

**External Evaluation of  
District Development Cooperation Programmes  
in Kalangala District in Uganda**

**FINAL REPORT**

**[V3-2]**

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## Executive Summary

1. The Kalangala District Development Programme (KDDP) (“the Programme”) was implemented by Kalangala District Local Government (KDLG) during the period 2006-2015, largely financed and supported by Icelandic International Development Cooperation (ICEIDA). Based on needs assessment surveys in 2005, a multi-sectoral programme was designed, covering the strengthening of district and sub-county governments and support to the main sectors: fisheries (including WATSAN), education, health (2006-2010) and tourism (2011-2013). The Education Component continued into a consolidation phase 2016-2019 (KIEP), still ongoing at the time of this Evaluation.
2. Kalangala comprises 84 islands (Ssesse Islands) widely scattered in Lake Victoria, out of which 64 are populated, many being “hard-to-reach”. Population during the last census in 2014 was 53,400, estimated to be around 60,000 in 2018. KDDP was clearly relevant, addressing the main sector challenges of the District, largely being lack of basic infrastructure and services (too low revenue base) to reduce the widespread poverty amongst the marginalised fishing communities. The Programme was at the time of planning, and still was during the Evaluation, very much in line with the national policies and strategies for economic development, poverty eradication and decentralisation of the government system.
3. KDDP was also well in line with Iceland’s strategies for bilateral development cooperation, always having fisheries as an entry point to ICEIDA’s international development cooperation support. As capacity in the District was very limited, ICEIDA had to take on a pragmatic and more pro-active role than intended during the first phase of the Programme (2006-2010), establishing a KDDP ICEIDA Office in Kalangala with a KDDP Project Manager and 4 senior officers. During the second phase (2011-2015), the district administration took a direct managerial role in the implementation with ICEIDA being merely a financier and supporting with technical assistance, including monitoring of implementation progress.
4. The overall objective of the Programme is focussing on “sustainable livelihood and equitable socio-economic development”, and immediate objectives (outcomes/purposes) were orderly formulated for each of the programme components:

Local Government Administration: “to facilitate and support the efforts of the Kalangala District Local Government in achieving efficient and effective leadership, administration and management of public, civil society and private agencies in Kalangala District by 2015”. The reference to the private agencies is not understood by the Consultant, as no activities directed to this sector were implemented. (A more relevant formulation in the Project Document however, was not kept as the valid formulation).

Fishery and WATSAN: “to facilitate and support the efforts of the Kalangala District Local Government in achieving sustainable quality fisheries production and marketing in Kalangala District, by 2015”. (In Phase II the formulation changed to “... improved fisheries production...”, which is more appropriate).

Education: “to facilitate and support the efforts of the Kalangala District local government in achieving equitable access of the population to quality education in Kalangala District by 2015”.

Health: “to facilitate and support the efforts of the Kalangala District Local Government in achieving equitable access of the population to quality health services in Kalangala District by 2015”.

The formulated logframe elements are largely relevant, but without any SMART indicators, and without target values connected to the outcomes, thus having limited value as a monitoring and evaluation (M&E) tool.

