births, it has stagnated at this level for a while. The outcome of this has been an improvement in the life expectancy at birth in Uganda, from 47 and 45 years in 2000/01 for females and males respectively, to 57 and 54 years by 2011, and estimated to have improved further since then (HSDP 2015/16). According to WHS estimates, the maternal mortality rate per 100,000 live births has reduced from 438/100,000 (UDHS 2011) to 360/100,000 (UNHS 2014). The Infant Mortality rate was estimated at 53 deaths per 1,000 live births in 2014, showing an improvement from 87/1000 live births in 2002. The under-five mortality rate was estimated at 80 deaths per 1,000 live births in 2014, an improvement from 156 deaths per 1,000 in 2002 **(NPHS 2014)**.

#### **2.2.2 Malnutrition**

Malnutrition still remains the underlying cause in nearly 60% of infant deaths (Uganda Nutrition Action Plan (UNAP) 2011 – 2016). Looking at vulnerability of children, it was estimated that 8 per cent of children in Uganda are critically vulnerable, 43 per cent are moderately vulnerable and a total of 4.7 million children

live in poor households and 8.7 million live in insecure non poor households. A good number of children whose number is not known at the moment are on streets especially in Kampala. This number needs to be surveyed and appropriate action taken to get rid of these children from the street by proper policy enforcement. The annual costs (losses) associated with child under nutrition are estimated at UGX 1.8 trillion (5.6% of Gross Domestic Product (GDP)) according to the Cost of Hunger report, 2012. Vitamin A deficiency has worsened from 19% to 38% (UDHS, 1995) and from 20% to 36% (UDHS, 2011) in children and women respectively.

### 2.2.3 Immunization

Indicator	Source	2010/11	2011/12	2012/13		2013/14		2014/15		HSSIP
% of Children <1 Yr. immunized with 3 <sup>rd</sup> doze of Pentavalent vaccine	HMIS	90%	85%	83% (M)	85% (F)	91% (M)	95% (F)	104.5% (M)	99.5% (F)	85%
				84%		93%		102%		
% of one Yr. old children immunized against measles	HMIS	85%	89%	86% (M)	83% (F)	85% (M)	88% (F)	92% (M)	88% (F)	95%
				85%		87%		90%		
Prevalence of fever in children under 5 Yrs. (%)	UDHS (2006)	40.9% (2005/06)		57% (2012/13)						

The table above shows the prevalence of fever in children < 5yrs old and the Percentage number of children (0-1) years immunized from 2010 to 2015 by Gender against DPT<sub>3</sub> and Measles respectively

### 2.2.4 Malaria

Despite national efforts such as mass distribution of long-lasting insecticide treated nets (ITNs), insecticide residual spraying, the use of appropriate diagnostics and effective anti-malarial therapy and integrated community case management, the malaria burden remains high. According to the Health Management Information System (HMIS) records, it is the major cause of outpatient and inpatient attendances accounting for 13.7% (in children under five), 29% among five years and above and 0.72% mortality in the 2013/14 FY.

## 2.2.5 HIV/AIDS

According to the Uganda AIDS Commission, 34% of those who want AIDS support services are not able to access them. However, Uganda has achieved a remarkable reduction in new HIV infections among children, achieving its National Priority Action Plan (NPAP) target for 2013. A considerable decline was observed in HIV incidence among children, from 27,660 in 2011, to 9,629 in 2013 as opposed to adults (134,634 in 2011 to 131,279 in 2013). Moreover, the number of AIDS-related deaths in children aged 0–4 years decreased by more than 50% from 100,000 between 2000 and 2012, while deaths in adolescents increased from less than 50,000 to over 100,000 during 2000–12 (UNICEF, Sitan 2015).

## 2.3 Socio-Economic Issues

### 2.3.1 Orphans and Vulnerable Children

The table below shows the orphan status for children 0-8 years as per 2014 household census.

Table: survival status of parents for children aged 0-8 years			
	Age		
	0-2	3-5	6-8
<b>Survival status of children</b>			
Both Alive	3,542,546	3,501,427	3,181,924
Mother Alive And Father Dead	48,261	99,900	147,634
Father Alive And Mother Dead	13,830	31,819	48,443
Both Dead	4,241	11,626	19,106
<b>Orphanstatus</b>			
Orphan	66,332	143,345	215,183
Non Orphan	3,542,546	3,501,427	3,181,924
<b>Have A Birth Certificate</b>			
Yes, Long Certificate	297,702	296,098	265,104
Yes, Short Certificate	761,674	829,010	789,810
No	2,549,493	2,519,655	2,342,187
	3,608,869	3,644,763	3,397,101

**Source: Housing and Population Census report 2014**

A Significant Proportion of Children are Vulnerable: Vulnerability of children remains primarily determined by the income-earning capacity of their parents/caregivers. It is estimated that 8 percent of children in Uganda are critically vulnerable, 43 percent are moderately vulnerable. A total of 4.7 million children live in poor households and 8.7 million live in insecure non-poor households.

The UNHS 2012/13 indicates that about 11.3 percent of the children in Uganda, corresponding to 2.24 million of the population below 18 years of age, had lost one or both parents. Out of these, 374,000 had lost both parents. Of the 7.2 million households in the country, 1.1 million had at least one orphan. Overall the total number of households with 1 orphan has increased from 47 percent to 53 percent, while those with 2 orphans decreased from 27 percent to 21 percent between 2009/10 and 2012/13. Up to 45 percent of OVC are under the care of older persons who usually have limited resources to provide for them, while about 77,430 OVC live in 28,800 child-headed households which have severe financial constraints.

