



Reproductive  
Health Uganda



# ANNUAL REPORT | 2018

A Member Association of



## **Accelerating universal access to sexual reproductive health services**

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# Acronyms

<b>AIDS</b>	Acquired Immune Deficiency Syndrome
<b>ANC</b>	Antenatal Care
<b>ASRH</b>	Adolescent Sexual & Reproductive Health
<b>ARV</b>	Anti-Retroviral
<b>BCC</b>	Behaviour Change Communication
<b>BEC</b>	Branch Executive Committee
<b>BTL</b>	Bilateral Tubal Ligation
<b>CBDAs</b>	Community-Based Distributors
<b>CCS &amp; PT</b>	Cervical Cancer Screening & Preventative Therapy
<b>CPR</b>	Contraceptive Prevalence Rate
<b>CSBAG</b>	Civil Society Budget Advocacy Group
<b>CSOs</b>	Civil Society Organisations
<b>CSW</b>	Commercial Sex Worker
<b>CYPs</b>	Couple Years of Protection
<b>DFID</b>	Department for International Development (UK)
<b>DFPA</b>	Danish Family Planning Association
<b>EC</b>	Emergency Contraception
<b>ECP</b>	Emergency Contraception
<b>e-IMS</b>	Electronic Information and Management System
<b>FBOs</b>	Faith-Based Organisations
<b>FGDs</b>	Focus Group Discussions
<b>FPAU</b>	Family Planning Association of Uganda
<b>GDP</b>	Gross Domestic Product
<b>GoU</b>	Government of Uganda
<b>GTA</b>	Gender Transformative Approaches
<b>GYM</b>	Gender & Youth Manager
<b>HC</b>	Health Centre
<b>HIV</b>	Human Immunodeficiency virus
<b>HLPF</b>	High-Level Political Forum
<b>HRBA</b>	Human Rights-Based Approach
<b>IA</b>	Internal Auditor
<b>IEC</b>	Information Communication & Education
<b>IGAs</b>	Income Generating Activities
<b>IPPF</b>	International Planned Parenthood Federation
<b>IUCD/IUD</b>	Intra-Uterine Contraceptive Device
<b>IUD</b>	Inter University Dialogue

<b>IUD</b>	Intra-Uterine Device
<b>LFA</b>	Logical Framework Approach
<b>LPS</b>	Life Planning Skills
<b>MC</b>	Medical Coordinator
<b>MDGs</b>	Millennium Development Goals
<b>M&amp;E</b>	Monitoring & Evaluation
<b>MoH</b>	Ministry of Health
<b>MoES</b>	Ministry of Education & Sports
<b>MoLGSD</b>	Ministry of Gender Labour & Social Development
<b>NAP</b>	National Adaptation Plan
<b>NAWMP</b>	Network of Women Ministers & Parliamentarians
<b>NCDC</b>	National Curriculum Development Centre
<b>NEC</b>	National Executive Committee
<b>PAC</b>	Post Abortion Care
<b>PEs</b>	Peer Educators
<b>PFC</b>	Programmes & Finance Committee
<b>PIASY</b>	Presidential Initiative on AIDS Strategy to Youth
<b>PME</b>	Participatory Monitoring & Evaluation
<b>RH</b>	Reproductive Health
<b>RHU</b>	Reproductive Health Uganda
<b>RMA</b>	Resource Mobilisation and Awareness
<b>RFSU</b>	Swedish Association for Sexuality Education
<b>SAAF</b>	Safe Abortion Action Fund
<b>SDPs</b>	Service Delivery Points
<b>SE</b>	Sexuality Education
<b>SRH</b>	Sexual and Reproductive Health
<b>SRHR</b>	Sexual and Reproductive Health and Rights
<b>STI's</b>	Sexually Transmitted Infections
<b>UDHS</b>	Uganda Demographic and Health Survey
<b>UFPC</b>	Uganda Family Planning Consortium
<b>UNFPA</b>	United Nations Populations Fund
<b>VHTs</b>	Village Health Teams
<b>VTIs</b>	Vocational Training Institutions
<b>YAM</b>	Youth Action Movement
<b>YFS</b>	Youth Friendly Services
<b>YEP</b>	Youth Empowerment Project
<b>YETA</b>	Youth Empowerment Through Agriculture



## About US

**Reproductive Health Uganda (RHU) is an indigenous, voluntary, not-for-profit organisation registered under the Trustee Incorporation Act of Uganda. RHU was founded in 1957 as Family Planning Association of Uganda (FPAU) and pioneered family planning in the country.**

RHU is a fully registered non-governmental organisation under the NGO Registration Act Chapter 113, certificate number S5914/255.

We are affiliated to the world's largest Sexual Reproductive Health and Rights (SRHR) organisation, the International Planned Parenthood Federation (IPPF).

RHU rebranded in 2007 to accommodate the broader and holistic sexual reproductive health and rights. We focus on the poor, vulnerable and hard-to-reach people with keen interest on young people.

We complement government efforts to increase access to SRHR information and services and our interventions are aligned to international and national development plans including; the Uganda Vision 2040, the National Development Plan II 2016–2020, the Health Sector Strategic Development Plan 2015/16-2019/2020, the Costed Implementation Plan for family planning 2015-2020, the Sustainable Development Goals (SDGs), the Africa Union Continental Policy Framework on SRHR, among others.



### Our Vision

A Uganda where everyone's SRHR are fulfilled and protected without discrimination



### Our Mission

To champion, provide and enable universal access to rights-based SRHR information and services to vulnerable and under-served communities especially young people

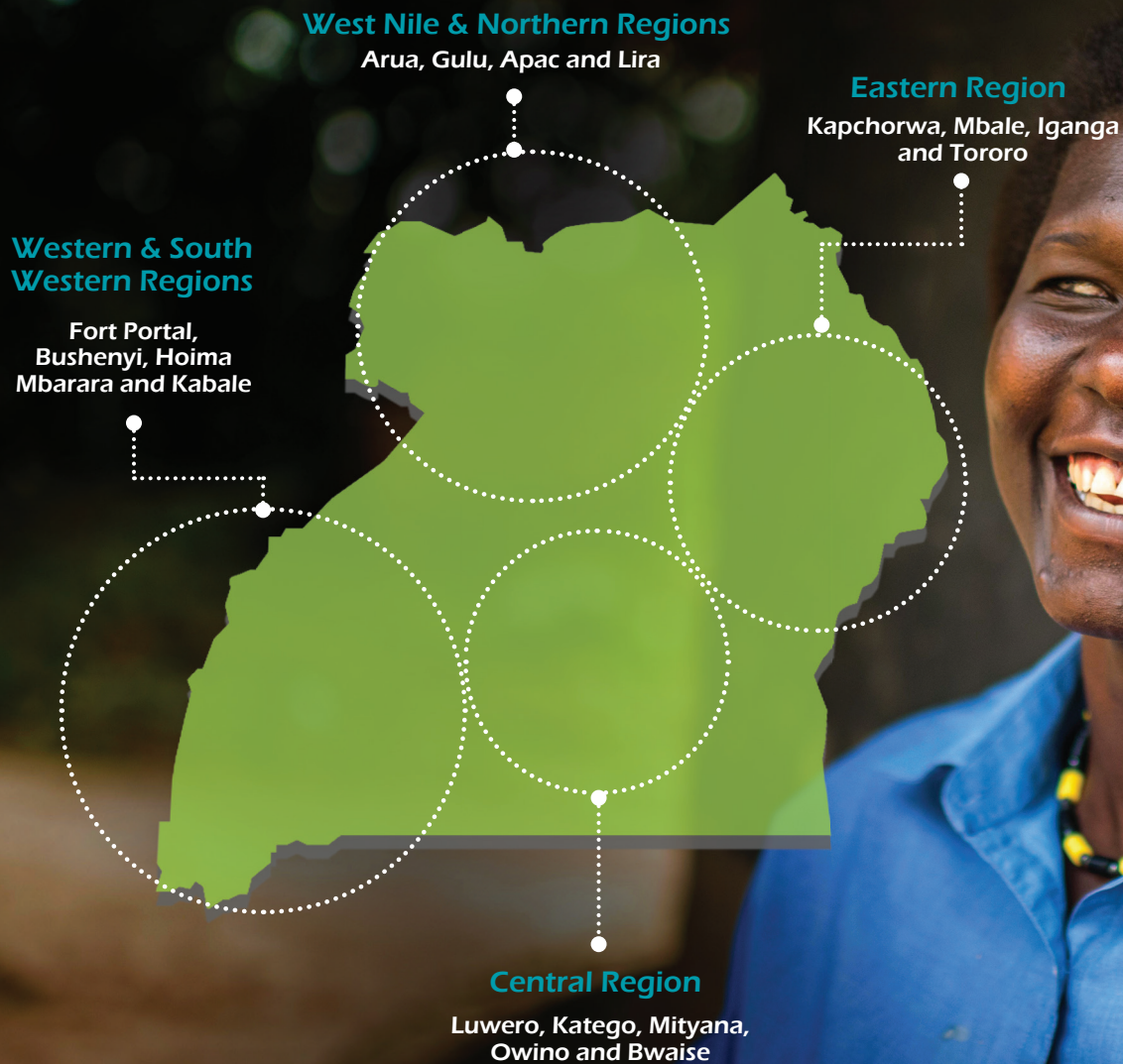


### Our Values

Voluntarism,  
Rights Based,  
Integrity,  
Choice,  
Result Oriented



# RHU Clinics





## Word from the National Chairperson

I am greatly honoured to present the Reproductive Health Uganda Annual Report 2018. Being the third year of implementing our Strategic Plan 2016 - 2022, the report outlines RHU's main interventions under the four outcome areas of; Advocacy, Young People Access, Service Delivery, and Organisational Sustainability and Accountability. We also highlight the main achievements, over this period.

We layout how resources mobilised by RHU from donors and those generated internally have been utilised to reach different beneficiaries with SRHR information and services at individual and community level, among other interventions.

• Another highlight in this reporting period was when Reproductive Health Uganda emerged the winner of the 2018 Financial Reporting (FiRe) Award Not-for-Profit Organisations category.

One of the major highlights of the period was the visit of the new Director General of the International Planned Parenthood Federation (IPPF), Dr Alvaro Bermejo, on his first visit to an IPPF office other than the Central Office, following his appointment to this position. It was a great honour for the organisation to be the first among the over 140 IPPF member associations to host the Director General.

This contributed to increasing the organisation's visibility as his visit was covered on major news outlets in the country and on different social media platforms.



The FiRe Awards are organised by the Institute of Certified Public Accountants of Uganda (ICPAU), Capital Markets Authority (CMA) and Uganda Securities Exchange (USE). This was the highest award the organisation has attained so far in those competitions. This continues to enhance our image as a credible and accountable organisation.

• Talking of accountability and credibility, in 2018, we received the Accreditation Certificate meaning that we passed all the 49 International Planned Parenthood Federation (IPPF) standards. IPPF's accreditation system is a formalised peer review that aims to ensure that all the Federation's Member Associations meet and comply with 49 essential

**“ I wanted to visit an IPPF member association [MA]... and RHU was the model MA. The power of the IPPF brand is because of the work RHU is doing on the ground”**

**Dr Alvaro Bermejo, Director General, IPPF**

membership standards. By upholding these standards, each Member Association is able to demonstrate its commitment, as well as be able to show how it adheres to these commitments – the 10 principles of membership to IPPF.

The principles, that have 49 standards, include: Open and democratic, Well-governed, Strategic and progressive, Transparent and accountable, Well-managed, Financially healthy, A good employer, Committed to results, Committed to quality, and A leading non-governmental organisation in the country.

This is checked and verified through an accreditation review process which takes place every five years. We celebrated yet another milestone in 2018.

In 2018, RHU revitalised its efforts to recruit more volunteers, and also involve them in resource mobilisation under the

African Citizens' Initiative (ACI). The goal of the ACI is to empower volunteers to take part in a peer-to-peer fundraising programme to raise financial support for reproductive health programmes. I, therefore, take this opportunity to invite you to join this cause by first of all signing up as an RHU volunteer and then supporting this initiative.

All these efforts including other deliberate fundraising interventions with support from IPPF and other local and international partners bore fruit, as RHU's income in 2018 increased from **UGX 20,530,618,000** to **UGX 26,486,063,000** representing a **29%** increase.

Meanwhile, in order to comfortably accommodate the staff increase resulting from the additional projects and interventions, RHU acquired an additional home where part of our growing team is yet to move into this coming year 2019.

As I conclude, on behalf of the National Executive Committee I would like to express my gratitude and appreciation to the RHU staff, governance and all volunteers who have played a pivotal role in the achievements that you will see in this report.

Last but not least, is to appreciate the Ugandan government, our donors and partners who have enabled us to reach such heights through providing a conducive environment and resources needed to reach the vulnerable women, men and young people with the much needed sexual reproductive health information and services

Thank you and I hope you enjoy reading this report.



**Hon. Rosemary Seninde**  
Chairperson,  
National Executive Committee





## Message from Executive Director

The year 2018 was a great year that involved a lot of learning, growth and tremendous progress for the organisation. This year we continued pursuing our mission of reaching the most vulnerable and underserved communities. To do this we scaled up our work to the vulnerable populations ranging from refugee settlement camps to key populations that include sex workers in slum areas around Kampala.

As a response to the national humanitarian call and the increased numbers of refugees entering the country, the need for sexual reproductive health (SRH)- including gender-based violence information and services was eminent. Most of the players have interventions that include water and sanitation, malaria, food aid and so on, but few offer sexual reproductive health information and services. This is where RHU has come in to provide such (including gender-based violence) services and information. Last year we had SRHR interventions in refugee settlements and camps including; Bidibidi, Rhino camp, Imvepi, Palabek, Palarinya, Lamwo, Rwamwanja, Kyaka II, Kyangwale, Nakivale among others with over 125,550 SRHR services being offered.

Apart from service delivery and information, RHU continued to work with the government and other civil

society organisations in the review and implementation of government policies. The launch of the National Sexuality Education Framework was the highlight of our partnership as a lead CSO in the development and official launch of the framework. This legislation, to streamline the provision of sexuality education to young people in school was long overdue.

The recognition of RHU from the Minister of Education and Sports, and the First Lady of Uganda, Hon. Janet Kataha Museveni, during the launch of the framework was a reminder and a highlight for me and a moment for us to savour. Our work is creating real impact not just at the grassroots but the impact is felt at the highest level of leadership too and this recognition is testimony to this.

Another highlight of 2018 was organising the Inter-University Dialogue (IUD) which brought together many young people

**Six**  
 New Projects secured in 2018. These include; ASRHR at the fore, PROMISE-Uganda, She Decides, SST, JTF and the WISH2ACTION projects

from institutions of higher learning to interface with their peers and with political and policy makers, to discuss pertinent aspects of sexual reproductive health and rights so as to deepen their understanding and reach common ground.