5. The overall effectiveness of the Programme has been satisfactory. The managerial set-up, with a Project Supervisory Committee (PSC), a Project Management Team (PMT) and two Project Implementation Teams (PITs), has been appropriate. The decision of ICEIDA to be pro-active in the first phase was decided in order to maintain a certain implementation momentum and to be able to show some tangible results in this phase while capacity was built with the district and sub-county governments. The outputs were delivered largely as planned, with some delays in the infrastructure development in Phase I.
6. The Health Component, with activities spread widely out, was discontinued in 2010, mainly due to lack of local staff to build capacity with. Sponsoring of the education of two medical doctors and 3 medical assistants continued into Phase II, proving to be a useful investment, as the two doctors remained in Kalangala. The Tourism Component was closed after 3 years with no tangible results, and with no involvement of the private sector, which surely is a stakeholder that is imperative to successes in tourism at large. These activities were not continued due to lack of funding. The efforts towards the civil society, with 7 rounds of small grants to Civil Society Organisations (CSOs), could not even be detected at the time of the Evaluation (the summary reports from the small grants in the 2 phases were not available, although seemingly produced).
7. The outcomes, being the effects of the outputs, had indicators only partly adequately formulated and without target values. The post-harvest loss in fisheries has evidently been reduced and the revenue for fisheries has increased. The WATSAN structures on the fish landing sites are however deteriorating due to lack of O&M, except in Kasekulo-Ttubi. Positive results can clearly be found in the Education Component (construction of classrooms, toilets, kitchens, provision of furniture and textbooks, etc.), where enrolment of pupils in primary schools has increased, and Kalangala Primary Leaving Examination (PLE) results in the District are amongst the best in the country. There seems to be no visible outcomes from the Health Component efforts today, rather than some solar panels still being operational, and the medical doctors, which education was sponsored by KDDP, operating in the Kalangala Health Centre (HC).
8. Progress reporting was undertaken by the ICEIDA KDDP Programme Office during the first phase and by KDLG in the second phase. Progress reports are mostly focussing on activity progress and delivering of planned *outputs*. It is however noted that during Phase II the annual reports also have sections analysing performance against *outcomes* for each component, which is commendable. Monitoring was a shared responsibility mostly between ICEIDA and the District, but also with the Ministry of Local Government (MoLG) involved in joint missions. Most monitoring reports were prepared by the ICEIDA Senior Programme Officers in the Icelandic Embassy in Kampala.
9. Efficiency also seems to be satisfactory under the prevailing circumstances. Capacity building (construction of new offices, training of staff and procurement of equipment) in the District and sub-county governments has led to less staff turnover and has reduced the staffing gap. Efficiency with O&M in the sub-county governments are, however, not up to standards (deteriorating structures). ICEIDA has exercised far more flexibility in the funding modality than normally is the case with donors (added funds as needs have surfaced, appreciated by the District), but the management costs in the Programme seem to be on the high side.
10. Possible programme impact, being the longer-term effect beyond the planned outputs and outcomes, are based on field observations, key informant interviews and a household (HH) survey in 34 villages (of which 22 were “intervention villages”, in which KDDP directly supported fish landing structures, WATSAN facilities and/or schools). The 355 households interviewed have more female heads than reported in the Mid-term Review (MTR) HH survey in 2010 (35% against 21%). The increased school enrolment (due to improved learning environment) has led to higher population ratio of students/pupils now than in 2010 (34% against 6%), with girls attending schools even during

their monthly period (due to good sanitation facilities). 60% of the HHs believe quality of education is good/fair. Main occupation amongst the population is still farming, followed by fisheries. The only recognisable impact from the KDDP Health Component is the increase in Caesarean operations undertaken in Kalangala Health Centre by doctors educated with ICEIDA funding.

11. The Evaluation Team strongly believes that KDDP has contributed to the increased general livelihood of people in the target areas. 64% of the HHs reporting improved welfare since 2011, the majority due to increased income. 36% do not experience improved welfare, and 14% of the population reported lack of income and “*bad governance*” as reasons. A large percentage reports improved housing conditions, and 96% of the HHs has at least one mobile phone (45% have two), an improvement from around 50% in the baseline survey (2008). A rather low percentage of the population have recognised ICEIDA as the real funder of the improved education environment, due to lack of signboards announcing such funding.
12. 80% of the HHs considered water supply to be good/average, but a disappointingly low percentage of the population understands that payment for water services is required for achieving adequate O&M. A positive observation reflecting basic understanding of the hygiene issues: 96% answered that people would fall sick if they cannot maintain proper hygiene practices. On the other hand, the deteriorating WATSAN facilities and buildings in most fish landing sites might indicate lack of community ownership and understanding of the importance of O&M. A main reason for this situation might be the discontinuation of the Beach Management Units (BMUs) in 2015, which had a very negative impact on the operations of the landing sites in general. The present Fishery Landing Site Committees (FLSCs) have no formal mandate to execute any services and get no money to do anything.
13. With the capacity building in the local government administrations (training of staff, and construction of district and sub-county office buildings supplied with furniture, procurement of various equipment, etc.) the probability of institutional sustainability has significantly increased. However, the financial sustainability is unsatisfactory, as the district sub-county administrations have little (read: no) funds for proper O&M. The infrastructure, especially in the fish landing sites of Kyagalanyi, Namisoke and Kachungwa show clear signs of deterioration. The water supply systems in the two latter locations are not operated satisfactorily and run the risk of breaking down in the foreseeable future. The pumps are running on overtime as regards service, there is no chlorination of water anymore (no funds to buy chemicals), the toilets are lacking water for handwashing, etc. A positive exception is Kasekulo-Ttubi fish landing site on the main island Buggala, which is operated adequately with structures in good condition being well maintained.
14. It is noted that almost all the brass water taps everywhere have broken handles, and the surroundings of the water stand posts are partly filthy and unpleasant, also in the schools. The batteries in the solar systems installed in schools and health centres have limited lifetime and most of the ones initially installed under KDDP are not functioning anymore. Some new ones are purchased with local money but some cannot afford new ones. The district administration has no funding for undertaking inspection visits to the outer islands, and cannot advise in, or give direct support to, O&M, meaning the risk of further deterioration of infrastructure is large.
15. A main recommendation is that the donor should carefully assess the future ability of the recipients to undertake proper O&M of the developed infrastructure, and rather opt for simple, more appropriate technical solutions that the beneficiaries can afford to operate and maintain. May be handpumps are more suitable than solar pumping in hard-to-reach communities, especially where the villagers themselves have operational responsibilities? Community participation in implementation, even with free self-help, might increase the local ownership of the facilities and increase sustainability probability.