In addition, up to 100,000 children live outside a protective family environment. These include 25,000 living in child-headed households, 62,000 living under residential care and 3,000 living on the streets. Due to lack of proper parental guidance, some of these children end up adopting detrimental coping strategies such as drug and substance abuse, transactional sex and involvement in criminal activities. The Ugandan Police Annual Crime Report shows that 16,120 children were victims of offences during 2013. The report indicates that 26% of all crimes in Uganda were related to defilement. On average 4,853 children are found to have gone through justice systems (remand homes and rehabilitation centres) annually after coming into conflict with the law (MGLSD data}.

### 2.3.2 Birth Registration

Have A Birth Certificate			
Yes, Long Certificate	297,702	296,098	265,104
Yes, Short Certificate	761,674	829,010	789,810
No	2,549,493	2,519,655	2,342,187
	3,608,869	3,644,763	3,397,101

Table showing birth registration for children 0-8 years

**Source: Housing and Population Census report 2014**



In the last few years there has been good progress on the proportion of babies registered within the first year of birth, with the figure rising sharply from 30% in 2011 to an estimated 60% in 2014 (UNICEF Uganda, 2015). This is largely the result of the introduction of electronic registration in all referral hospitals and at sub-county level using the Mobile Vital Registration System.

### **2.3.3 Special Needs Children**

According to the UNICEF, Sitan 2015, it is estimated that in Uganda there are approximately 2.5 million children living with some form of disability. These children are disproportionately vulnerable to mental and physical violence and sexual abuse through isolation, a lack of access to services and socio-cultural beliefs. A study in the four districts of Iganga, Jinja, Kampala and Masaka found that 90% of children with disabilities do not access or enjoy their rights to survival, development, protection and participation (Riche and Anyimuzala, 2014).

The 2009/10 Uganda National Panel Survey was the first national survey to examine the extent of disability in the country. Table 7 shows that at least 5.4% of all children are affected by some form of disability and that hearing difficulty is the most frequently cited form of disability. However, only 1.2% of children have disabilities classified as severe, defined as having significant difficulty or total inability in performing the specified function.

### **2.3.4 Child Labour**

605, 000 Children Engage in Child labour Without Attending School: A large number of school-going age children in Uganda are engaged in child labour. The National Labour Force Survey indicated that around 42 percent of children in rural areas were engaged in child labour compared to 17 percent in urban areas (National Labour force Survey 2011/12 in de Paz et al 2014). The Child Labour Report of 2013 indicates that 605,000 children were exclusively engaged in work without attending school of which 330,000 were boys and 275,000 were girls (See Figure 3). Girls are at a higher risk of withdrawal from school for purposes of supplementing family labour and income.

### 2.3.5 Water, Sanitation and Environment

According to UNICEF situation analysis of children, 2015, at least 30% of the rural population does not have access to a latrine and more than 70% of households have no soap and water for children to wash their hands, putting them at risk of disease (MoGLSD et al., 2014). Children in rural areas are about three times more likely to lack access to improved water sources than their urban counterparts (MoGLSD et al., 2014). Girls are disproportionately affected by limited access to water and adequate nutrition due to prevailing gender norms, which are particularly constraining for adolescent girls in rural areas.

Less than half of all districts will meet the national target for access to safe and functioning sanitation facilities (77% by 2015), but the country is not far from reaching standards in terms of average coverage of over 50% in the country (MWE, 2014). In general, access to safe water and sanitation is constrained by a range of economic and social factors, including the declining sector funding barely matching population growth; inadequate community ownership and participation in the operations and maintenance of water facilities; inadequate decentralized institutions capacity; and cultural beliefs and social norms.

### 2.3.6 Early Childhood Education

	Age Groups			
	0-2	3-5	6-8	0-8
Attending school in 2		1,057,277	2,769,841	3,827,118
Not attending school		2,587,495	627,266	3,214,761
Total		3,644,772	3,397,107	7,041,879

**Source: Housing and Population Census report 2014**

According to the 2014, household population census, children, 0-8 years attending school stand at 3,827,118 and children not attending school at 3,214,716.

The Education Act 2008 recognizes pre-primary education as the first level of education in Uganda. The ECD education sector policy recognizes four programmes; day care centers, home based centers, community centres and Nursery Schools. However, majority of these centers (about 80%) are in the hands of the private sector, and out of the financial reach of most Ugandans. There are very few children benefiting from institutionalized ECD centers, the rest sit at homes with their parents, yet the services given to the parents to be able to address the ECD needs of those Children are minimal.

Further, the Policy mandates the MoES to license and register ECD Teacher Training Institutions (TTIs), to ensure quality teaching and quality caregivers and finally quality ECD, however the findings from the MoES Assessment Study 2013, showed that only four (4) out of the 50 institutions inspected were licensed and registered by MoES. 91% of inspected ECD TTIs were not licensed and/or registered with the MoES. According to the Directorate of Education Standards (DES), most inspected TTIs did not meet the basic requirements and minimum standards by MoES and this affected the quality of learning, quality of the caregivers and subsequently the quality of ECD.

#### **2.4 Rationale for the NIECD Policy of Uganda**

At a policy level, the implementation of ECD and related services remain isolated and fragmented with Government responsibility for the provision of ECD services presently uncoordinated across various sectors. The IECD policy framework will harmonize the goals and strategies, across sectors, the different levels of government systems towards more coordinated, integrated and inclusive ECD. The roles of key players will be clearly highlighted and strategies to optimally use the ECD related financial, human, and material resources within and across sectors emphasized.

The NIECD policy of Uganda is overarching in guiding and governing the delivery of ECD services in Uganda along a life cycle. Essential ECD services include prenatal and postnatal care, early infant stimulation and education, parent education, health

and nutrition education and care, sanitation, and protection against abuse, exploitation and violence.