The other critical area that we continued to strengthen was the integration of Sexual Gender-Based Violence [SGBV] interventions in our work and providing psychosocial support to survivors of GBV. Through partnerships, with other organisations and institutions, we successfully linked a number of GBV survivors to legal aid. Our partnership with the local leaders and the law enforcement team also yielded untold results in our areas of implementation.

We have also extended our influence on the environment sector and climate change. From the understanding of family planning and population dynamics and their impact on the environment, we have been creating awareness in communities around Kampala and Bududda districts about the effect and relationship between family planning and climate change.

We engaged young people in tree planting and alternative sources of energy such as making bricks while passing on sexual reproductive health and rights information and providing health services especially family planning.

In addition, through the Youth Enterprise Through Agriculture (YETA) project, we have empowered young people and trained them on governance, leadership, life skills and sexual and reproductive health. This is in addition to providing them with income generation projects including; piggy bank and tailoring among others.

Over 2018, the organisation increased its resource mobilisation efforts as well as developing new partnerships and alliances. As a consequence, and with the assistance of IPPF, two large service delivery initiatives; the SheDecides and the WISH2 ACTION projects came into operation, to try and address the gap in overall sexual reproductive health service delivery.

On the regional and global scene, we greatly increased our visibility at the international level during the International Conference on Family Planning held in Kigali in November 2018. During the conference, we shared our best practices and learning through more than 10 abstracts from RHU staff that were approved and presented at this international platform.

We also engaged in the African regional Dialogue Enhancing Gender Equality and Rights; the Five-Year Review of the Addis Ababa Declaration on Population and Development (AADPD) in Ghana; the High-Level Political Forum in New York; COP24 Annual UN Climate Conference Poland, among others.

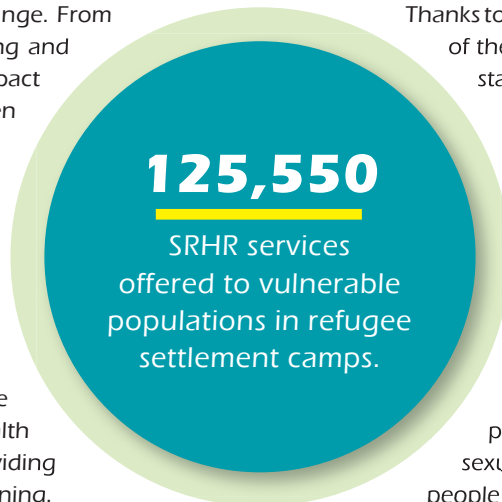
Thanks to the good leadership and governance of the board and the tireless efforts of the staff and management of RHU, we have been able to achieve all this and more.

I take this opportunity to appreciate the government of Uganda through the Ministry of Health, Ministry of Education and Sports, Ministry of Gender, Labour and Social Development and other line ministries that have accepted to partner and work with us to extend sexual reproductive health services to the people of Uganda.

We are not yet exactly where we want to be, but I believe we are on the right track and together we move towards a “Uganda where everyone’s sexual reproductive health and rights are fulfilled and protected without discrimination.”



**Jackson Chekweko**  
Executive Director



## RHU in 2018

# Using innovative approaches to enhance the SRH policy, information and service delivery environment

This annual report is a summary of the different interventions, approaches and activities implemented by Reproductive Health Uganda (RHU) to reach those most in need of sexual reproductive health and rights (SRHR) information and services. The report outlines the main interventions, strategies and achievements in 2018, guided by the four strategic plan outcomes: Advocacy, Young People Access, Service Delivery and Accountable and Sustainable Organisation.

The report also highlights how the organisation can be sustained benchmarking on the RHU sustainability policy 2015 and how the resources mobilized were used for the different interventions over this period.





# Advocacy

# Advocacy: For a conducive SRHR policy environment

For a conducive SRHR policy environment, RHU conducts advocacy efforts aligned with the Strategic Plan Outcome 1: 40% of the districts in Uganda implementing at least three SRHR policies which have two priority areas.

## Strategic Priority Area 1:

Engage in SRHR policy advocacy including dissemination and popularisation among the technical, political, cultural and religious leaders in at least 20% of the districts by 2022

## Strategic Priority Area 2:

Empower communities to engage in social accountability for the fulfilment and protection of their SRHR in 20% districts by 2022

RHU conducts advocacy at district/subnational, national, regional and global levels. At the subnational level, RHU engaged communities, leaders, opinion makers, etc. in more than 30 districts.

## Our Approaches

- Evidence generation
- Policy analysis and budget tracking
- Use of the AFP SMART- targeting a specific decision-maker for policy change and/or funding
- Dissemination, popularisation and support implementation of key SRHR policies
- Social accountability- empowering communities to hold duty bearers accountable for the fulfilment and protection of their sexual reproductive health rights
- Media engagements
- Partnership and/or capacity building
- Engaging key influencers

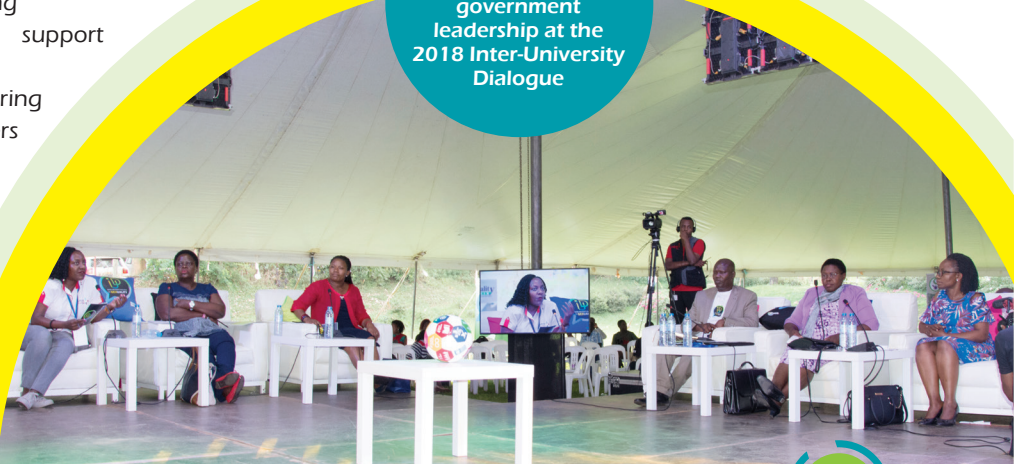
## Key Achievements in 2018

- Contributed to the development and launch of the National Sexuality Education framework (NSEF)
- Participated in the review of the School Health Policy, which was forwarded to the Ministry of Health for approval
- Joined other CSOs to sustain advocacy towards increment of health sector budget allocation, more so the RH/FP commodity budget for the financial year 2018/2019
- Contributed to the development and launch of the Network of Women Ministers and Parliamentarians (NAWMP) Strategic Plan 2018-2021

Advocacy efforts to promote gender equality led to:

- The passing of **Arua District Local Government Ordinance on Sachet “Waragi”**
- Allocation of **UGX 8,000,000** for Arua district local government to develop local Action Plan for gender-based violence prevention

RHU Executive Director and Young People engaging government leadership at the 2018 Inter-University Dialogue





A community member presents a 'problem-tree' highlighting with SRHR issues to local leaders during a Social Accountability training in Kapchorwa District.

- finalisation and launch of the **Bushenyi district local action plan to address Gender-Based Violence**
- Supported the Ministry of Gender Labour and Social Development to **conduct the Rapid Impact Assessment in support of development of the Family Policy**
- **Eighteen (18) districts** allocated funds towards family planning programming totalling to about **UGX 318,200,000** for the financial year 2018/2019.
- More than **10 abstracts from RHU accepted** for presentation at the International Conference on Family Planning (ICFP) in Kigali, Rwanda
- More than **2,000 people attended different dialogues on ending Female Genital Mutilation (FGM)** in two FGM hot spot districts- Kapchorwa and Kween. More than 30 politicians, religious leaders, and cultural leaders appended

their signatures to pledge their commitment to ending FGM in their localities

- Under media advocacy, **RHU identified and built capacity of media personalities** including journalists and media house owners both at national and subnational level. This was to increase coverage of SRH in the media but to also create partnerships for consistent information sharing with the media to promote accurate reporting
- **Five (5) universities** approved the provision of SRHR information and services to the students at university premises- **Busitema, Kampala International, Makerere, Mbarara and Kyambogo universities**
- **Mbarara University** approved that SRHR issues are integrated into the university policies including the gender, anti-sexual harassment and disability policies
- **Kyambogo University** increased the number of days for the health week from 3 to 5, in order to allow for SRHR information and services to be provided for the students
- **Makerere University** increased the number of health days from 1 to a full week to allow for the provision of SRHR information and services. The peers have for the first time enrolled SRHR programmes into schools and colleges in the university
- **Kampala International University** through the Dean of Studies was given a platform to speak to the first-year incoming students on SRHR. They have brought the guild on board in relation to their advocacy strategy

## Highlights of our achievements in 2018



Engagement in development of strategic legislations: National Sexuality Education framework, the School Health Policy, the NAWMP Strategic Plan and the Bushenyi District Local Action Plan to address gender-based violence



Advocacy towards RH/FP funding leading to increment to NMS commodity budget from UGX 8 billion to UGX 16 billion and 18 districts allocated UGX 318,200,000 for FY 2018/2019.



2,000 people attended dialogues on ending Female Genital Mutilation (FGM) in Kapchorwa and Kween districts.



5 universities approved provision of SRHR information and services to students



RHU staff presented 10 abstracts at the International Conference on Family Planning (ICFP) in Kigali, Rwanda



# Young People Access

# Young people: Empowered to exercise their sexual and reproductive health rights

The organisation strives to empower young people to exercise their sexual reproductive health and rights. To achieve this, RHU is guided by the Strategic Plan Outcome II: 10 million people are empowered to exercise their SRHR of which 60% are youth which has two priority areas.

## Strategic Priority Area 3:

Two hundred fifty-thousand (250,000) young people completed Sexuality Education by 2022

## Strategic Priority Area 4:

Five (5) million people reached with information on SRHR through the use of appropriate media in 45 districts of Uganda by 2022

We focus on implementing programmes that enable and provide sexuality education and reaching this target population with SRHR information through the use of innovative appropriate channels

## Our Approaches

- Male involvement interventions targeting boys in order to impact on social norms and values using evidence-based interventions
- Capacity building including;
  - young people in the area of peer educations, sexuality education, social accountability
  - service providers in youth-friendly service
  - peer educators, teachers and parents to increase awareness and support for SRH information and services

- The Community Score Card used in youth-led quality monitoring
- Organising special days for the young people to get information and services
- Facilitating table talk discussions
- Provision of service and information through static clinics and outreaches
- Media engagement
- The internship training at different levels that attract more than 30 students annually
- Use of social media with more than 30 million views in 2018

IPPF Director General (centre) with young people at the RHU Katago Youth Centre.





## Key Achievements in 2018

- Conducted the Inter-university dialogue which attracted more than **1,500 young people** from over 20 universities and institutions, 7 Members of Parliament. This provided a platform for young people to express their SRHR challenges to the duty bearers
- Oriented more than **80 staff from different vocational training institutions** on sexuality education and the Reached out to **161,600 young people** in and out of school with sexuality education and SRH information. These attended a minimum of 8 learning sessions including Sexuality, Gender and Gender Equality including SGBV, SRH Rights, The Body, Pregnancy & Abortion, STIs, HIV, Relationships, Life Skills, Drug and Substance Abuse.
- **Trained 170 peer educators** in SRHR peer education. Key topics covered included; Gender, Adolescent Growth and Development, Life skills, Sexuality, Menstruation, HIV and AIDS, Gender, among others
- **Trained 90 teachers** in delivering sexuality education using the Presidential Initiative on AIDS Strategy to Youth (PIASCY) toolkit.
- Printed and disseminated **100 copies of PIASCY** to teachers
- **Conducted 512 outreaches** specifically targeting young people with SRHR information and services
- **Trained more than 140 health workers** drawn from public health facilities in delivery of youth-friendly SRHR services
- **Trained over 200 community facilitators and 120 service providers** in positive parenting knowledge and



Young people during a blood donation drive at the RHU head office.

**3.2m**  
services offered to young people through outreaches, static clinics, and CHWs

- skills, to enable young men and women have more gender just attitudes and behaviour
- **Distributed 230 copies of maps** showing locations of public health facilities offering youth-friendly services and information
  - **Trained more than 460 peer educators** attached to youth associations and **24 district trainers** in providing foundational skills (a curriculum that combines life skills and SRHR information) to young people
  - **Sensitised 240 parents' organisations/ association** on foundational skills and SRH for young people



**30million**

Twitter reach



**32,000**

Web page views with **8,000** New users



**330,916**

Facebook reach

- Reached 7,590 youth with foundational/life skills and SRH information
- Trained 6,760 young men and women in positive parenting
- Five (5) national television media houses were engaged in the documentation of news features, short clips about people's opinions on issues of sexuality education aimed at evidence-based advocacy



“I got to know about family planning through YETA [project] and I decided to take it up in consultation with my husband. I initially used Injecta-plan, but now we are using condoms. Using family planning has helped us set our goals and achieve some of our dreams. We have been able to build a permanent house and plan on having our next baby in five years to enable us plan better but also grow our business.” - Adongo Jolly, a peer educator from Oribcing Youth Group, Kanagai Sub County - Dokolo district, one of the youth who benefited from the Youth Empowerment Through Agriculture (YETA) project.

## Highlights of our achievements in 2018



Conducted trainings in:  
SE and YFS: 170 teachers and VTIs staff; 170 peer educators; and 140 health workers

Positive parenting skills: 200 community facilitators, 120 service providers and 6,760 young people

Foundational skills: 460 peer educators, 240 parents' organisations, 24 district trainers and 7,590 youth



3.2m services offered to young people through outreaches, static clinics, and CHWs

Conducted 512 outreaches specifically targeting young people

61,600 young people reached with sexuality education and SRH information



Organised the Inter-university dialogue - a platform for young people to express their SRHR challenges to the duty bearers - which attracted more than 1,500 participants from over 20 universities and institutions



Distributed 230 copies of maps showing locations of public health facilities offering YFS



100 copies of PIASY printed and disseminated to teachers as guides for sexuality education



# Service Delivery

# Service delivery: to increase access to quality integrated SRH services to vulnerable and underserved communities

In 2018, RHU continued to deliver services using the different service delivery modes in more than 70 districts in the country. All efforts contributed to the realisation of the organisation Strategic Plan Outcome III: thirty-five (35) million quality integrated SRHR services provided through two priority areas.