16. It is concluded that proper initial logframes with few realistic SMART indicators will ease the M&E work later. A simple “need-to-know” M&E system for infrastructure should be instigated, also in Kalangala District Local Government, so that follow-up, especially in remote islands, is possible. Also, awareness raising in communities, on proper personal hygiene practices and on the need for people to pay for water supply, must be continued. Sensitisation in schools on maintaining a clean environment around the water points should be initiated by the district administration. Finally, the broken brass taps in the water points must be replaced by more sturdy one-handle type of taps, and the urban type elevated water cistern in flushing toilets should be avoided in rural areas, with a manual bucket flushing system introduced instead.

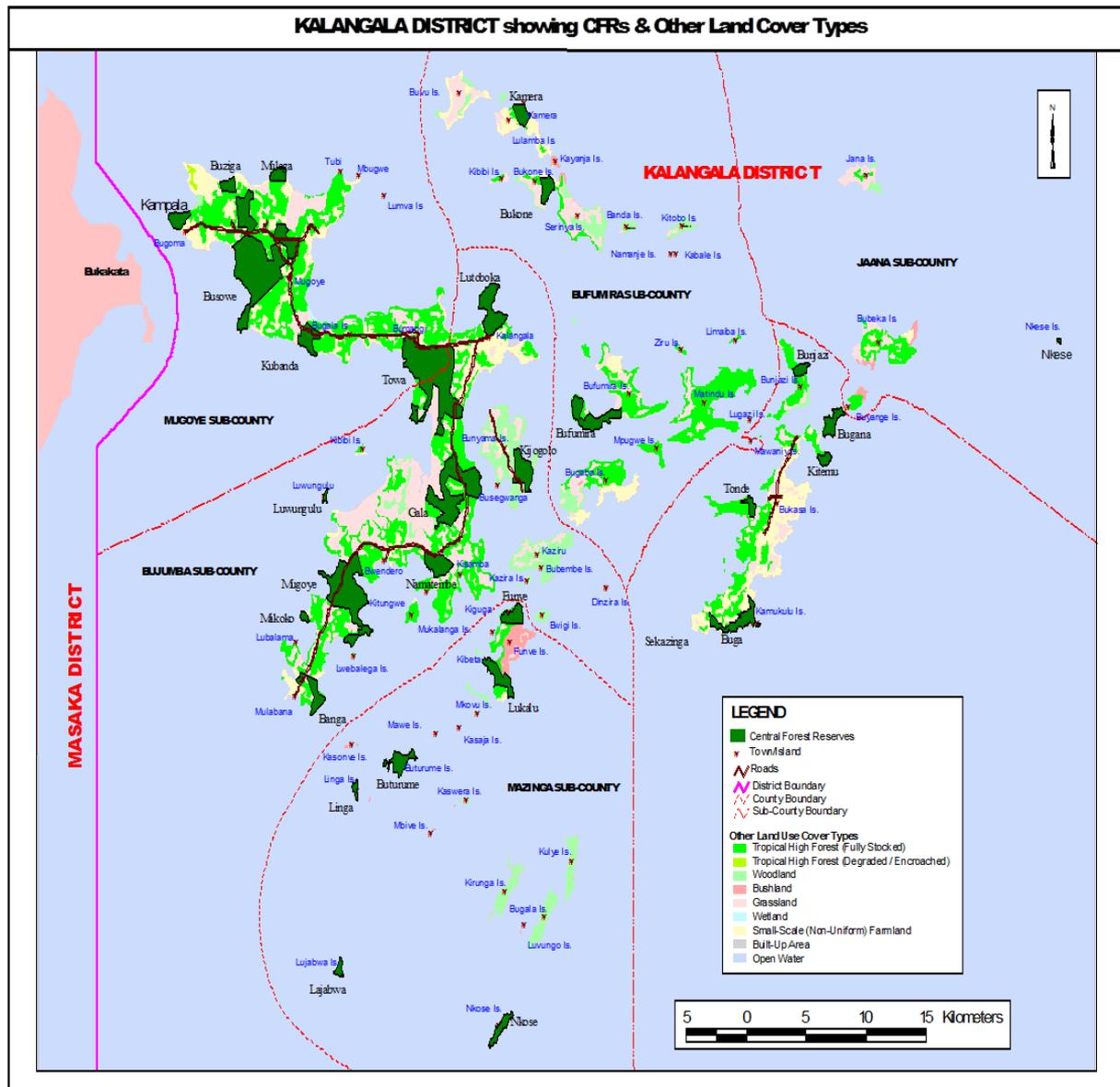


Figure 1: Map of Kalangala District. (More maps can be found in Annex 4)