There are inequities in access to ECD services particularly for categories of children in difficult circumstances such as street children, orphans, those affected by HIV/AIDS and children in conflict situations. The NIECD policy of Uganda gives priority to inclusion of the most vulnerable children who especially stand to benefit from quality ECD services otherwise they will continue to lag behind in their development.

What parents and societies do to care for children during the early years has the lifelong impact on children's development. Parents and caregivers need to be supported to effectively provide care through supportive structures and systems, and an enabling environment. The policy has the family and community strengthening as a core program area and prioritizes engaging parents and families in their children's development and promotion of ownership programs.

The provision of ECD services to communities has been significantly attributed to non-governmental agencies and the efforts of parents and community-based organizations. The NIECD policy of Uganda will promote strategic partnerships and more effective coordination to harness and expand the vast knowledge, expertise and resources in ECD to compliment government efforts.

### **3 POLICY DEVELOPMENT CONTEXT**

The NIECD Policy of Uganda is anchored within international and national frameworks as highlighted below.

#### **3.1 International Frameworks**

This policy is anchored in the United Nations Convention on the Rights of Children (UNCRC-1989) which was ratified in 1990 by the government of Uganda (and its optional protocols, the Optional Protocol on the Sale of Children, Child Prostitution and Child Pornography (2000) and the Optional Protocol on the Involvement of Children in Armed Conflict (2000)). Thus, the lives of children will be reached through observing the four principles; nondiscrimination and protection, the best interest of the child, survival and development and the right to participation.

*In ensuring participation of children, the UN Convention on the Rights of the Child (Article 12) specifically emphasizes the right for a child to give an opinion and be listened to.*

The Government of Uganda also upholds the World Declaration on Education for All, 1990 which states that, " every person – child, youth and adult – shall be able to benefit from educational opportunities designed to meet their basic learning needs.

*The NIECD policy of Uganda is also aligned to the UN Sustainable Development Goals that were adopted by the UN Sustainable Development Summit on 25th September, 2015 specifically SDGs number 1 (end poverty in all its forms everywhere), 2 (end hunger, achieve food security and improved nutrition and promote sustainable agriculture), 3 (ensure healthy lives and promote well-being for all at all ages), 4 (ensure inclusive and equitable quality education and promote lifelong learning opportunities for all), 5 (achieve gender equality and empower all women and girls), 6 (ensure availability and sustainable management of water and sanitation for all), 10 (reduce inequalities within and among countries), 15 (protect, restore and promote sustainable use of terrestrial ecosystems, sustainably manage forests, combat desertification, halt and reverse land degradation and halt biodiversity loss), 16 (promote peaceful and inclusive societies for sustainable*

*development, provide access to justice for all and build effective accountable and inclusive institutions at all levels).*

Other international frameworks include; the UN Convention on the Rights of Persons with Disability (CRDP) (2007), key instrument on issues of PwDs and CwDs, The UN Convention for the Suppression of the Trafficking in Persons and of the Exploitation of Prostitution of Others (1949) and its Protocol (The Palermo Protocol, 2000), The Convention on the Elimination of all Forms of Discrimination Against Women (1979), The ILO Convention No. 138 on the minimum Age of Admission to Employment (1973) and the ILO Convention No. 182 on the Prohibition of the Worst Forms of Child Labour (1999), among others.

### **3.2 Regional Frameworks**

The African Charter on the Rights and Welfare of Children (ACRWC-1990), Africa fit for Children which envisions a continent where Children's full inviolable rights are promoted and protected by all, the Maputo Protocol, Protocol to the African Charter on Human and People's Rights on Rights of Women in Africa, among others.

### **3.3 National Legal Frameworks**

The major national frameworks include; the 1995 Constitution which provides for the rights of Children in Article 34 (1-7) and The Children (Amendment) Act, 2016 that emphasizes the protection of the child by upholding their rights, protection, duties and responsibilities. Other frameworks are: Birth and Death Registration (BDR) Act Cap 11 309, which calls for registration of all births and deaths of all Children, The Education Act (2008) which provides for free and compulsory primary education for all Children including OVC and CwDs, The Prevention of Trafficking in Persons Act (2009), The Disability Act (2003) and the Education Policy - UPE Policy (1997).

## **4 THE NATIONAL INTEGRATED ECD POLICY OF UGANDA**

### **4.1 Vision**

All children in Uganda from conception to 8 years of age grow and develop to their full potential.

### **4.2 Mission**

To ensure equitable access to quality and relevant ECD services for holistic development of all Children from conception to 8 years.

### **4.3 Goal of the policy**

The major goal of the policy is to provide direction and guidance to all sectors for quality, inclusive, coordinated and well-funded ECD services and programs.

### **4.4 General Objectives of the Policy**

The NIECD Policy of Uganda has three major objectives;

1. To harmonize existing ECD policy related goals, objectives, strategies and initiatives within and across all sectors.
2. To set, improve and align standards for ensuring access to well- coordinated, quality, equitable and inclusive ECD services within and across sectors.
3. To build and strengthen capacity of systems and structures to deliver integrated quality and inclusive ECD programs.

### **4.5 Policy Target Groups**

The NIECD policy of Uganda targets a number of stakeholders both primary and tertiary;

The Policy targets all children, including the vulnerable and marginalized, from conception to eight years of age. Within this age range, there are four definitive categories: conception to birth, birth to three years, three to six years, and six to eight years. Although these children all have the same holistic needs, which consist

of nutrition, health, nurture, protection, stimulation and training, the emphasis and focus of providing for these needs varies depending upon the age categories.

In order to provide services for children, the Policy must also target the primary caregivers of these children. These include parents and those who provide care for children in their absence, such as grandparents, other relatives and care providers in children's homes.

Communities also need to be targeted and empowered to support families and alternative caregivers to provide for the holistic needs of young children, and to safeguard their rights.