## Strategic Priority Area 5

To deliver 32 million quality rights-based integrated SRHR services by 2022

## Strategic Priority Area 6

Enable the delivery of 3 million quality rights-based integrated SRHR services through partnerships with the public and private sector by 2022

To address the large unmet need for services especially family planning, RHU focused more on addressing the demand for long-acting and permanent methods.

## Our Approaches

- Use of community health workers (CHW) with a network of **more than 2,000 CHWs**
- Providing services through the 18 RHU static clinics located in all regions of the country
- Provision of services through franchised/partner clinics health facilities
- Conducting integrated service delivery outreaches to provide a full range of services in one visit
- Provision of services in refugee camps in northern and western Uganda

- Community awareness campaigns held on a monthly basis
- Integration of SRH services to encompass other services including ANC, Sexual Gender-Based Violence (SGBV) related services, Immunisation, Laboratory, etc.
- Capacity building and mentoring of service providers
- Free service days to increase access and reach to most in need
- Partnership with other stakeholders (Government health units and CSOs) in all focus districts

A mother getting counseling services at one of RHU's integrated service outreaches



## Key Achievements in 2018

- Offered SRHR services to more than **1.25 million people**
- Offered more than **7.4 million volume of SRHR services** in 2018
- As a result of addressing the demand for long-acting and permanent methods, the Couple Years of Protection (CYP) more than doubled compared to the previous reporting period. This increased from about **360,000 in 2017 to more than 730,000 in 2018**. CYP is a measure that estimates the protection from pregnancy provided by contraceptive method during a one year period.
- Rolled out the injectable contraceptive, DMPA-SC commonly referred to as Sayana Press, offering more **64,940 DMPA-SC services**
- **Trained service providers and Village Health Teams (VHTs)** which helped to delivery different services
- **Strengthened laboratory services** through procurement of new equipment to expand our service package
- Offered **206,669 Gender-Based Violence (GBV) services** to survivors of GBV. The services included sexually transmitted infections

**7.4m**  
Total SRH services  
offered in 2018  
alone

An RHU service provider sensitising a community about family planning methods

(STI) management, HIV counselling and testing; FGM survivors' counselling and referral; clinical management of rape survivors; emergency contraception (EC), Post Exposure Prophylaxis (PEP), the psychological counselling of survivors of rape, collection of forensic evidence, referral of GBV survivors to police, and referral of survivors to social workers

- Offered **125,550 SRHR services to refugees**

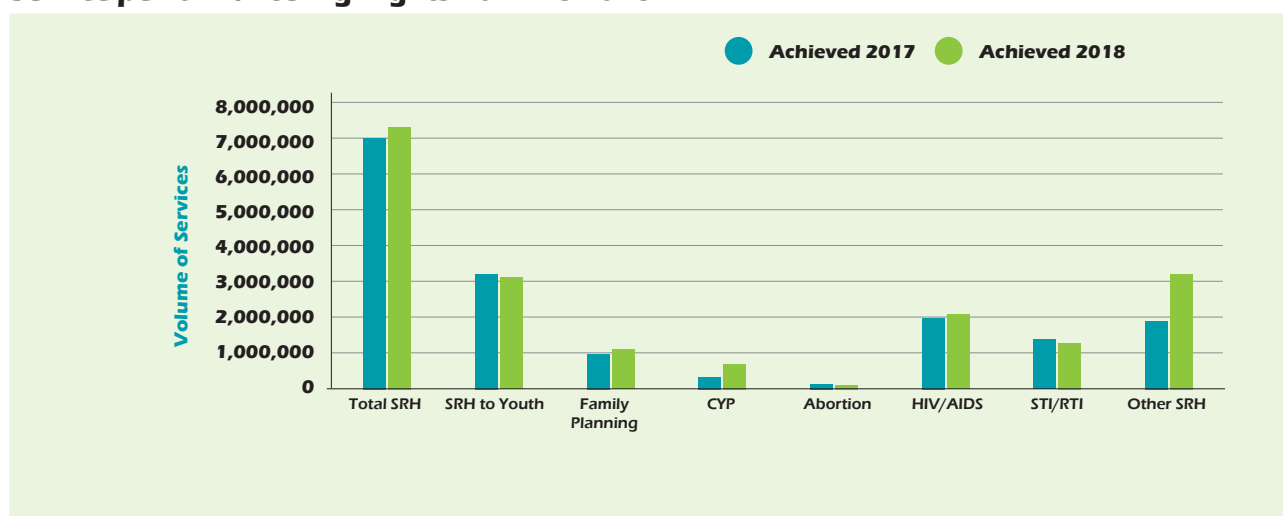
## RHU service package

- Family Planning
- Cervical & breast cancer screening
- Cryotherapy treatment
- SGBV counselling, support and referral
- HIV voluntary counselling and testing
- STI screening and treatment
- Safe medical male circumcision
- Maternity services
- Antenatal & postnatal care
- Immunization and vaccinations
- Laboratory diagnosis
- Post abortion care
- SRHR health education

## Volume of SRH service statistics in 2018

Indicators	Achieved 2017	Achieved 2018	% Change
Total SRH	7,040,054	7,412,101	5%
SRH to Youth	3,221,723	3,206,914	0%
Family Planning	1,030,654	1,120,311	9%
CYP	360,785	730,990	103%
Abortion	144,536	100,774	-30%
HIV/AIDS	1,972,374	2,105,990	7%
STI/RTI	1,404,441	1,305,351	-7%
Other SRH	1,961,673	3,247,310	66%

## Service performance highlights 2017 Vs 2018



## Highlights of our achievements in 2018



**7.4 million**

Total volume of services offered: FP - 1 million, HIV- 2.1 million,

STI - 1.2 million, PAC - 100,000 and other SRH services - 2.5 million



**64,940**

DMPA-SC (Sayana press) services



**730,000**

Couple Years of Protection (CYP)



**206,669**

Gender-Based Violence (GBV) services



# Accountability

# Accountability for a sustainable organisation

In 2018, to ensure that RHU continued to be accountable, sustainable and result oriented, the organisation was guided by the strategic plan; Outcome 4: A sustainable, accountable and result oriented organisation with two priority areas.

## Strategic Priority Area 7

Strengthen management for institutional efficiency and effectiveness and increased internally generated income by 20% annually by 2022

## Strategic Priority Area 8

Strengthen governance and volunteer base for institutional accountability and sustainability by 2022

### Our Approaches

- The RHU Learning Centre- established to strengthen the capacity, systems and structures in sexual reproductive health programming and service delivery
- Capacity strengthening for staff, other CSOs and IPPF member associations
- The African Citizens Initiative (ACI)- a volunteer-led peer-to-peer fundraising programme designed to take advantage of volunteer base to find African solutions to African's development challenges
- Monitoring and Evaluation Accountability and Learning (MEAL). Monitoring and evaluation is a key ingredient in RHU programming, done internally but also conducted by external M&E specialists especially from IPPF.

The M&E Unit continued to provide routine monitoring by conducting or coordinating routine data collection that helped to assess whether interventions were driving towards meeting the set objectives. This included support visits, Quality of Care (QoC) and Quality Assurance (QA) visits and procedures to ensure that quality health care is continually availed. More than 40 visits were conducted by the Monitoring and Evaluation (M&E)

team and the specific project coordinators. The following are some of the M&E unit functions at RHU among others.

- To support RHU senior management and project managers in tracking the progress of project activities and identify areas where corrective action is required with respect to activities and deliverables
- To support project managers in compiling periodic press reports (output indicator reports & narrative reports)

RHU staff receive the 2018 Financial Reporting (FiRe) Award -Not-for Profit Organisations category where RHU emerged winners.





- To support RHU management in conducting mid term reviews or impact evaluation of projects
- To consolidate and analyse RHU service statistics for supporting compilation of progress reports, management discussions & decisions and sharing with partners/stakeholders
- To provide M&E expertise in the developing of logical frame works or M&E plans for new proposed projects
- To estimate targets for various service indicators using forecasting procedures and previous service statistics
- To lead in formulating research, M&E systems that stimulate learning and measurement of progress
- To represent RHU in M&E related meetings both in the country and abroad
- To manage solicitation of evaluation consultancies (writing Terms of Reference, Evaluating bids, etc)

Forecasting on RHU service statistics indicators was done in 2018 to guide estimation of service indicators/targets for year 2019.

### Key achievements in 2018

- **More than 10** local and international agencies received trainings/experiential learning sessions through RHU Learning Centre in Good Governance, Quality of Care, Integrated Services Outreaches, etc.
- **Ninety-six (96)** staff attended tailor-made trainings including cervical cancer screening, comprehensive Family Planning (FP), Values Clarification, FP Technology Updates including provision of long term and permanent methods, youth friendly services, Biosafety and Biosecurity Management, Laboratory Quality Management Systems, and Quality of Care
- An Online Data Back-up service was put in place and has been adhered to by all staff to ensure information storage and communication
- **DHIS2 and the electronic Management Information system (e-CMIS)** were introduced to the RHU branches following a data management training. By December 2018, 12 out of the 18 RHU branches were serving RHU clients using eCMIS. More than 30 Data Quality Assessment (DQA) visits were conducted to RHU clinics

96

RHU staff attended tailor-made trainings in several SRHR related fields



Professor James Ntozi an active RHU volunteer receives an award at the Annual General Meeting for his financial contribution to the organisation under the African Citizen's Initiative

and partner facilities. In addition, monitoring visits were made to branches to assess level of programme implementation and identify improvement opportunities

- **Resources mobilisation** under the African Citizens Initiative (ACI), increased from **UGX 2,349,000** in 2017 to **UGX 11,658,000** in 2018. Other sources contributed to internally generated resources including; vehicle hire fetching **UGX 209,875,000**, rent of RHU premises, and contribution from technical assistance of staff, clinic collections fetching **UGX 1,293,269,000**, among others
- **Voluntarism and governance** - with the assistance of IPPFARO, RHU developed a tool to track volunteer members' involvement and contribution. In addition, RHU electoral committee was appointed and approved by the National Council to be in charge of the election of RHU's governance committee in 2019
- **About 300** volunteer members were recruited and oriented on the vision and mission of RHU, and on their volunteer roles. An additional **87** Youth Action Movement (YAM) committee members (youth volunteers) were oriented on the YAM concept and operations

## RHU performance against targets

Indicators	Target 2018	Achieved 2018	% achieved
Total SRH	4,862,434	7,412,101	152%
SRH to youth	2,288,764	3,206,914	140%
Family Planning	1,038,039	1,120,311	108%
CYP	729,218	730,990	100%
Post Abortion Care	34,347	100,774	293%
HIV/AIDS	1,203,237	2,105,990	175%
STI/RTI	510,273	1,305,351	256%
Other SRH	2,076,538	3,247,310	156%
Clinic collections	1,308,125,000	1,305,318,442	99.8%

- **RHU emerged winner- NGO category of the FiRE Awards 2018**, organised by the Institute of Certified Public Accountants of Uganda (ICPAU), Capital Markets Authority (CMA) and Uganda Securities Exchange (USE)

Below are the achievements registered by the M&E Unit in 2018;

- In June 2018, RHU M&E unit spearheaded the conducting of needs assessment for Adolescent Sexual Reproductive Health Rights (ASRHR) Project in Mbarara district. Findings facilitated planning for the project activities
- In May 2018, RHU M&E unit worked with a consultant to conduct Mid-Term Review (MTR) of Prevention Plus Project - The project's focus is to engage men and boys in fighting GBV. Monitoring Prevention Plus MTR recommendations is going on well and there is excellent progress towards implementing all the MTR recommendations
- In June 2018, M&E unit supported a consultant to conduct Mid Term Evaluation of Right Here Right Now (RHRN) project.

- The M&E unit also rolled out the electronic register across all RHU branches for outreach services and selected few under static.
- In 2018, more RHU clinics received electronic Management Information system (e-CMIS). By December 2018, 12 out of 18 branches, were serving RHU clients using eCMIS

### New projects in 2018 included:

- Adolescent Sexual and Reproductive Health and Rights (ASRHR) at the fore
- Programme to Improve Sexual Reproductive Health Rights Policy and Service Environment in Uganda (PROMISE-Uganda)
- She Decides project
- Standing Strong Together (SST)
- Strengthening quality of Care for sexual and reproductive health services through Public Private Partnerships in Uganda (JTF Project)
- Women Integrated Sexual Health (WISH2ACTION project)

## Highlights of our achievements in 2018



RHU resource envelop increased by 29% to over UGX 26 billion

Resources mobilised under the ACI increased from UGX 2.3 million to UGX 11.6 million in 2018



10 local and international agencies trained through the learning centre

96 staff attended tailor-made trainings  
300 volunteer members were recruited and oriented



DHIS2 and the electronic register were introduced to the RHU clinics

Developed a tool to track volunteer members' involvement and contribution



RHU winner of the NGO category of the FiRE Awards 2018

Acquired new office premises seated on 0.5 acres of land

# The governing boards

The highest authority is our Board of Trustees. The next body in hierarchy is the National Council and then the National Executive Committee (NEC). The National Council and the Branch Councils all conducted their Annual General Meetings (AGM) in 2018. The National Executive Committee (NEC), headed by Hon Rosemary Seninde (the current Minister of State for Primary Education) conducted its mandate to oversee the implementation of the policies and activities of the organisation.

Members of NEC are appointed for a three year term, after which reappointment is possible for a maximum of one additional term. Members are selected based on pre-determined profiles. Every year, NEC members are required to disclose any potential conflict of interests in writing. The board regularly conducts a self-evaluation or engages in an external evaluation to identify areas in which it can improve the way it works.

All the assets of the institution are entrusted with the Board of trustees, while NEC appoints, evaluates, appraises and dismisses the executive director. NEC supervises the overall progress of the strategic plan, the annual action plan and the budget. In addition to its supervisory function, the board aspires to act as a sounding board and advisor to the executive director. The executive director is mandated with actual implementation and management of the organisation. He, together with his management team, drafts and proposes strategies, action plans and budgets and key policies for the board's approval.

Once approved by the board, the executive director is responsible for implementing these plans and policies. The executive director reports quarterly to the board. The relationship between board and executive director is formally captured in the constitution, the board code and the management code policies. NEC met five times in 2018, in the months of February, April, July, September and December. The meeting held in December was an extra-ordinary board meeting to approve purchase of new office premises.

The meeting in February was meant to review annual reports for the previous year. In April, the meeting was

to review and approval of annual audited accounts. The meeting held in July was meant to review the half year reports, while the September meeting was to review and approval of annual budgets. The Programmes and Finance Committee, consisting of six NEC members supported by the executive director and directors of Finance of finance and Programmes, monitors the financial health of the organisation as well as the internal administrative processes. The risk register is reviewed twice yearly. The committee makes recommendations to the board on the appointment of the external auditor, and discusses annual management letters and annual reports with the external auditor.