## **5 GUIDING PRINCIPLES**

The following principles will be observed and upheld by all stakeholders in the implementation of the Framework.

### **5.1 Holistic Development of the Child**

Programs shall be designed in such a way that all the developmental domains (physical, mental, social, emotional and linguistic) of a child are taken care of. These domains are interwoven, complementary and of equal importance. The development of one domain will affect another. Programs shall pay attention to the differentiated developmental needs across the four main age cohorts including prenatal and conception; zero to three; three to five; and six to eight years as well as parent education and support.

### **5.2 Equity in access to ECD services**

ECD programs shall be directed to all children irrespective of gender, geographical location, race, tribe among others. Equal emphasis will be given to the development of both girl and boy children and all forms of gender discrimination should be avoided. Children that are differently abled must also be given adequate opportunities to develop to their fullest potential.

### **5.3 Context specific**

Programs shall be age appropriate, flexible, sensitive, culturally relevant, affordable and customized to meet special needs of children such as those affected by HIV/AIDS, children and women in conflict situations and children with disabilities and street children among other groups.

### **5.4 Family and community engagement**

Families, parents and caregivers have the primary mandate for the care and upbringing of young children. Family is the first line of response in ECD service delivery. ECD programs should actively engage and empower families and communities to participate and own programs for the care and development of their young children.

## **5.5 Good governance and accountability**

Leadership and accountability of ECD shall be shared across sectors based on primary mandates. Clear roles and responsibilities will be stipulated for each sector with obligations to abide by the vision, mission, principles, outcomes put forth by the policy. Sectors will commit investment in terms of human, financial and material resources, resource mobilization, quality assurance and reporting and feedback mechanisms.

## **5.6 Rights based approach**

The Government's commitment to the UNCRC constitutionally mandates ECD as a right and obligates government to protect the rights of young children to security, basic nutrition, basic health care and basic education. All programs shall adopt the Human Rights based approach to programming and promote the children's basic right to survival, development, protection and participation and adhere to the basic CRC principals of non-discrimination, best interests of the child and participation.

## **5.7 Public - Private Partnership**

The effective planning and provision of the multidisciplinary needs of young children calls for a shared responsibility and accountability in fulfilling them. The PPP approach should therefore be central in the delivery of programs.

It requires mobilization, motivation, capacitating and fulfillment of roles and obligations by actors at all levels of government, in community and local leadership roles, and among parents and caregivers themselves. Community ownership and sustainability are essential characteristics of a high quality process.

## **5.8 Inclusive and complimentary service provision**

Programs shall be designed to offer a range of continuous, well- coordinated, complimentary and essential services along a continuum of care from conception to eight years.

## **6 POLICY ACTIONS**

In upholding the rights of children from conception to 8 years and their holistic development, the following areas will be the main thrust of this Policy.

### **6.1 Early Childhood Care and Education**

Government of Uganda will ensure that children's early learning at all the different stages of development is implemented and supported. This will focus on increasing access to equitable, quality, integrated, inclusive and developmentally appropriate early learning and stimulation opportunities and programs for all children below eight years in Uganda.

### **6.2 Food Security and Nutrition**

GOU shall ensure that all households are food secure and have proper nutrition for proper child growth and development. This will involve supporting nutritious food production, nutrition care within the household, and Community mobilization to promote the adoption of healthy nutrition behaviors and increased public awareness of the centrality of improved nutrition to community and national development to reduce prevalence of malnutrition among infants and young children, expectant and lactating mothers.

### **6.3 Child Protection**

GOU will ensure the protection of all children from conception to eight years and their caregivers to promote children's rights to survival, safety, protection and adequate care at family, community and national level. The Government will strengthen mechanisms for preventing and responding to abuse, exploitation and violence against children, 0-8 years and their caregivers.

### **6.4 Primary Health Care, Sanitation and Environment**

GOU shall ensure the right to survival and healthy growth of all young children in Uganda and ensure access to quality primary health care services and safe water and sanitation facilities at household, community and institutional levels for children and their households. The main thrust for this will be prioritizing stimulation, care

and development aspects in the traditional child health and survival programs to ensure children not only survive but also thrive.

Quality Maternal and Child health programs including water and Sanitation, Nutrition and environmental health will be scaled up to reach the most vulnerable children and families through family oriented and community based services.

### **6.5 Family strengthening and support**

The family will be taken as the first line of response and will be strengthened to provide adequate and holistic care for children 0-8 years. GoU will promote approaches that strengthen families and community capacities including structures and systems in order to expand equitable, effective, and high-quality community-based response to enhance holistic child development.

### **6.6 Communication, Advocacy and Resource mobilization**

The GOU shall increase its financial allocation to support programmes for young children and families to ensure quality, access and equitable distribution of services to all children, conception to eight years. Efforts will be directed to increasing awareness and commitment to ECD services and programmes by all stakeholders.

### **6.7 Multi sectoral Partnerships and Coordination**

GOU shall enhance Partnership and collaboration for effective IECD services in Uganda and set up mechanisms to streamline systems and ensure coordination for efficient delivery of services and programmes. GoU shall enhance mechanisms for partnerships in the provision of early childhood development services while increasing its capacity to coordinate and oversee the implementation of the services delivered by partners to ensure quality, accessibility and equity in provisions of services for all children.