This committee also considers reports from internal audit on any weaknesses in controls that have been identified, including financial controls, and considers corrective actions to be implemented by management to prevent such incidences recurring. This takes place on an ongoing basis. Members of the NEC are only reimbursed for expenses incurred in the performance of their duties. All the mandatory documents were sent to IPPF before the deadline.

Appraisals are conducted once every year for all RHU staff. Appraisal reports support management to identify trainings needs for staff, staff due for promotion, transfers and contract terminations or renewals.

## Succession Planning

Succession planning is a key focus of the board which on an ongoing basis, considers the composition of the board and its committees to ensure continued effectiveness. The retention of the board members with considerable experience is sought to ensure that appropriate levels of management are maintained. As part of the board's

responsibility to ensure that effective management is in place to implement RHU's strategy, management succession planning is an ongoing consideration, and under the oversight of the Programme and Finance committee.

### Skills, knowledge, experience and attributes of National Executive Committee

The National Executive Committee ensures that Committee members possess the skills, knowledge and

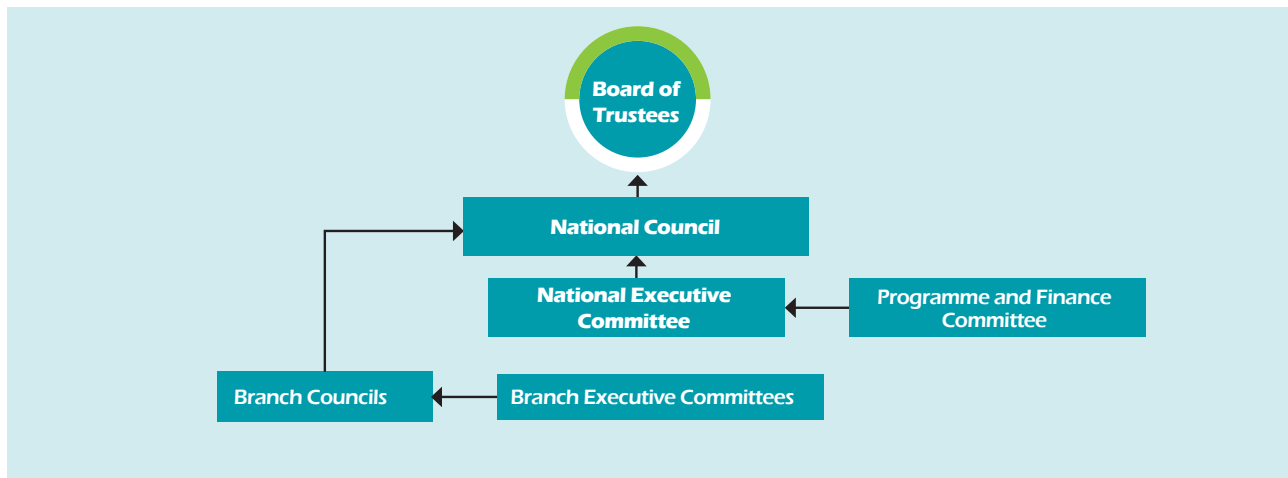
experience necessary to fulfill their duties. The Committee members bring a balanced mix of attributes to the board, including: operational matters; knowledge and understanding of sexual and reproductive health matters and interventions; regulatory experience; and expertise in risk management and financial control, financial, entrepreneurial and management skills.

The Committee members' qualifications are summarized below;

### RHU governing bodies (April 2016 - April 2019)

No.	Name	Sex	Position	Occupation/ Profession/ Qualification	Contact
<b>Board of Trustees (BoT)</b>					
1	Prof. James Ntozi	M	Member-BoT	Demographer & Statistician	<b>Email: jntozi@yahoo.com</b> Tel: 0772-454482/0712-454482
2	Hon. Masalu Musene	M	Member -BoT	Lawyer	Tel. 0772454635
3	Hon. Joyce Mpanga	F	Member - BoT	Former Member of Parliament	Tel: 0772-581183
<b>National Executive Committee</b>					
1	Hon. Rosemary Sseninde	F	Chairperson	Member of Parliament, Teacher, Minister	<b>Email: seninderose@gmail.com</b> Tel: 0772-434513
2	Eng. Otim Francis	M	Vice Chairperson	Engineer	<b>Email: otim1frankjogo@gmail.com</b> Tel: 0752-328865
3	Mr. Nathan Kipande Tumuhameye	M	National Treasurer	Social Worker, Director- Eastern Africa RILab	<b>Email: ntumuhameye@ranlab.org/kipanden@gmail.com</b> Tel: 0700-842317
4	Ms. Daisy Aliwaru	F	Committee Member	Head Teacher	<b>daisyaliwaru@yahoo.com</b> Tel: 0782-831155
5	Ms. Frances Kuka	F	Committee Member	Resident District Commissioner	<b>Email: maamakuka@yahoo.com</b> Tel: 0772-495837
6	Mr. Justus Tindyebwa	M	Committee member	Journalist	<b>Email: tindyejustus@gmail.com</b> Tel: 0772-459473
7	Lydia Asimwe	F	Committee Member	District Population Officer/ Demographer	<b>Email: lynasim@yahoo.com</b> Tel: 0703-423214, +256782-320209
8	Mr. Omirambe Cosmas	M	Committee Member	Social Worker	<b>Email: omirambecosmas@gmail.com</b> Tel: 0775-745765
9	Ms. Adong Caroline	F	Committee Member	Student of Medicine	<b>Email: cocphad@gmail.cpm</b> Tel: 0783-895576/0706-461976
10	Olgah Namukuza	F	Ex-Officio /Regional Representative to IPPFAR	Social Worker	<b>Email: daphynne101@gmail.com</b> Tel: 0773-545063

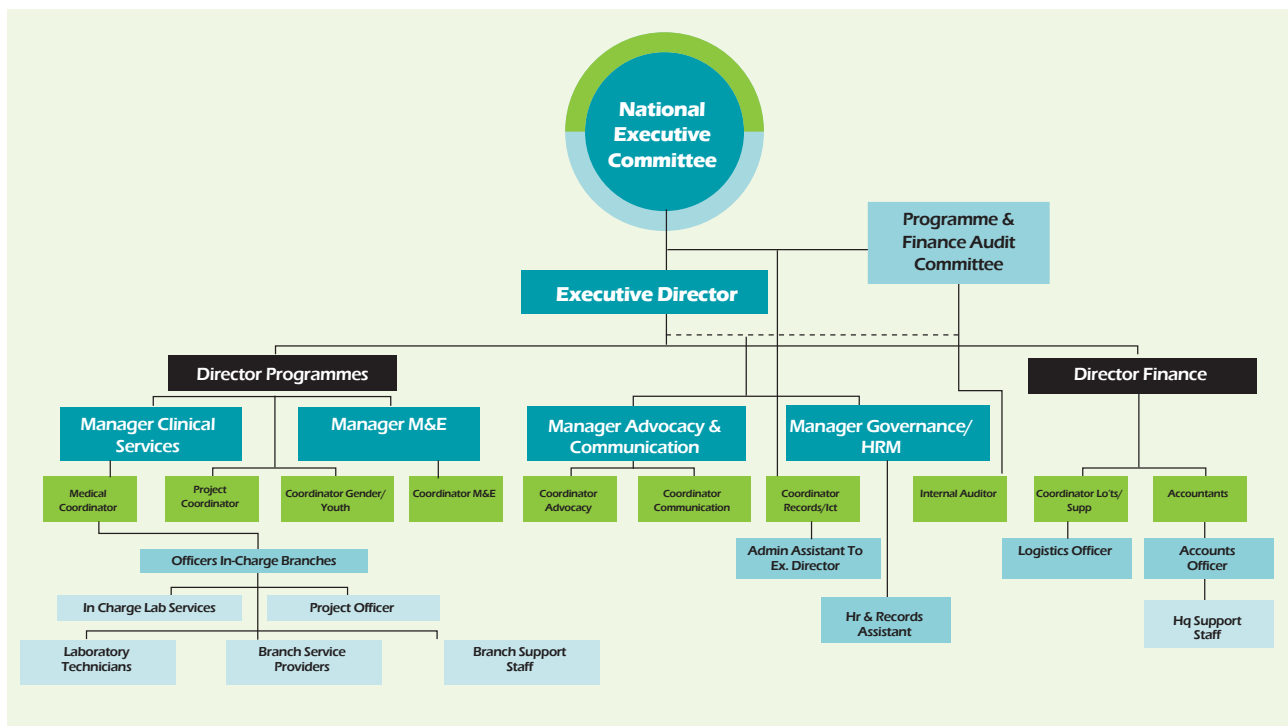
## Governance structure



## Organs of RHU

1. The National Council;
2. The National Executive Committee (NEC);
3. Board of Trustees;
4. Branch Councils;
5. The Branch Executive Committee;
6. The Secretariat;
7. Programme and Finance Committee

## RHU organisation structure



## The National Executive Committee (NEC) April 2016 - April 2019



**Hon Rosemary Nansubuga Seninde,**  
National Chairperson



**Eng Otim Francis,** Vice Chairperson  
from Acholi Branch



**Mr Nathan Kipande Tumuhanye,**  
National Treasurer - Kampala Branch



**Mr Omirambe Cosmas,** Male Youth  
Committee member - Luwero Branch



**Ms Adong Caroline,** Female Youth  
Committee member - Acholi Branch



**Ms Lydia Asiimwe,** Committee  
member - Bunyoro Branch



**Ms Jane Frances Kuka,** Committee  
member - Sebei Branch



**Ms Daisy Aliwaru,** Committee  
member - West Nile Branch



**Ms Olgah Daphynne Namukuza,**  
Kampala Branch - Regional Council  
Representative



**Mr Justus Tindyebwa,** Committee  
member - Kigezi Branch

## The Programmes & Finance Committee (PFC) April 2016 - April 2019



**Ms Lydia Asimwe**, Chairperson-  
Bunyoro Branch



**Mr Nathan Kipande Tumuhame**,  
National Treasurer-Kampala Branch



**Ms Grace Nambooze**, Committee  
member - Buddu Branch



**Mr Godfrey Anguyo**, Committee  
member - West Nile Branch



**Ms Irene Nairuba**, Committee  
member - Busoga branch



**Ms Faith Amanya Betega**,  
Committee member - Ankole Branch

# Sustainability report

## Framework applied

This report is based on the Global Reporting Initiative's (GRI) G4 guidelines. We have used these guidelines because they help organisations to compare themselves with peers and track progression and improvement over time. Some of our work cannot be usefully described using the generic performance indicators in the GRI G4 guidelines.

However, our ability to benchmark our performance will be further aided by a GRI Sector Supplement for Non-governmental organisations (NGO's) now being prepared.

Our ability to create value depends on our use and impact on certain resources and relationships. We also apply the sustainable livelihoods approaches, adopted by the DFD Framework, in managing and accessing our ability to create value over time and our sustainability performance.

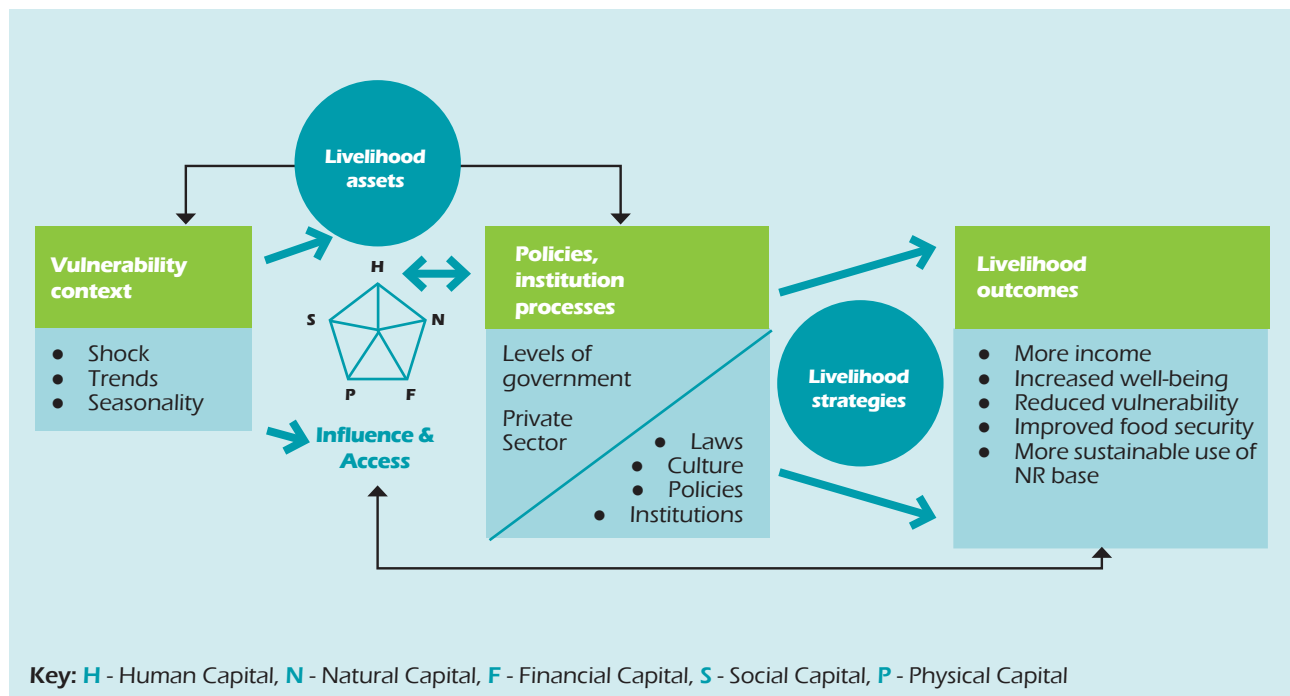
The following five capitals are fundamental to the long-term

viability of our interventions: natural, social, human, intellectual, and financial. The capitals are considered in commentary throughout this report.

## Sustainable livelihoods approaches

These approaches emerged from the growing realization of the need to put the poor and all aspects of their lives and means of living at the centre of development, while at the same time maintaining the sustainability of natural resources for present and future generations.

This framework is illustrated below;





We also apply the sustainable livelihoods approaches, adopted by the DFD Framework, in managing and accessing our ability to create value over time and our sustainability performance. The following five capitals are fundamental to the long-term viability of our interventions: natural, social, human, intellectual, and financial. The capitals are considered in commentary throughout this report.

### Sustainable livelihoods approaches

These approaches emerged from the growing realization of the need to put the poor and all aspects of their lives and means of living at the centre of development, while at the same time maintaining the sustainability of natural resources for present and future generations.

The particular sustainable livelihoods framework developed by the Department for International Development (DFID) contains the following elements:

- An analysis of the causes of vulnerability, including trends, shocks and seasonality;
- An analysis of livelihood assets at the individual, household and community level, comprising human, social, financial, physical and natural resource capital;
- The context within which livelihoods evolve, including micro and macro level policies; civic, economic and cultural institutions; laws and governance;
- Livelihoods strategies; and
- Livelihood outcomes, assessed in terms of reduced vulnerability, more food security, more income, increased well-being, and sustainable use of natural resource base (DFID 2000).

### RHU sustainability policy

In 2015, Reproductive Health Uganda developed a sustainability policy. This annual report is hinged on this policy which guides our reporting focused on environmental, social and economic management aspects of our operations. The policy recognizes the importance of engaging in interventions that ensure the organisation that has been in existence for the last 60 years is sustained for many more years.

The policy identifies the RHU advocacy team as the key staff concerned with ensuring that all our annual reports are sustainability responsive. Sustainability and Reproductive Health are inexorably linked.

One of the key environmental challenges within sustainability management is climate change, which is impacting on the world's poorest people more than anyone else. This report presents our deliberate efforts to mitigate the social impacts on the economy, the environment, and society, especially by our interventions but also those of others. It shows our contributions towards sustainable development, aligned with the Sustainable Development Goals. Our interventions target to have healthy informed communities, who make the rights choices for their development but also reducing the impact on the environment by choices they make. For instance, a growing body of evidence emphasizes that population dynamics are factors that aggravate climate change vulnerability, thus the deliberate effort to integrating population dynamics, SRHR and climate change dynamics.

### Sustainability strategies

RHU uses different strategies to ensure the organisation's sustainability including:

**Employee welfare Personnel:** RHU core staff consists of multi-disciplinary teams of highly qualified, professional and committed personnel who include medical doctors, a gynaecologist, social workers, economists, accountants, computer scientists, clinical officers, nurse midwives, laboratory technicians, and M&E specialist, advocacy and communications specialists.

**Recruitment process:** RHU's recruitment policy is governed by a slogan "quality at the gate". Vacant positions are identified and proposed to the human resource manager for recruitment; the Executive Director in case of top management positions; and the relevant heads of departments/line managers in case of lower cadre positions. Following approval for a recruitment to take place, a job advert is put in the media or internally advertised within RHU depending on the needs of the position to be filled.

**Staff remuneration and retention:** RHU's reward is basically a monthly salary for every staff who has a running contract. Salaries are according to the salary structure of the organisation. RHU offers a competitive remuneration package including; fringe benefits- medical, workman compensation insurance, monthly fuel facilitation for management staff, etc. RHU also offers annual salary increment to all staff that depends on the cost of living,

but not less than 4%, gratuity at the end of every contract. In 2018, the board and management approved and implemented an average **20%** salary increase of all staff salaries which went into effect in July 2018.

**Growing our volunteer base:** an additional 297 volunteers were recruited this reporting period and over 2,800 volunteers were oriented on RHU's vision, scope and achievements.

**Fundraising and resource mobilisation** efforts also intensified in the increasingly competitive environment. As a result, six new projects were brought on board in 2018. This was of course with the support of funding partners that included IPPF, DFID, the Danish Family Planning Association (DFPA), the Netherlands Foreign Affairs Ministry among others.

**Partnerships and alliances** have also been another strategy to leverage on existing resources and expand our service package and coverage to those who most need our services even in the hard-to-reach areas of the country.

**Local revenue collection:** Vehicle Replacement Reserve – an innovation of charging vehicle hire fees to all restricted projects not contributing to vehicle purchase led to the creation of the Vehicle Replacement Reserve Fund. This fund will avail resources for purchase of new vehicles. The fund had accumulated to UGX 209,875,000 by end of year, 2018. Clinic collections also improved in local revenue collections by 21% from UGX 1,064,940,000 in 2017 to UGX 1,293,269,000 in 2018.

**Assets and inventory:** In kind donations of assets and inventory increased from UGX 2,176,219,000 in 2017 to UGX 3,269,983,000 in 2018, reflecting an increase of 50%. This was attributed to the design of the new projects which emphasised support to supplies and logistics. UGX 150 million was ear-marked from the Vehicle Replacement Reserve for purchase of the new office premises which will increase the organisation's asset base.

**Purchase of new office premises:** To support the growth in staff numbers and projects, management identified a new office premise in Naalya. A purchase proposal was developed and shared with the Board. The RHU Board reviewed and approved the new office purchase proposal in December, 2018. Management also confirmed availability of funds from local resources amounting to UGX 950 million, the amount that was required to purchase the new office building. It is anticipated that by early 2019, RHU will be in position to acquire a new office block and expand on the existing office space.

**Integrating SRHR into climate change:** RHU continues to work on integration of climate change with population dynamics, reproductive Health and gender issues in policies, budgets and strategies. In 2018 we engaged different stakeholders to increase awareness amongst key decision makers on the linkages between population dynamics, reproductive health and gender considerations and adaptation to climate change to benefit the most vulnerable populations.

**Waste management:** Similarly in 2018 we continued to work under the KCCA guidelines and ministry of health Approaches to Health Care Waste Management guidelines for the disposal of our clinical wastes in our Kampala clinics and other sites in other districts. We renewed our contract with a KCCA prequalified firm- Bin It for the proper disposal of clinical and other wastes in Kampala. We ensure segregation, treatment, handling, transportation and

RHU's new office block in Naalya - Kampala



disposal of clinical and offensive wastes so as to minimize the risk to health and safety of the population.

**Organisational development:** In 2018, RHU management team continued to implement the organisational development consultancy report that was launched in 2017. The objective of the consultancy was to develop a human resource development plan aligned to the new RHU Strategic Plan(2016-2022) in order to address the long term resource needs that reflect RHU's strategic aspirations. The specific objectives of that study was to:

- To review the organisation's structure, systems and processes in relation to RHU's Strategic Plan aspirations, and recommend short, medium and long-term plans of a transformative nature that will strengthen the organisation, thereby promoting its sustainability and impact.
- To develop a staff development plan and devise a salary and benefits structure that offers competitive remuneration in relation to organisations of like similarity.

The results of the study have set a new pace for the institution and a number of changes are in the pipe line. RHU management has to-date developed an action report to implement these recommendations in phases.

The following specific recommendations were discussed by RHU's senior management team, presented to RHU National Executive Committee and approved for implementation.

- Adoption of a new organisational structure with 54 new positions identified. This will strengthen service delivery and the plan is to have this done phases. Some of the new positions proposed at head office include: Manager Governance and Corporate affairs; Executive Assistant to the Executive Director; Manager Compliance and Internal Audit; Manager Business Development; Finance Manager and Administration Manager
- The revised staff positions for a model RHU branch will include the following staff: Medical Officer / In Charge Branch office; Head, Diagnostic Services; Administrative Officer; Dispensing Assistant; Supplies / Stores Assistant; Accounts Assistant; ICT Assistant; Records Assistant / Data Clerk; Front Desk Assistant (Customer Care)

- The report indicated that RHU remuneration to staff was below other comparator organisations in the same category. Specific recommendations for review and enhancement of salaries, other benefits and per diem were proposed. They were adopted for implementation in 2018.
- Training needs assessment report for all categories of staff was also shared and adopted for implementations. RHU is excited about these recommendations and believes that they will not only align the RHU team to the new strategic plan, but will also support to motivate staff and also improve capacity for service delivery.

In 2018, to strengthen operations of two departments, the department heads were promoted from coordinators to Managers. The two new managerial positions created were; the Manager Compliance and Audit formally internal auditor and Gender and Youth Manager, formally gender and Youth Coordinator.

In line with the organisational development recommendations, RHU organised tailor-made trainings for 96 staff that included Cervical Cancer Screening, Comprehensive FP, VCAT, FP Technology Updates including provision of long term and permanent methods, Youth Friendly Services, DHIS2, Biosafety and Biosecurity Management, Laboratory Quality Management Systems, Quality of Care, Monitoring and Evaluation, computerized accounting and well as financial management.

RHU continued to operationalize the activities of the Learning Centre, a model centre and hub for capacity building initiatives in SRHR in Uganda and within IPPF Africa Region. Under the Learning Centre Initiative, several RHU's technical staff participated in offering technical support to other organisations locally and internationally at a fee. The money collected contributed to local income generated for the year.

The trainings covered areas related to good governance, Clinical Management Information systems and Quality of care. The Learning Centre also hosted a number of in-country meetings, workshops and trainings for the partner agencies and RHU staff and the governance body meetings.

## RHU staff capacity building

### Service delivery

Name	Designation	Station	Trainings/Workshops	Duration	Convener	Award
Birungi Lynda	S/P	Katego	QOC	3	RHU	None
Anicia Filda	In-Charge	Gulu	QoC	5	RHU	None
			Planning Meeting	3	RHU	None
Aliferu Joyce	S/P	Lira	P2P Learning	4	RHU	N
			QoC Mentorship	5	RHU	N
Achan Jane	S/P	Owino	Updates on FP	2Weeks	RHU	N
			PREP HIV/AIDS	3	IDI	N
Akello Grace	S/P	Lira	Comprehensive SRH Services	5	RHU	N
Aryemo Florence	S/P	Gulu	Electronic register & DHIS2	4	RHU	N
			Counselling & issuing FP Services	1	RHU	N
			QoC	5	RHU	N
			GBV	3	RHU	N
Munsi Salama. C	S/P	Mbale	HARM	1	RHU	N
Kaumbae Regina	S/P	Mbale	Comprehensive FP	2	RHU	N
			HARM- PAC	5	RHU	N
Kedi Samuel	S/P	Kapchorwa	Policy Advocacy	2	RHU	N
			GBV	2	RHU	N
Bikufa Fauza	S/P	Iganga	P2P Learning	4	RHU	N
			GCACI Performance improvement	1	RHU	N
Asiimwe Annet	S/P	Mityana	VIA & Cryotherapy clinical skill training	1 week	RHU	N
			Integrated Mgt of Malaria	1	MoH	N
			LARCs	7	RHU	N
			CAC	10	RHU	Certificate
			VCAT	5	RHU	Certificate
			GBV	4	RHU	N
Gutu Susan	S/P	Apac	Data collection tools training	3	RHU	N
			FP & CAC training	5	RHU	N
Chekamoko Irene	In-Charge	Kapchorwa	CAC P2P Learning	5	RHU	N
			M&E	5	RHU/MoH	N
			FP Updates- Implanon NXT training	5	RHU	N
Wasswa Henry	In-Charge	Bushenyi	QoC Refresher Training	5	RHU	N
			P2P Mentorship & knowledge sharing	3	RHU	N
			Entrepreneurship training	5	RHU	N
			Monitoring budget allocation & functionality of local government PAC	1	CSBAG	N
			APB Meeting	2	RHU	N

Name	Designation	Station	Trainings/Workshops	Duration	Convener	Award
Atidra Philip Rooney	In-Charge	Arua	Electronic & DHIS2 Training	5	RHU	Certificate
			QoC	5	RHU	Certificate
Alupo Immaculate	S/P	Tororo	Electronic register	3	RHU	N
			HARM	3	RHU	N
			VDMS	1	RHU	N
Mugaya Nusulu	S/P	Katego	Data Mg't	4	RHU	N
			Lab entrepreneurship	5	RHU	N
			YFS	5	RHU	N
			GBV	5	RHU	N
Lapat Geoffrey	In-Charge	Lira	SGBV	3	MoH	N
			Data Mg't	3	RHITES	N
			PAC	5	MoH	N
			STI/RTI Mg't	3	Lira University Hospital	N
Silas Ochieng .G	In-Charge	Apac	Dev't of youth engagement strategy	5	RHU	N
			ICFP	5	ICFP	N
Aponi Joyce	S/P	Mbale	QoC	3	RHU	N
			YFS	5	RHU	N
			HARM	3	RHU	N
Nseko Aggrey	S/P	Luwero	Electronic register	3	RHU	N
			Integrated SRHR service delivery model	5	JTF	N
Kyeswa Sherina	In-Charge	Luwero	JTF Orientation meeting	5	RHU	N
			QoC	5	RHU	N
			FP Stakeholder meeting	1	DHO	N
			JTF Mentorship programme	5	RHU	N
Tusiime Loyce	S/P	Bushenyi	GBV for S/Ps	5	RHU	Certificate
			YFS	1week	RHU	N
			P2P Training	3	RHU	N
			Western cluster meeting	3	RHU	N
			District EPI Review meeting	1	USAID-MCSP-RI	Certificate
Mariam Hamed.M	In-Charge	Owino	YFS	1week	RHU	N
			QoC	5	RHU	N
			Cluster meeting	3	RHU	N
Katusiime Catherine	S/P	Hoima	Integrated FP	2Weeks	RHU	N
			GTA	1Week	RHU	N
Namukose Joweria	S/P	Kabale	Short term & LARCs	10days	RHU	N
			Use of Electronic Registers	4	RHU	N

## Laboratory technicians

Name	Designation	Station	Trainings/Workshops	Duration	Convener	Award
Ayako Irene	Lab Techn	Katego	Bio-safety & Bio-security	5	CPHL	Certificate
			Entrepreneurship skilling training	5	CPHL	Certificate
Andama Adinani	Lab	Arua	Bio-safety & Bio-security	5	CPHL	Certificate
			Entrepreneurship skilling training	5	CPHL	Certificate
			LQMS	5	RHU	Certificate
Mugabe Mathias	Lab	Lira	Bio-safety & Bio-security	5	CPHL	Certificate
			Entrepreneurship skilling training	5	CPHL	Certificate
Enzama John	Lab	Lira	Bio-safety & Bio-security	5	CPHL	Certificate
			Entrepreneurship skilling training	5	CPHL	Certificate
			LQMS	5	RHU	Certificate
Nakalembe Diana	Lab	Owino	Bio-safety & Bio-security	5	CPHL	Certificate
			Entrepreneurship skilling training	5	CPHL	Certificate
			LQMS	5	RHU	Certificate
			HIV in relation to SRHR & TB	One week	ARASA	Certificate
Oder Charles O	Lab	Apac	Bio-safety & Bio-security	5	CPHL	Certificate
			Entrepreneurship skilling training	5	CPHL	Certificate
			Electronic Data tool	3	RHU	N
			JTF OoC	3	RHU	N
Nsubuga Emmanuel	Lab	Mbale	Bio-safety & Bio-security	5	CPHL	Certificate
			Entrepreneurship skilling training	5	CPHL	Certificate
			LQMS	5	RHU	Certificate
			TB Diagnosis & Mgt	3	Stop TB Partnership & MoH	N
Nasasira Onesmus	Lab	Hoima	Bio-safety & Bio-security	5	CPHL	Certificate
			Entrepreneurship skilling training	5	CPHL	Certificate
			LQMS	5	RHU	Certificate
			YFS	5	RHU	N
Kyagamo Hamidu	Lab	Kapchorwa	Bio-safety & Bio-security	5	CPHL	Certificate
			Entrepreneurship skilling training	5	CPHL	Certificate
			LQMS	5	RHU	Certificate
Ssemwanga Brian	Lab	Iganga	Bio-safety & Bio-security	5	CPHL	Certificate
			Entrepreneurship skilling training	5	CPHL	Certificate
Nabuuma Magdalene	Lab	Mityana	Bio-safety & Bio-security	1 week	CPHL	N
			Entrepreneurship skilling training	1 week	CPHL	N
Bakulirahi M.S	Lab	Bwaise	Bio-safety & Bio-security	5	RHU	N
			Entrepreneurship skilling training	5	RHU	N
			CBC Machine review	1	RHU	N
			Information Mgt systems	1	KCCA	N
			Quality Mg't systems	5	RHU	Certificate
			Quality assurance/ quality control comprehensive HIV	1	RHU	N