## **7 INSTITUTIONAL ARRANGEMENTS FOR IMPLEMENTATION**

### **7.1 Stakeholders, Roles and Responsibilities**

The implementation of the NIECD Policy of Uganda will take a multi-sectoral approach with contributions and participation of stakeholders. The MGLSD shall lead the implementation of the Policy in partnership with the various entities listed below in accordance with their primary mandates. The specification of roles will ensure full accountability and minimize overlap and duplication of functions. Overall stakeholders are expected to:

- a) Mainstream ECD issues in their Policies, Plans and Budgets.
- b) Review and monitor implementation of appropriate policies and laws in line with the framework.
- c) Mobilize and ensure availability of funds to implement their sector based provisions in the framework.
- d) To Strengthen partnerships, coordination and monitoring for Effective IECD Services
- e) Prepare and share periodical plans and reports as per set guidance.
- f) Designate an officer responsible for ECD to support the implementation of the NIECD policy framework.

#### **7.1.1 Parliament**

- (i) Advocacy on ECD issues in Parliament and in Constituents.
- (ii) Lobby for resources (financial and otherwise) to implement the NIECD Policy Action Plan of Uganda.
- (iii) Monitor the progress of implementation of the NIECD Policy Action Plan of Uganda.

#### **7.1.2 ECD Technical Committee**

- (i) Provide overall Technical ECD guidance and oversee the implementation of the NIECD Policy Framework from the National, to the lower local governments.

- (ii) Advocate and lobby for inclusion of and appropriate planning and budgeting of ECD interventions in sector plans and budgets at all levels.
- (iii) Initiate new ECD programs and interventions and in collaboration with relevant stakeholders preside over launches and dissemination of ECD Research Studies.

### **7.1.3 The National ECD Secretariat**

- (i) Support the ECD Technical Committee through;
  - Preparation of national level multi-sectoral quarterly, Annual, Strategic Plans for implementation of the NIECD Policy of Uganda, to be integrated into sectoral and lower local government plans.
  - Preparation of integrated – multi-Sectoral Quarterly, Bi- Annual, Annual National ECD Reports for presentation to the Technical Committee and subsequent sharing with all stakeholders.

### **7.1.4 Government Agencies**

- **National Planning Authority (NPA)**

- (i) Integrate ECD in the long and medium term plans i.e. the National Vision and National development plans in the realization of Government objectives and goals.
- (ii) Provide overall guidance and technical support to other players including ministries, departments, agencies and local governments on ECD.
- (iii) Coordinate and harmonize ECD policy in development planning in the country.
- (iv) Support local capacity development for national planning to national and local bodies on ECD issues.

- **Uganda Bureau of Statistics (UBOS)**

- (i) Provide technical assistance to develop tools, collect and analyze ECD disaggregated data.
- (ii) Undertake studies in ECD to determine demographic patterns and provide data for planning.
- (iii) Manage ECD related statistics.

- **National Children Authority (NCA)**
  - (i) Advocate and lobby for adequate resources for effective implementation of the NIECD Policy Action Plan of Uganda by all stakeholders.
  - (ii) Conduct independent research on key ECD issues and disseminate findings to Parliament, Cabinet, Development Partners and other relevant Stakeholders.
  - (iii) Conduct independent monitoring and evaluation of the progress in implementation of the NIECD Policy framework and Action Plan and regularly share the findings with relevant Stakeholders.
  - (iv) Ensure mainstreaming of the ECD Policy provisions in stakeholders' plans and budgets from the National to the local government levels.
  
- **National Women's Council**
  - (i) Use the women council structures to mobilize women alongside issues of the ECD policy.
  - (ii) Use the council secretariat and structures to sensitize and train mothers on breast feeding and feeding of children among other care for development packages.
  
- **National Identification and Registration Authority**
  - (i) Train, create awareness and sensitize masses on Civil Registration.
  - (ii) Through the District Local Government structure, register births, deaths, adoptions and marriages for planning purposes and enjoyment of rights.
  - (iii) Spearhead the review of the Birth, Death and Registration (BDR) Act and development of the BDR Policy.
  - (iv) Maintain an up-to-date disaggregated database on BDR by age, gender and locality, among other parameters.
  
- **National Council for Disability**
  - (i) Advocate for early detection of disabilities in Children and advise on appropriate interventions among relevant stakeholders.

- (ii) Regularly conduct research and disseminate findings on key issues in CwDs between 0-8 years, for improved service delivery by government and other key stakeholders.
- (iii) Mobilize adequate resources and advise relevant stakeholders in the area of CwDs for effective implementation of the CwDs provisions in the NIECD Policy Framework.

#### **7.1.5 Ministry of Gender, Labour and Social Development**

- (i) Will be the lead agency in its implementation of the NIECD Policy
- (ii) Mobilize adequate resources and sensitize communities about ECD and implementation of the NIECD Policy Framework and other ECD Interventions.
- (iii) Build capacities of all stakeholders to effectively implement their roles in the Framework.
- (iv) Promote positive traditional cultural values and practices that promote healthy growth and development of all Children, including Children with Special Needs.
- (v) Ensure early detection and assessment of disabilities in Children and engage appropriate interventions through referrals.
- (vi) Spearhead advocacy and community mobilization on ECD and conduct studies and research to ensure further development of ECD.

#### **7.1.6 Ministry of Education and Sports**

- (i) Provide guidelines for establishment and management of Nursery Schools and other ECD Centres through.
  - a) Streamlining the licensing, classification and registration of ECD Centres.
  - b) Streamlining and harmonizing the training programs for caregivers and ensuring certification and accreditation of awards offered.
  - c) Setting basic requirements and minimum standards for establishing ECD Centres and ECD teacher education institutions.



- d) Setting clear Policy guidelines for managing the transition from pre-primary to primary education.
- (ii) Provide Policy guidelines on capacity building of Early Childhood Development and Education (ECDE) personnel.
- (iii) Develop guidelines for support / instructional materials and curricular for ECD.

#### **7.1.7 Ministry of Health**

- (i) Strengthen the health system to deliver quality maternal and child health services.
- (ii) Create an enabling environment for the implementation of maternal and child survival programs and provide appropriate technical and financial support.
- (iii) Ensure sufficient funding for maternal and newborn health especially at Health Centres IIIs and Health Sub Districts.
- (iv) Provide policies, standards and guidelines for quality integrated ECD Service delivery.
- (v) Development and disseminate IEC materials on ECD.
- (vi) Ensure early detection of disabilities in Children and in collaboration with key stakeholders provide appropriate interventions.

#### **7.1.8 Ministry of Finance, Planning and Economic Development**

- (i) Allocate and provide funds for ECD programs across all sectors.
- (ii) Facilitate the mobilization of international and local resources to support ECD programs and provide guidance in the creation of alternative funding strategies.
- (iii) Maintain essential up-to-date data on ECD for planning purposes.

### **7.1.9 Ministry of Water and Environment**

- (i) Mapping availability of water sources to all Health Facilities, ECD Centres, Schools and Communities.
- (ii) Ensure equitable access to clean and safe drinking water and water for sanitation to all Children including OVC, CwDs, Caregivers, ECD Centres, Schools, among others.
- (iii) Ensure effective capacity in water management/conservation at community level for sustainable and productive use.
- (iv) Ensure availability of toilets or other waste disposal mechanisms at all Health Centers, ECD Centres, Schools among others.
- (v) Ensure environment protection and conservation of land and water for the future generation.

### **7.1.10 Ministry of Justice and Constitutional Affairs**

- (i) Drafting and publishing legislation to give effect to Government policies (including National Integrated Early Childhood Development Policy)
- (ii) Providing legal advice and legal guidance to Government agencies, local governments and Ministries.
- (iii) Administer estates, safe guard interests of children and create public awareness of interests of children.

### **7.1.11 Ministry of Local Government**

- (i) Ensure integration of ECD programs in Plans and Budgets of all local governments
- (ii) Advocate for commensurate funding for ECD implementation in Local Governments
- (iii) Liaise with Development partners to sensitize the community about ECD and roles of different players
- (iv) Monitor the implementation of the NIECD Policy of Uganda at local government level

### **7.1.12 Ministry of Agriculture, Animal Industry and Fisheries**

- (i) Prioritize support for food production to meet the nutrition needs of pregnant mothers and children.
- (ii) Ensure appropriate management of food during post-harvest periods.
- (iii) Capacity building of all stakeholders in food production, storage and utilization.
- (iv) Provide technical advice to relevant stakeholders on proper crop and animal husbandry.

### **7.1.13 Ministry of Internal Affairs – Immigration Department**

- (i) Manage and regulate internal and cross boarder migration to protect children from trafficking.

#### **▪ Uganda Police Force**

- (i) Determine custody of a child in case of conflicts between spouses.
- (ii) Ensure child protection through enforcing laws in accordance to the 1995 Constitution of Uganda, Children Act and other laws relating to Children.
- (iii) Counseling and guidance to all child victims, witnesses and offenders.
- (iv) Community policing and awareness raising in communities, on laws relating to Children, crime prevention, tips to caregivers and Children, among others.
- (v) Undertake referrals in collaborations with sister departments; CID, FIDA, Legal Aid Clinic, among others.
- (vi) Handle cases involving juvenile offenders, witnesses and victims in a manner that respects, protects and upholds their rights.
- (vii) Network with other stakeholders whose nature of work brings the Uganda Police Force in direct contact with Children and women; Probation and Social Welfare Office, LCs, CSOs, among others.

#### **▪ Prison Services**

- (i) Ensure provision of appropriate facilities for pregnant inmates, or those who are nursing mothers.

- (ii) Build and maintain ECD facilities for Children born in custody and ensure adequate supply of necessities for survival, development, among others.
- (iii) Conduct massive sensitization on ECD and mobilize adequate resources for effective implementation of the NIECD Policy of Uganda.
- (iv) Ensure transparent fostering procedures and establish a clear foster monitoring Policy and system to ensure child protection and proper growth.

**7.1.14 Ministry of Disaster Preparedness**

- (i) Ensure relief agencies prioritize issues of expectant mothers and Children 0 - 8.
- (ii) Ensure timely and equitable access to response in case of emergencies and crisis to mothers and Children 0 – 8 years.

**7.1.15 Ministry of Works and Transport**

- (i) Support the design and construction of child friendly road networks from the National to Local Governments.
- (ii) Ensure quality and safe ECD physical facilities and proper access to ECD centers and other facilities and ensure proper provisions for CwDs.

**7.1.16 Ministry of Trade, Industry and cooperatives**

- (i) Support the Ministry of Agriculture in agro-business ventures to reach the policy beneficiaries.
- (ii) Ensure importation of goods that meet quality standards for young children

**7.1.17 Office of the Prime Minister (OPM)**

- (iii) Coordinate service provision by all sectors to monitor progress of programs.
- (iv) Manage and preserve children in case of disaster.
- (v) Oversee the implementation of the NIECD Policy of Uganda.

- (vi) Participate as good will ambassador in promoting ECD initiatives i.e.; initiatives for safe motherhood and child survival, among others.
- (vii) Support resource mobilization for promoting ECD issues.

**7.1.18 Ministry of Public Service**

- (i) Create and fill the post of ECD Officers at the local government level to oversee ECD issues.
- (ii) Support recruitment and motivation of social sector workers (teachers, community mobilizers, health workers).

**7.1.19 Ministry of Information, Communication and Technology**

- (i) Facilitate and ensure efficient and timely communication regarding ECD.
- (ii) Create awareness on the importance of investing in ECD interventions.