Name	Designation	Station	Trainings/Workshops	Duration	Convener	Award
Sebata Sam	Lab	Luwero	Bio-safety & Bio-security	5	MoH	N
			Entrepreneurship skilling training	5	RHU	N
			Mentorship training	5	JTF	N
			HIV Rapid screening & Testing	5	UVRI	Certificate
			Infection risk assessment & quality improvement	5	JTF	N
Tushabe Denis	Lab	Kabale	Quality Mg't systems	5	MoH	Certificate
Bongonyinge Denish	Lab	Gulu	IMCI	5	MoH	Certificate
			Bio-safety & Bio-security	5	RHU	Certificate
			Entrepreneurship skilling training	5	RHU	Certificate
			Quality Care in Service delivery	5	RHU	Certificate
			M&E of Health Programmes	5	CSBAG	Certificate

### Administration and general services

Name	Designation	Station	Trainings/Workshops	Duration	Convener	Award
Nakiwala Cathy	Office Attendant	Katego	None			
Opio Joseph	Driver	HQ	Code/ Ethics of driving	2	FUE	Certificate
Tuhwerirwe Justus	Driver	Kabale	CMIS	1week	RHU	N

### Monitoring and Evaluation

Name	Designation	Station	Trainings/Workshops	Duration	Convener	Award
Wannyana Mary	IMA	Iganga	CMIS	2	RHU	NONE
			GCACI P2P	3	RHU	NONE
			M&E Training	4	RHU	NONE
			GCACI PRM	5	RHU	NONE

### Finance

Name	Designation	Station	Trainings/Workshops	Duration	Convener	Award
Odongpiny Brian	A/C Asst	Arua	Annual Dissemination	2	RHU	N
Achom Dorothy	A/C Asst	Lira	Annual Dissemination	2	RHU	N
			GCACI Annual review	3	RHU	N
			Cluster meeting	3	RHU	N
			P2P Learning & Social Accountability	3	RHU	N
Chebijira Joyce	A/Cs Asst	Apac	Annual dissemination	1	RHU	N
Nantume Annet	A/Cs Asst	Iganga	VDMS	1	RHU	N

Name	Designation	Station	Trainings/Workshops	Duration	Convener	Award
Macho Keneth	A/Cs Asst	Mbale	Financial Mgt training	7	Abt Associates	Certificate
			Business training	3	Abt Associate	N
			Entrepreneurship training	5	RHU	N
			APB Workshop	1	RHU	N
Ngiire Susan	A/Cs Asst	Tororo	VDMS	1	RHU	N
Nalunkuma Hope	Accountant	HQ	Fraud & Money laundering	1	ICPAU	Certificate
			NGO Seminar	1	ICPAU	Certificate
Atuhairwe Jesca	A/Cs Asst	Bushenyi	GCACI Annual review	3	RHU	N
			P+ Partners meeting	1	RHU	N
			IGD against GBV	4	RHU	N
			Launch of Bushenyi District Local Action	1	Bushenyi DLG	N
			Socio- cultural influences on health behaviours	1	Minority Health International Research Training	Certificate

## Programmes

Name	Designation	Station	Trainings/Workshops	Duration	Convener	Award
Nanfuka Agatha	G & Y Officer	Hoima				
Mugisha Allan Armstrong	G & YA	Hoima	Dev't of Youth engagement strategy	5	RHU	N
Kiwanuka Alex	Youth Officer	HQ	Universal Periodic review processes	3	COW Foundation	N
			PMEL- Outcome harvesting in programmes	4	RHRN	N
			Advocacy FOR Budget tracking & monitoring	2	AGHA	N
			NEAPACHO- Africa	3	PPD/IPPARO	N
			Defend defenders security mg't	1 week	HRAPF	N
Chemutai Consolate	Project Officer	Kapchorwa	Programme H	5	Sonke	N
			Dev't of IECs	5	Sonke	N
			GTA	5	Sonke	N
Tugume Joseph	Project Officer	Kiryandongo	ICFP	6	RHU	N
			Dev't of Youth engagement strategy	4	RHU	N
			Orientation for YETA staff	5	NCBA/CLUSA	N
Matovu Quraish	Youth Coordinator	HQ	Master Trainer- SRHR	2weeks	MUSPH	N
			Meaningful Youth participation	5	SRHR Alliance	N
			Whole school approach- learning & reflection	3	STF/ Rutgers	N
Mulesa Dominiko	P.O	Bugiri	GUSO review & planning	5	SRHR Alliance	N
			International GUSO Planning & review	5	IPPF ARO	N
			ICFP	5	IPPF ARO	N



Name	Designation	Station	Trainings/Workshops	Duration	Convener	Award
Dr. Peter Ibembe	DOP	HQ	Steering committee meeting	1	Save the Children S.A	N
			W2A Planning meeting	2	ARO	N
			QoC Social Accountability	1	ARO	N
			ICFP	5	ICFP	N
			SST Kick off orientation meeting	1	Rutgers	N
Oguttu Geoffrey	P.O	Arua	ToTs on programme H	5	Sonke Gender Justice	Certificate
			Human rights defenders workshop	2	CEHURD	Certificate
			P+: Partners meeting	5	RHU	N
			GTA Advocacy	3	Rutgers	N
Agnes Apio	P.O	Lira	Dev't of Youth engagement strategy	5	RHU	N
			ICFP	5	ICFP	N
			After action review training on YETA	3	NCBA/CLUSA	N
			YMEL Reporting & Register tools	5	NCBA/CLUSA	N
Priscilla Nabatanzi	P.O	HQ	Youth engagement strategy	6	RHU	N
			ICFPC	5	RHU	N
			Planning workshop with DFPA partners	2	RHU	N
			Fred Sai dissemination	5	IPPF/PPG	N

## Advocacy and communications

Name	Designation	Station	Trainings/Workshops	Duration	Convener	Award
Richard Mugenyi	ACM	HQ	Online policy tracking tool	3	IPPF ARO	N
			Supporting local advocacy: Shifting the balance of power	2	Hewlett Foundation	N
			3rd FP Expenditure Tracking Meeting	5	PAI	N
			Africa regional dialogue on gender equality & rights	2	IPPF ARO/ UNFPA	N
			High level political forum on SD	8	UN	N
			ICFP	6	RHU	N
Raymond Ruyoka	Advocacy Officer	HQ	RTE	5	DFPA	Y
			E-Learning course on SRHR innovations	5	DFPA	Y
			International dialogue on Population & Dev't	3	GIZ & IPPFCO	Y
			Asia-Pacific on CPD	3	GIZ	Y
			Climate change conference	8	UNFCCC	N
			Africa Regional conference on sustainable dev't	5	IPPFARO	N
			National SDGs conference 2018	2	OPM	N

# Risk management, compliance and internal audit function

Reproductive health Uganda has a fully functional internal audit function with relevant policy frameworks and support of management and Board. The mandate of the audit function is to ensure adherence to the National laws and regulations, organisational policies and donor requirements. Following implementation of the organisational development staffing recommendations, this function is now headed by a Manager Audit and Compliance formally internal auditor.

By structure the function reports on quarterly basis to the Programme and Finance committee which contains among others evaluation of internal control systems, compliance and other mandatory requirements, risk profile updates and incidence reporting.

This function works to promote transparency, integrity and accountability at different levels of organisation's operations and greatly helps the entity to detect, deter and manage risks.

The human resources department also ensures that all new staff are oriented on RHU's code of conduct and anti-corruption policies. According to the anti-corruption policy all RHU's Board members and senior management are expected to complete the conflict interest declaration forms on annual basis. RHU, in line with the postulates of the International Planned Parenthood Federation (IPPF), to which it is affiliated, adopted 'zero tolerance' to corruption.

This anti-corruption policy applies to all volunteers, employees, and the Board at Reproductive Health Uganda (RHU). In 2018, the risk register was analyzed and updated, presented to the governing body for review and input, using the Mango Business Health Check tool, the risk profile of entity is presented as follows.

## **Risk management, compliance and internal audit function**

RHU knows and appreciates the need to keep updated with the risk profile of both the institutions operations and processes. To this end RHU prioritizes risk management

through the Audit and Compliance function. At board level the board gets regular updates on the risk register and periodic reports on various aspects of risk in the institution.

In general, the board sets the risk appetite for the institution. In the year under review this role was further strengthened during the staff review and restructuring exercise that resulted into the elevation of the function from a functional desk to unit under Manager Audit & Compliance.

For the periodic under review RHU has complied with the various requirements which include but not limited to donor report deadlines, statutory remittances to URA and NSSF, renewal of licenses for clinic and laboratory, filling of returns to the NGO board and URA.

This fosters a convenient and easy working relationship with government entities and regulators and promotes transparency and accountability. In relation to the above the institutions operations were subjected to a financial health check using the Mango business health check tool as depicted in the table below.

Key activities undertaken by this functions include, routine reviews of operational details, analysis and documentation of the risk profile, maintenance and update of the risk register, Review of key contractual documents prior to signing and conducting investigations/ inquiries on issues where incidences are report.

## Institutional risk profile ratings (2018)

Section	Score	High Risk	Medium Risk	Low Risk
1. Planning and budgeting	39	0 - 25	26 - 40	41 - 50
2. Basic Accounting Systems	55	0 - 30	31 - 50	51 - 60
3. Financial reporting	30	0 - 20	21 - 35	36 - 40
4. Internal controls	70	0 - 40	41 - 60	61 - 75
5. Grant management	30	0 - 15	16 - 25	26 - 35
6. Staffing	20	0 - 20	21 - 30	31 - 40
<b>Total Score</b>	<b>253</b>	<b>0 - 150</b>	<b>151 - 240</b>	<b>241 - 300</b>

The function also renders support to policy development, policy awareness and review processes from time to time when such are required by the governing body. The function also prepares the entity for external audit processes and works to ensure that audit recommendations are followed up and implemented at different levels.

### Principal risks and uncertainties

RHU Management and Board have identified and reviewed the strategic, business and operational risks faced by the Association and are satisfied that reasonable steps are being taken to mitigate exposure and impact. Major risks identified are:

- Changes in funding mechanism by key partners including working through consortium arrangements
- Legal and regulatory changes affecting NGO operations in Uganda and beyond
- Policy changes in Uganda's health sector
- Media insensitivity in regard to actively reporting Sexual and Reproductive Health interventions
- The impact of the economic environment on our ability to raise funds cost effectively and the implications of reduced resources available to deliver aspirations of our new strategic plan

Mechanisms to identify, manage and mitigate the impact of risks include the annual planning process and maintaining a risk register which RHU senior management and Board updated during the year.

We have also paid particular attention to the management of certain financial risks over 2018 including, diversifying our income sources, investment in fixed deposits as well as enhanced financial compliance and reporting in line with the International Planned Parenthood Federation requirements and Companies Act 2006 disclosure requirements.

Assumptions for the successful implementation of our four outcome areas.

- Continued support from International Planned Parenthood Federation and other funding partners
- Conducive regulatory environment for operation of NGOs in Uganda
- Good governance upheld by RHU management and Board
- Political stability in all parts of Uganda where RHU operates
- Transparency in operations
- Improved public private partnerships
- Continued government support to RHU activities including supply of family planning commodities

Additionally, the organisation maintains and updates a risk register that highlight key potential risk and the mitigating strategies. This register is also presented to the board for approval upon being updated.