**7.1.20 Ministry of Lands, Housing and Urban Development**

- (i) Provide construction plans and supervise construction of quality ECD centres, recreation and physical facilities and ensure provisions for CwDs.
- (ii) Promote Housing and infrastructure planning that take into account the wellbeing of children, 0-8 years
- (iii) Strengthen access to land and other resources particularly for women and families

**7.1.21 Ministry of Defence**

- (i) Ensure peace and stability across the country so that children may fully enjoy their rights.
- (ii) Protect and Rescue children during conflict and coordinate with relevant bodies for rehabilitation and re-integration.
- (iii) Ensure that children and mothers in the barracks have access to an ECD services.

- **Directorate of Ethics and Integrity (DEI)**
  - (i) Mainstream ethical values in formal and informal educational sectors
  - (ii) Help build a value based system and values through early childhood care and education and family strengthening and community support.
  
- **Judicial Service Commission**
  - (i) Raise awareness on children’s rights and their welfare to the public
  - (ii) Inspection of courts to promote early childhood development
  - (iii) Publication of materials on child protection rights during ECD period
  - (iv) Legal awareness in remand homes, schools and prisons

#### **7.1.22 Media**

- (i) Raise awareness and educate masses on the importance of ECD and the significance of investing in the early years.
- (ii) Partner with government and CSOs and promote positive and sustained coverage on Children’s issues including CwDs.
- (iii) Increase gratis reporting on Children issues.

#### **7.1.23 Local Governments**

- (i) Oversee the Implementation of the NIECD Policy with the different levels of Local Governments
- (ii) Integrate and implement ECD programmes in Existing Plans in collaboration with relevant sectors and other government bodies
- (iii) Monitor the implementation of the NIECD Policy Framework at that level.
- (iv) Ensure Effective planning, budgeting & coordination of ECD programs & services and monitoring of agreed plans & activities
- (v) Strengthen the participation of civil society, the private sector and development partners in the implementation of ECD Programs.
- (vi) Use the powers outlined in the Local Government Act to establish ordinances and by-laws to support implementation of ECD programs
- (vii) Regulating the Delivery of ECD services & support the integration of existing ECD programs & services

#### **7.1.24 Civil Society Organizations (CSOs)**

- (i) Engage in advocacy to ensure that Children's rights are recognized, respected and promoted by all.
- (ii) Complement Government efforts in mobilizing resources and provide technical support to the implementation of the NIECD Policy of Uganda.
- (iii) Conduct research on key issues in ECD and share findings with Government and other stakeholders.
- (iv) Build the capacity all ECD stakeholders, including Special Needs caregivers and ensure equitable access to quality and relevant ECD services by all Children including CwDs.

#### **7.1.25 Faith Based Organizations / Religious Leaders**

- (i) Provide moral and spiritual guidance to ECD Centres and support capacity building for ECD programs.
- (ii) Support service provision for Children; early education, early detection of disabilities and appropriate interventions, health, legal, among others.
- (iii) Conduct advocacy and mobilize adequate resources for ECD programs.
- (iv) Support religious founded and managed ECD Centers, in terms of; Food, Clothing, Medical Care, among others.

#### **7.1.26 Academia, Research Institutions and Higher Learning**

- (i) Promote and undertake research in ECD to facilitate evidence based programming.
- (ii) Integrate ECD issues in training curriculum for purposes of accelerating appropriate human capital development and influencing behavioural change
- (iii) Offer higher training in ECD including personnel for special needs education.

### **7.1.27 Private Sector**

- (i) Develop and implement corporate social responsibility plans that integrate ECD Issues
- (ii) Enhance PPP for provision of quality ECD Services

### **7.1.28 Children**

- (i) Learn and also share knowledge and experiences with others.
- (ii) Listen to, respect yourself, your environment and also respect others.
- (iii) Be vigilant; speak out to relevant authorities in case of abuse and exploitation.
- (iv) Don't bully or harm another and show love and care to the OVC and CwDs.

### **7.1.29 Parents / Family and other Caregivers**

- (i) Provide enabling environment, to meet all the needs of the child in the different ECD age cohorts; 0-3, 3-6, 6-8, for holistic development.
- (ii) Do early brain stimulation for proper future development of the child.
- (iii) Act as reservoirs for culture and pass on the positive aspects to the Children
- (iv) Inculcate life skills, spiritual and moral values in all Children for character development.
- (v) Provide primary health care and ensure early detection and assessment of disabilities and engage appropriate interventions to mitigate the disability
- (vi) Ensure registration of the child at birth and death and acquire certificates in either case for all Children including CwDs.

### **7.1.30 Community (CBOs, Local Leaders, Opinion Leaders)**

- (i) Support and augment parents' efforts in providing for the needs of Children.
- (ii) Mobilize adequate resources to enhance Children's holistic development and to safeguard their rights.



- (iii) Set cultural and social norms to guide parents in socializing and inculcating spiritual and moral values and life principles in their Children.
- (iv) Initiate and manage community led ECD programs and services e.g.; community managed ECD centres, among others.
- (v) Support the early detection of disability and vulnerability and through referrals engage appropriate interventions to address them.
- (vi) Provide alternative and complementary approaches in care, health and nutrition of Children through referrals.

#### **7.1.31 Cultural Institutions**

- (i) Revive and conduct mass sensitization of positive traditional cultural values and practices that promote healthy growth and development of all Children, including those with special needs.
- (ii) Educate masses on creation, preservation and transmission of culture-oriented quality ECD child care.

#### **7.1.32 UN and Bilateral and Multilateral Development Partners, International and National CSOs, Foreign Missions**

- (i) Conduct advocacy for ECD and mobilize adequate resources for investment in ECD, implementation of the NIECD Policy of Uganda and other ECD Programs.
- (ii) Provide funding for ECD programs and activities at the National and Local Government levels.
- (iii) Provide technical support and build capacity of all stakeholders to implement the NIECD Policy and Action Plan of Uganda and other ECD Programs.
- (iv) Build and strengthen linkages and collaborations and partnerships at international, national and local governments.

## **8. IMPLEMENTATION FRAMEWORK**

A multi-sectoral and interdisciplinary approach will be used in the implementation of this comprehensive policy framework. This is necessitated by the fact that there are many stakeholders involved in service delivery for young children. This approach will enhance the provision of quality services to meet children's holistic needs and to safeguard the rights of all young children. From the comprehensive policy framework, a service standard guideline shall be developed.

### **8.1 Institutional Arrangements**

The Ministry of Gender, Labour and Social Development will house ECD Secretariat and will be the lead agency in implementation. The MGLSD will be responsible for providing policy direction, guidance and oversight as well as national coordination of the implementation, monitoring and evaluation.

The Ministry and sectors will be assisted by the following structures.

#### **8.1.1 National Level**

##### **8.1.1.1 The NIECD Policy Steering Committee**

The NIECD Policy of Uganda Steering Committee will be constituted by multidisciplinary stakeholders from different ministries. The role of the Steering Committee will be to provide overall ECD technical guidance and oversee the implementation of the NIECD Policy of Uganda from the National, to the lower local governments, advocate and lobby for inclusion of and appropriate planning and budgeting of ECD interventions in sector plans and budgets at all levels.

##### **8.1.1.2 The ECD Technical Committee**

The technical committee will function as the technical arm of the National IECD Policy of Uganda Steering committee. The ECD Technical Committee will consist of designated individuals in the area of ECD from ministries, government bodies, representatives from the UN and other Bilateral Organizations

### **8.1.1.3 The National ECD Secretariat**

The ECD Secretariat will be established within the MGLSD in the Department of Youth and Children to support the ECD Technical Committee. The National ECD Secretariat shall be charged with the day to day functions of coordination, management, administration and reporting of programs and activities intended to ensure smooth implementation of the NIECD Policy of Uganda framework.

### **8.1.2 Local Government Level**

Existing local government structures and systems at district, municipal, county and sub-county/division, parish and village levels will be utilized to implement the framework. All Local Government structures shall work in collaboration with relevant ministries, Government bodies and CSOs at the national level.

#### **8.1.2.1 District IECD Committee**

The District IECD committee, which will be composed of representatives from key sector district departments, CSOs and the private sector, will provide technical advice to the district technical planning committees and subsequently to the district council. The Committee will also monitor and evaluate ECD, carrying out reviews and providing technical advice to the lower-local government levels.

## **9 MONITORING AND EVALUATION**

A monitoring and evaluation framework shall be developed to effectively monitor and evaluate the implementation of this policy.

To complement the above, sectors shall incorporate ECD targets and indicators in their existing monitoring and evaluation systems, procedures and or tools for effective execution of this function.

At National level, the Ministry of Gender, Labour and Social Development will develop a performance measurement framework including indicators against which to assess the implementation of the NIECD policy of Uganda. At implementation level, each stakeholder will be responsible for developing its own expected results for each of the policy objectives. The ECD results should be measured and reported regularly through the normal performance assessment process. Accountability for the implementation of this policy rests within each of the cooperating partners and executing agencies.

## **10 FINANCING OF THE NATIONAL INTEGRATED EARLY CHILDHOOD DEVELOPMENT POLICY OF UGANDA**

The Government will ensure equity for all children through cost sharing mechanisms among key stakeholders: the Government, the Private Sector, civil society organizations, International and National Development Partners, local communities and families.

The Government support will include a commitment to expand current budgets in all the key ministries for integrated initiatives supporting children between the ages of 0-8 years as outlined in the NIECD Action Plan. The Government, acting through the various line Ministries and the National ECD Secretariat, will assume responsibility for securing sufficient funds to implement the National IECD policy of Uganda through collaboration with the Development Partners, Private Sector, Civil Society and Communities.

The MoGLSD and other sectors will engage in advocacy to mobilize resources and ensure the use of mobilized resources towards implementation of the National IECD policy of Uganda.

All responsible role-players will be held to account for the timely and efficient expenditure of allocated ECD funds through their reporting obligations to the Ministry of Finance, Planning and Economic Development. The financing framework is in line with the Medium Term Expenditure Framework (MTEF) of the Ministry and other Government Ministries, Departments and Agencies (MDAs) with Early Childhood Development roles. Additional financing is envisaged to be mobilized from Development Partners and communities in line with the Resource mobilization and Advocacy strategy.

## 11 GLOSSARY OF KEY CONCEPTS

**Early Childhood Development (ECD)** is a period of a child's life from 0-8 years, a process through which children grow and thrive physically, mentally, socially, emotionally and morally. ECD includes basically four stages; conception to birth, 0-3years, 3-6years, 6-8years.

**Orphans and Other Vulnerable Children (OVC)** refers to orphans, children affected by armed conflict, children abused, neglected or abandoned, children in conflict with the law, children infected and affected by HIV/AIDS or other diseases, children in need of alternative family care, children affected by disability, children experiencing various forms of abuse and violence, children in hard to reach areas, children living under the worst forms of labour, children living on the streets, refugee children, between 0-8 years.

**Children with Disabilities (CwDs)** means children from 0-8 years with challenges in seeing, hearing, communicating, mobility or moving, touching, learning, emotional, physical, among others which may hamper their proper and balanced growth and development.

**Caregiver** is a person who takes primary responsibility for the physical, mental and emotional needs and wellbeing of a child.

**Child Participation** refers to the active engagement of children in all issues that affect their lives. This includes informed and willful involvement of children no matter the age, sex, ability, race or ethnic group, in any matter concerning them either directly or indirectly.

**Multi-Sectoral Approach** is where actors from different sectors at different levels work together to address an issue or issues.



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