## Risk register (2018)

Risk	Impact	Likelihood	Rating 1-6	Process in place	Action plan	Basis of rating and maintaining the Risk on the Register	Responsible persons
Legal and regulatory changes that affect RHU's reputation	H	L	3	Effective engagement of relevant policy makers through advocacy  Aligning the RHUs tools with national laws.	Membership in various advocacy forum.  Keep tracking changes in the country laws and policies and standards that affect RHUs operations.	RHU work is regulated by several government bodies, specifically the national laws, MoH guidelines and international protocols, much as these would highly impact on the operations of RHU, the likely hood is low because all RHU policies are aligned to the national and international guides.	ED
Policy Changes in the health sector	H	M	3	Maintaining good working relationship with government health sector.  Appropriately adjusting to suit the trends in the sector wherever there are changes	Where appropriate following the MoH guidelines and protocols in all operations.  Work through networks, coalitions to advocate.  RHU should devise appropriate mechanism to avert or minimize the adverse effects of such risk.	RHU work is regulated by several government bodies, specifically the national laws, MoH guidelines and international protocols, much as these would highly impact on the operations of RHU, the likely hood is low because all RHU policies are aligned to the national and international guides.	ED
Competition with other NGO's	M	H	5	Having a clear line of direction depicted in the strategic plan.  Maintaining high quality of services  Forming partnerships with organisations that carry out similar, complimentary or related services.	Ensure adherence to the values in the strategic plan.  Comply with provisions of partnership management manual for guidance on how to deal with partners.	The NGO terrain is ever becoming very competitive, there are many new players doing the same business as RHU. And the donors are becoming more strict on funding. Much as the Impact of this would be medium, the likely hood of happening is high hence the high rating.	ED
Recruitment of dishonest and incompetent staff	H	M	4	Ensure adherence to the standard recruitment process following the processes as laid in the Human Resources manual.	Conduct free and fair recruitment process to enhance recruitment of honest competent persons.  Dismiss dishonest and incompetent staff wherever such cases are found.	RHU has strong recruitment procedures that ensures that the right people are appointed in the various positions, however, people change hence the risk and the medium rating .	GHRM
Offer of low quality service/ineffectiveness	H	M	3	Known Standard minimum package for services offered at RHU outlets.  Minimum recruitment qualification requirements for service providers  Adherence to MoH service delivery guidelines  Regular quality of care assessment in RHU outlets	Conduct periodic QOC assessment in all outlets.  Conduct appraisal for service providers annually	RHU's core business is service delivery, anything that affects service delivery poses a big risk to the organisation. However because of the high quality of care efforts, this risk is of low likely hood.	CSM

Risk	Impact	Likelihood	Rating 1-6	Process in place	Action plan	Basis of rating and maintaining the Risk on the Register	Responsible persons
Sustainability risk- strategic	H	M	4	RHU has a resource mobilization strategy to cope with the increasing need to expand its operation in coverage.  Internal revenue generation mechanism (fee for service membership, institutional fee etc).  Sustainability issues and integral component during project proposal development.	Ensure that project writer cater for cost of activity sustainability  Develop an efficient internal revenue generation system.  Strengthening the provision of the highly specialized services delivery component that would attract more revenue resources.	This is high risk area, much of the work in RHU is project based, and as such short term. Bridging through the different projects is a real risk as staff and programmes come to an end at the end of each project. And donors have different priorities.	ED/DOF
Foreign exchange rate fluctuation risk	H	M	3	Proper budgeting process that puts in to consideration foreign exchange fluctuations  Liaising with IPPF regional office to cover force losses whenever they occur	Proper budgeting	Uganda's forex market is highly volatile, the rates change regularly affecting already planned and budgeted operations. However sometimes the exchange brings more funds in terms of exchange gains, hence the medium risk rating.	DOF
Fraud, embezzlement, corruption, etc	H	M	3	RHU has a sound accounting system that ensures completeness and accuracy of its reports, operations and processes.  Various RHU tools exhaustively provide for penalties and punishments in case of fraud and embezzlement.	Constant monitoring of processes, activities, records and operations by both internal and external parties.  Regular internal audit reviews to ensure adherence to regulations and crews.  In process-reviews by various parties	Uganda 's risk corruption index is one of the highest in the region. From the broader perspective RHU has to keep keen watch of whatever happens to avoid loss due to fraud and corruption.	ED/IA
Liquidity and cash flow risks	H	H	5	RHU monitors its liquidity levels on a quarterly basis through budget monitoring.  Strict observance of budget lines especially in donor restricted funds.	Always refer to the respective budget line before processing payments.  Discourage taking on extra activities on expense centers within the course of a financial which weren't part of the APB.	Decline in the liquidity of the institution would imply that the institution is struggling to meet its obligations, and therefore would greatly affect the operation, hence the high rating	DOF
Data loss through virus attacks, piracy, eaves-dropping, fire outbreak etc	H	M	3	It policy that guides the use of computers and other data handling equipments.  Regular data backups are done and stored off site.  Internet access is limited and controlled.  Central server for storage and sharing of corporate information.	Create un-corruptible access control password.  Discourage management staff from using mobiles drives or flashes.  Create rites for save directly on the staff server.	Data is critical for the reported operations of the institution, any loss of data would lead to inaccurate, incomplete and un realistic reporting . however due to the available data control processes, this is a medium occurrence risk	

Risk	Impact	Likelihood	Rating 1-6	Process in place	Action plan	Basis of rating and maintaining the Risk on the Register	Responsible persons
Commodity insecurity risk	H	M	3	<p>RHU has a reproductive commodity security</p> <p>Advocacy officer who works to promote commodity security within the organisation.</p> <p>RHU is in partnership with other Agencies including MoH, UNFPA and IPPF and local government to ensure that they jointly address commodity insecurity issues together.</p>	<p>Engage in more effective commodity security advocacy.</p> <p>Establish direct supply chain link with the Government supplied distribution system.</p>	Commodities are the base for service delivery, whenever there is stock out of these commodities it means that services are affected. This has a high impact on the operations of RHU, however this is of medium occurrence as RHU forges partnerships that works to ensure that essential commodities are available all the time.	LSC
Risk of loss due to theft, burglary, fire	H	M	4	<p>RHU facilities are secure with night guards and perimeter wall fence.</p> <p>RHU controls access to premises after official working hours.</p> <p>RHU monitors movement of asset and equipment out of its premises.</p>	<p>RHU should develop a more robust facility access system to track those entering and going out at any moment.</p> <p>RHU management should look in to the possibility of acquiring CCTV to monitor the movements especially within the head office.</p>	This is a high impact risk, however due to the spread of our branches a and operations security conditions differ from branch to branch.	LSC
Volunteer dominance and conflict of interests	H	L	3	<p>RHU constitution prohibits volunteers from taking up paid positions within RHU.</p> <p>Volunteers play just an oversight role in management and operations of RHU through the governing body.</p> <p>Members of the governing body (NEC) sign or fill conflict of interest form annually.</p>		If volunteers come to dominate the operations of the institution, this would be of high impact, however the strong policies and thorough orientation works to minimize this risk, hence the low occurrence.	GHRC

**GHRM** - Governance & Human Resource Manager

**ED** - Executive Director, **LSC** – Logistics and Supplies Coordinator, **DOF** – Director of Finance, **CSM**- Clinical Services Manager.

**RICT** - Records and ICT coordinator]

**Risk rating definition**

1 - Low risk

6 -High risk

# Financial report 2018

## Introduction

In 2018, RHU registered greater strides in its financial position compared to the previous years. IPPF continued to provide the guaranteed core funding in excess of **US\$ 1 million** as six new development partners came on board. Local revenue continued to grow as new collaborations were established with more promising partners. The visit of the International Planned Parenthood (IPPF) Director General Dr. Bermajo Alvaro was a clear sign of confidence from our international Partners. In 2019, we hope to consolidate our collaborations with DFID as we plan to implement the largest project ever with a project budget of over **£3.5 million**. The future and support from funding partners is promising more than ever before.

In 2018, we also witnessed the shilling continuing to weaken against the dollar, depreciating from UGX 3,640 in February to UGX 3,750 in December, 2018. This instability in the value of the shilling continued to increase operational costs resulting un anticipated budget variances.

To ensure that commercial banks reduced interest rates charged on loans, Bank of Uganda systematically reduced the central bank rate (CBR) from 9.5% in January to 9% by December, 2018. Since we invest most of our surplus funds in fixed deposits, the interest rates offered by banks on our fixed deposits reduced drastically, with the best offers going as low as 9% per annum. Fuel pump prices also rose from UGX 3800 early in the year to UGX 4,400 per litre of petrol by end of year. We had to request for the usual budget reallocations from some of our partners to balance our expensive travel costs.

## Resource mobilization

Reproductive Health Uganda aims to build long-term relationships with individual donors to secure ongoing financial support for our projects and campaigns. We are happy to report that RHU with support from IPPF established a collaboration with DFID to implement the Women Integrated Sexual Health -WISH project, the largest project ever implemented by RHU. It is anticipated that RHU is likely to avail its services in 2019 to record numbers more than ever before. IPPF guaranteed unrestricted funding of over US\$ 1 million was available to support activities not funded by other restricted projects.

The Clinic Services Manager together with a team of other staff from the specific thematic areas continued to spearhead resource mobilization strategies. The African Citizenship Initiative (ACI) is also a resource mobilization initiative intended to raise resources from volunteers to support RHU's programme areas. We aim to continue mobilizing resources from both local and international partners. Local revenue especially from clinic collections will be boosted by equipping the clinics with necessary equipment as well as continued marketing of our services. We hope to develop individual branches to enable them mobilize adequate resources to be self-sustainable.

The African Citizenship Initiative (ACI) is also a resource mobilization initiative intended to raise resources from volunteers to support RHU's programme areas. We aim to continue mobilizing resources from both local and international partners. Local revenue especially from clinic collections will be boosted by equipping the clinics with necessary equipment as well as continued marketing of our services. We hope to develop individual branches to enable them mobilize adequate resources to be self-sustainable.

RHU has continued to operate in a very competitive donor environment. It has therefore been the organisation's objective to strive and create new donor relationships but also to ensure that all the existing relationships are maintained.

### The new projects in 2018 included:

- Adolescent Sexual and Reproductive Health and Rights (ASRHR) at the fore
- Programme to Improve Sexual Reproductive Health Rights Policy and Service Environment in Uganda (PROMISE-Uganda)
- She Decides project
- Standing Strong Together (SST)
- Strengthening quality of Care for sexual and reproductive health services through Public Private Partnerships in Uganda (JTF Project)
- Women Integrated Sexual Health (WISH2ACTION project)

In line with donor trends, RHU continues to position itself to ensure that it increases its outputs in a most cost effective way. RHU will continue to pursue all opportunities available to increase its funding base.

### Value added statement

Value Added Statement Value added is calculated as RHU's revenue generated minus payments such as costs related to the four thematic outcome area of advocacy, youth, service delivery and sustainability as well as cost of depreciation and amortization. The resulting amount is distributed to the four outcome areas, commodities and employees.

The total wealth created by RHU in 2018 is UGX 26.4 billion as shown in the value-added statement below.

Value added	UGX '000	
	2018	2017
Grants from IPPF	3,706,407	2,787,899
Grants from other Partners	16,516,715	12,688,726
Locally generated revenue	2,294,290	2,091,593
Commodity grants	3,968,651	2,962,400
Wealth created	26,486,063	20,530,618
Distribution of wealth	UGX '000	UGX '000
Outcome areas 1- Advocacy	2,644,395	2,237,863
Outcome areas 2- Youth/ CSE	6,411,812	3,096,788
Outcome areas 3- Service Delivery	9,928,039	8,021,726
Outcome areas 4- Sustainability	1,854,630	1,961,039
Depreciation and Amortization	590,364	631,270
Employees	5,056,823	4,581,932
Wealth distributed	26,486,063	20,530,618

### Unit cost per service

The unit cost per SRH service was **UGX 21,189**, while the Unit cost per client served was **UGX 3,579**.

Unit cost per SRH service offered = **UGX 26,486,063 / 1,250 = UGX 21,189** per service.

Unit cost per client served = **UGX 26,486,063 / 7,400 = UGX 3,579** per client.

The increment in the unit cost of services compared to the previous year was a result of increase in the number of outreach services where services are offered free of charge to vulnerable clients.

Unit cost per service	2018	2017
	UGX '000	UGX '000
Total cost	26,486,063	20,530,618
SRHR Services offered	1,250	1,200
Clients served	7,400	7,000
Unit cost per SRHR service	21,189	17,109
Unit cost per client served	3,579	2,933



## Closure of some projects

Many of our projects have a funding cycle and when it terminates the project ends. Some projects are renewed sometimes in another form and with a new project name. therefore, in 2018 most of the closed projects were replaced by new ones or renewed in another form.

Key to note is that RHU continued to miss out on opportunities related to USAID funded projects due to our position on the gag rule.

Despite those challenges IPPF and RHU have continued to lobby for support from other development partners and countries. Some embassies such as the Netherlands have also indicated willingness to support.

We continued to close the gaps that existed and were limiting our ability to generate more revenue from our clinics. These mainly related to drug stock outs and lack of diversification in our service package. With the advent of new projects such as WISH and SST, we continue to create new products and services in our clinics. The following projects closed last year.

## Phase-out projects in 2018

- Accelerating Change Unlocking Sexuality Education in Uganda (ACCUSE)
- Accelerating International Conference on Population and Development
- Cervical Cancer Screening and prevention Therapy (CCS & PT)
- Closing the Gap project
- Gestational Diabetes in Central Uganda (GICU)
- Integrating population dynamics, SRHR and climate change adaptation (climate change)
- Prioritizing domestic funding for FP and Adolescent access to SRHR information and services (Hewlett)
- U-Decide project

## Appreciation

As noted above, our activities are greatly supported by our various funding partners, both local and international. We therefore wish to thank all our funding partners for supporting our efforts to fight for the sexual and reproductive health and rights of the people of Uganda.

Special appreciation goes to the following funding partners;

- Bill and Melinda Gates Foundation
- Danish Agency for International Development (DANIDA)
- Danish Family Planning Association (DFPA)
- DFID
- Hewlett Foundation
- International Planned Parenthood Federation (IPPF)
- Japanese Embassy
- John Hopkins University
- Master Card Foundation / CLUSA / NCBA (National Cooperatives Business Association)
- The Netherlands Foreign Affairs Ministry
- Rutgers WFP
- Save the Children - South Africa
- Sonke Gender Justice – South Africa - Rutgers
- Uganda Government/MoH & Local Governments
- United Nations Population Fund (UNFPA)
- Among others

## Income received in the year 2018

The organisation received cash before considering in kind donations in 2018 of **UGX 20,223,122,000** compared to **UGX 15,478,625,000** received at end of 2017.

The overall organisational income, after consideration of the in kind donations and movements in inventory/ fixed asset funds as at end of 2018, amounted to **UGX 22,486,063,000** representing an increase of **29%** in overall incomes compared to **UGX 20,530,618,000** in 2017.

There was also an improvement in local revenue collections of **21%** from **UGX 1,064,940,000** in 2017 to **UGX 1,293,269,000** in 2018.

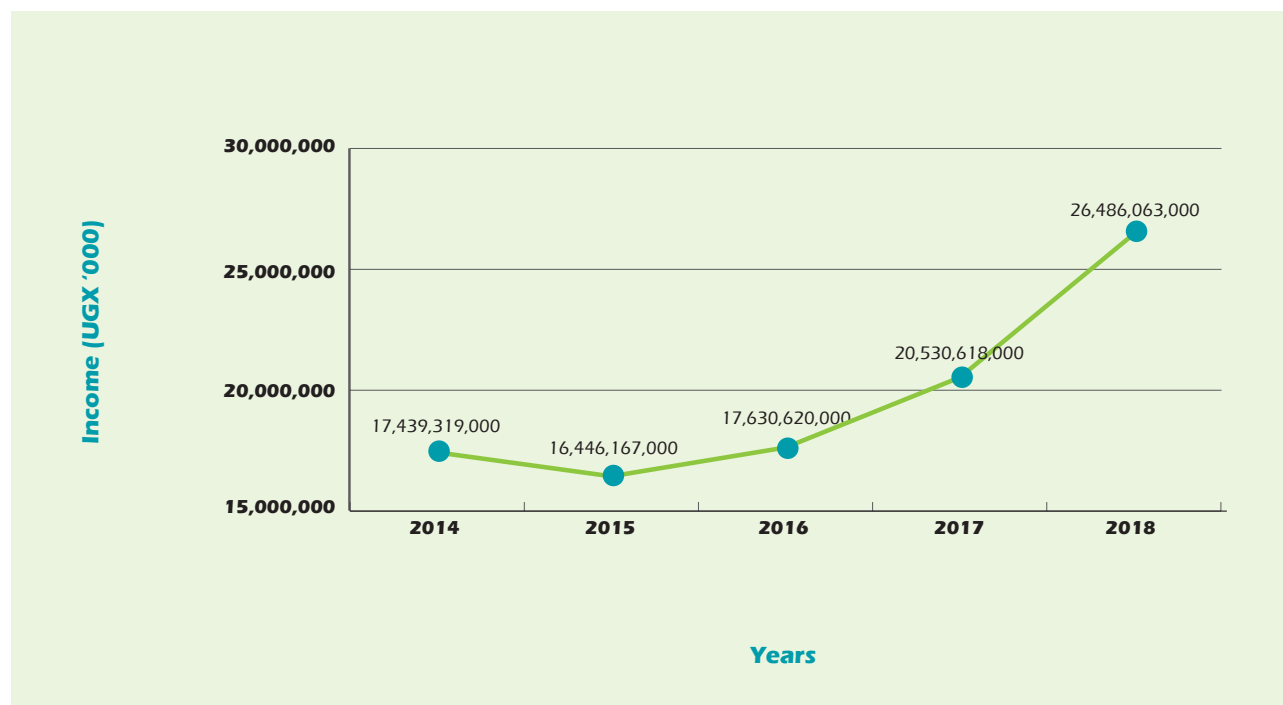
In kind donations of assets and inventory increased from UGX 2,176,219,000 in 2017 to **UGX 3,269,983,000** in 2018, reflecting an increase of **50%**. This was attributed to the design of the new projects which emphasised support to supplies and logistics.

Overall income generated in 2018 of **UGX 26,486,063,000**, exceeded the conservative budgeted income in the same year of **UGX 13,510,441,000**

### Trend of funding over the 5-year period (2014-2018)

Year	Trend of income	Changes	Causes
2014	17,439,319,000	N/A	Base year for comparison
2015	16,446,167,000	(6%)	End of main USAID project and closure of some projects Reduction of UNFPA grants received
2016	17,630,620,000	7%	Increase in the IPPF grants New projects emerged
2017	20,530,618,000	16%	Supplementary funding from IPPF Emergence of new projects including some big projects
2018	26,486,063,000	29%	Emergency of new projects like WISH, SST, JTF among others and scale up of activities by existing projects like Prevention Plus, GUSO and RHRN as well as increase in clinic collections.
Average	19,706,557,400		Annual average grant income over the 5 year period

### Graph showing trends of income over the 5 year period (2014-2018)



## Expenditure

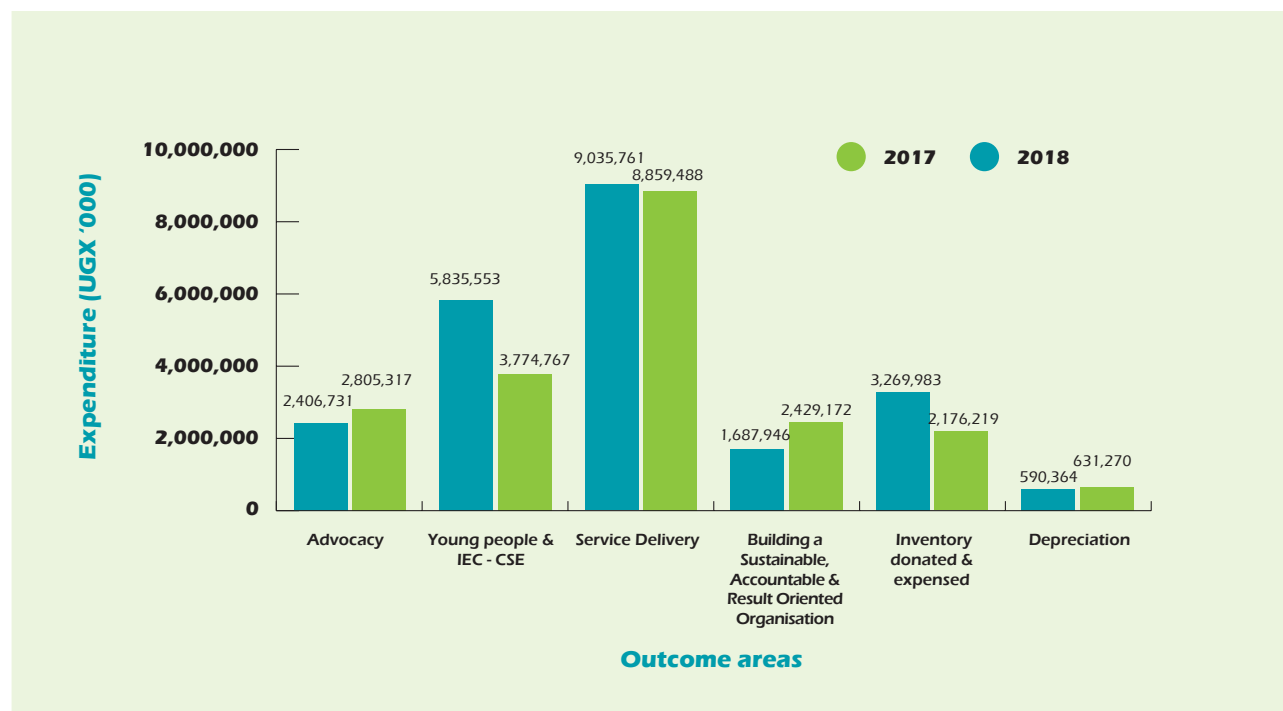
The total expenses of the organisation for the year 2018 amounted to **UGX 22,826,338,000** compared to **UGX 20,676,233,000** in 2017.

### Analysis of expenditure by outcome areas (UGX '000)

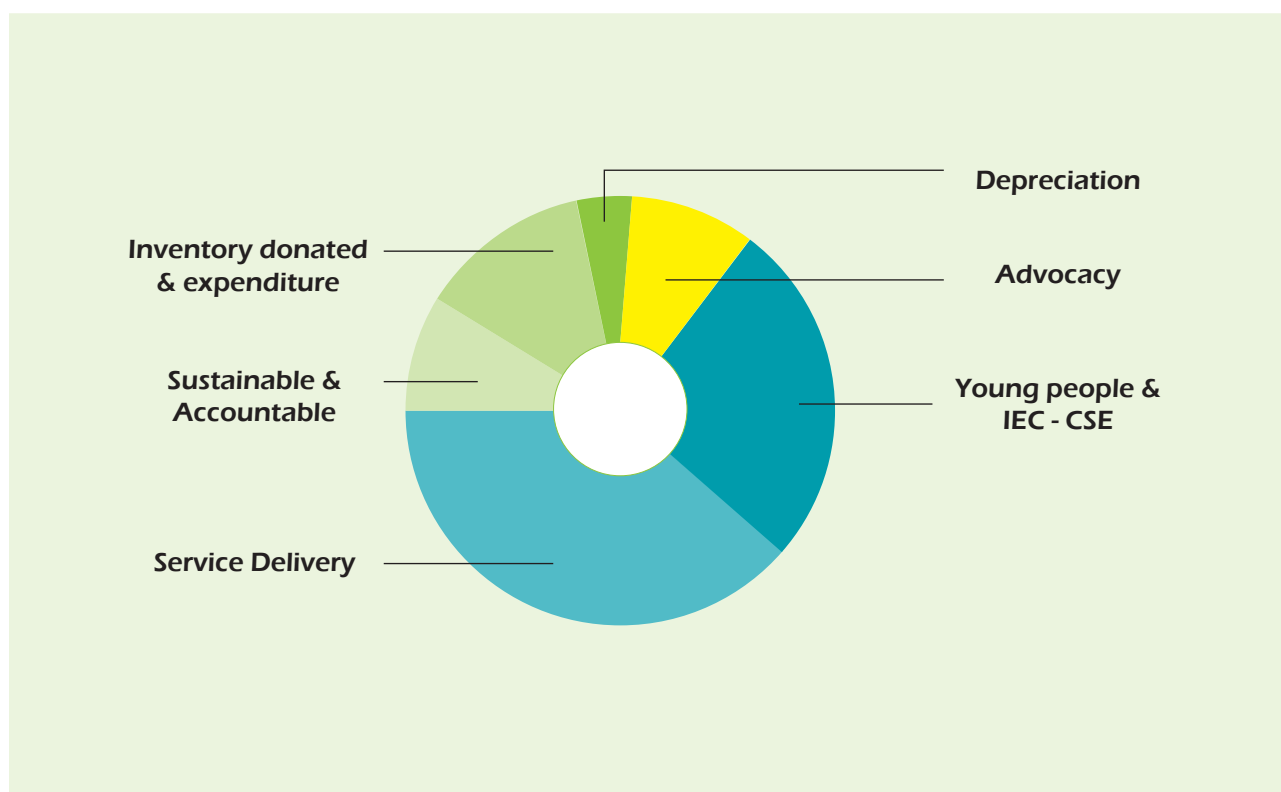
OUTCOME AREA	2018	2017	Variance
	UGX '000	UGX '000	
Focus Area I: Advocacy	2,406,731	2,805,317	-17%
Focus Area II: Young people & IEC - CSE	5,835,553	3,774,767	35%
Focus Area III: Service Delivery	9,035,761	8,859,488	2%
Focus Area IV: Building a Sustainable, Accountable & Result Oriented Organisation	1,687,946	2,429,172	-44%
Inventory donated & expensed	3,269,983	2,176,219	0%
Depreciation	590,364	631,270	-7%
<b>Total project expenses</b>	<b>22,826,338</b>	<b>20,676,233</b>	<b>9%</b>

**Note:** Overall, the organisation's expenditure increased by 9% compared to last financial year, due to increased projects and volume of activity.

### Graph showing expenditure by outcome areas (2017-2018)



## Proportional expenditure on different areas



### Facility improvement

With support from IPPF core grant, we acquired a motor vehicle Toyota Hilux double cabin at UGX 141.7 million. Other partners supported the acquisition of three Yamaha motor cycles at UGX 15.5million each and three Yamaha generators at UGX 3.5 million each. Medical equipment in form of two Bio-chemistry analyzers were acquired at UGX 7,500,000 each. These went to two branches Katego and Mbale. Four Hematology Analyzers machines were bought at UGX 18,000,000 each and were given to four branches Katego, Mbarara, Kabale and Fort portal. Two Ultra sound scanners were also acquired each costing UGX 21,500,000, these were sent to Bwaise and Bushenyi.

These are among other efforts done to improve service delivery at our clinics. Several other assets were also acquired with support from other partners. We have also endeavored to improve procurement and delivery of drugs to the various clinics to minimise stock outs and improve service delivery. On

a challenging note, we recognise that there are a number of pending facility improvement requests at various clinics. Funds allowing, these will be prioritised in 2019. There has been a deliberate effort to include facility improvements in most of the new projects that emerge.

We are confident that these improvements in the organisation's infrastructure will enhance our capacity to serve more clients.

### Statement of financial position (Balance sheet)

The organisation's total assets increased over the last year. The total asset base as at 31<sup>st</sup> December 2018 was **UGX 16,548,601,000** (comprised of fixed assets and current assets) as compared to **UGX 12,687,236,000** in 2017. This 30% increment in the asset base was associated with new equipment acquired and increase in inventory levels.

## Audited accounts

ERNST & YOUNG Certified Public Accountants, audited the organisation books of accounts for the year ended 2018. The audited accounts include a Statement of «Income and Expenditure and Changes in Fund Balances (Income statement), Statement of Financial Position (Balance sheet); and Statement of Cash Flows. The Programme and Finance Committee received and reviewed these audited accounts and recommended them to NEC for their subsequent reviews and further considerations. They were passed by NEC and recommended for approval to the National Council. The auditors expressed an un-qualified opinion.

## Awards and recognition in 2018

Reproductive Health Uganda scooped the best award ever in the prestigious Financial Reporting (FiRe) Award competitions, organised by the Institute of Certified Public Accountants of Uganda (ICPAU), Capital Markets Authority (CMA) and Uganda Securities Exchange (USE) for the overall design and presentation of its annual report under NGO category. This was the highest award ever attained in those competitions. For the last 4 years RHU has won four prestigious trophies in Financial Reporting setting up a standard that is now envied by many NGOs in the country. RHU's image as a credible organisation was enhanced.

# Our clinic contacts

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## Apac Clinic

Plot 39, Owiny-Okullu Road,  
Apac Town  
Tel: 0392-00022/0700-390212

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## Arua Clinic

Plot 49A, Municipal Close  
Tel: 0392-000221/0700390213

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## Bushenyi Clinic

Liberation Rd off Nyanuko Rd,  
Bushenyi Town  
Tel: 0392-000222/0700390214

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## Bwaise Clinic

Bwaise 2 Mukalazi Road after Jaberu Kasagazi Mosque  
Tel: 0392-000234/0700390227

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## Fort Portal Clinic

Plot 2a Booma Road  
Opposite Tooro Club next to Fort Montel  
Tel: 0392-000223/0700390215

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## Gulu Clinic

Auma Road- behind Holy Rosemary Church- Gulu  
Tel: 0392-000224/0700390216

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## Hoima Clinic

Plot 6/7 Butyaba Close, Hoima Town  
Tel: 0392-000225/0700390217

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## Iganga Clinic

Plot 9, Kaliro Road  
Tel: 0392-000226/0700390218

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## Kabale Clinic

Plot 5 Micho road Central Division,  
Kabale Municipality  
Tel: 0392-000237/0700390266

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## Kapchorwa Clinic

Plot 29/30 Kapchorwa Road,  
Kapchorwa Town  
Tel: 0392-000227/0700390219

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## Katego Clinic

Plot 2 Katego Road, Kamwokya- Kampala  
Tel: 0392-000233/0700390226

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## Lira Clinic

Plot 29B, Obote Avenue,  
Lira Main Street  
Tel: 0392-000236/0700390153

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## Luwero Clinic

Kati Kamu Sub-County- behind Community Centre  
Tel: 0392-000228/0700390220

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## Mbale Clinic

Block 3, Namunsi Road,  
Nakaloke Trading Centre Mbale  
Tel: 0392-000229/0700390221

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## Mbarara Clinic

Plot 1 Karekoona, Lugazi Mbarara  
Tel: 0392-000230/0700390222

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## Mityana Clinic

Plot 48, Mityana Road  
Tel: 0392-000231/0700390224

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## Owino Clinic

St Balikuddembe/Owino Market  
Tel: 0392-000235/0700390228

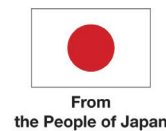
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## Tororo Clinic

Municipal Council Ground, opposite post Office,  
Tororo Municipality  
Tel: 0392-000232/0700390225

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# RHU donors and partners in 2018



# ANNUAL REPORT | 2018

## REPRODUCTIVE HEALTH UGANDA

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