## Summary of programme profile

Country	Uganda
Location	Kalangala District (Ssesse Islands)
Project Title	Support to Implementation of Kalangala District Development Programme (KDDP)
Project Number	UGA 430-40-0602
Project Period (Original)	01.09.2006 to 30.06.2015
Sector	Multisector: Agriculture (Fisheries); Social Infrastructure (Water and Sanitation, Education and Health); and Local Government.
Executing Agencies	Government of Uganda (GoU) through the Ministry of Local Government (MoLG) and Kalangala District Local Government (KDLG), and Government of Iceland (GoI) through the Icelandic International Development Cooperation (ICEIDA)
Implementing Agency	Kalangala District Local Government
Funding modality	Project support
Donor	Government of Iceland (ICEIDA)
Estimated Project Cost	USD 7,000,000
Initial commitment by ICEIDA	USD 5,760,000
Initial commitment by GoU/KDLG	USD 1,240,000
Revised Project Budget	USD 10,403,345
Final commitment by ICEIDA	USD 9,102,633
Final commitment by GoU/KDLG	USD 1,300,713
Amount disbursed (Actual Spent)	USD 10,396,140 (99.9%)
ICEIDA	USD 9,095,427 (99.9%)
GoU/KDLG	USD 1,300,713 (100%)
Expected project start date	1 September 2006
Actual start date	December 2006
Expected MTR Date (Midway)	2010
Actual MTR Date	2010
Original completion date	30 June 2015
Extended formal completion date	31 December 2015
Actual completion date	30 June 2016 (end of defects liability period)
Target Population	38,000 (2002 census) to 54,000 (2014 census). Estimate in 2018: 60,000 (time of End Evaluation)

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Thanks also to all the staff in the various departments in the Kalangala District HQs for setting aside time to meet with the Consultant and to provide the required information requested. A special thanks to Mr Mohammed Mukasa, Head of Human Resources Dept. in Kalangala Local Government, for setting up meetings with staff in all the departments. Thanks also to the many health care professionals, teachers, community leaders and members of fish landing site committees with whom the Evaluation Team was fortunate to interact.

The Consultant is responsible for any misunderstandings or misinterpretations in the report.

## ACRONYMS AND ABBREVIATIONS

ARV	Antiretroviral drug (HIV/AIDS medicine)
BMU	Beach Management Unit
CAO	Chief Administrative Officer
CBMS	Community based maintenance system
CFO	Chief Financial Officer
CSO	Civil Society Organisation
CSP	Country Strategy Paper
CPI	Corruption Perception Index
DHIS	District Health Information System
DSA	Daily Subsistence Allowance
DTA	Data Tracking Mechanism
EEA	European Economic Area
EFTA	European Free Trade Association
EIA	Environmental Impact Assessment
FAL	Functional Adult Literacy
FALP	Functional Adult Literacy Programme (Uganda)
FDS	Fiscal Decentralization Strategy
FLSC	Fish Landing Site Committees
FY	Financial Year
GEF	Global Environment Facility
GER	Gross Enrolment rate
Gol	Government of Iceland
GoU	Government of Uganda
HC	Health Centre
HH	Household
HIV/AIDS	Human Immunodeficiency Virus/Acquired Immune Deficiency Syndrome
HQs	Headquarters
HUMC	Health Units Management Committees
IAF	Inter-Agency Forum
ICEMB	Icelandic Embassy in Kampala
ICEIDA	Icelandic International Development Cooperation

KADEFO	Kalangala District Education Forum
KADINGO	Kalangala District NGO Forum
KDDP	Kalangala District Development Programme
KDLG	Kalangala District Local Government
KIEP	Kalangala-ICEIDA Development Partnership: Development in Education Sector, 2016-2019 (a project)
KTDA	Kalangala Tourism Development Association
LG	Local Government
LLG	Lower Local Government
M&E	Monitoring and Evaluation
MDD	Music, Dance and Drama (in schools)
MDGs	Millennium Development Goals
MoLG	Ministry of Local Government
MoU	Memorandum of Understanding
MTR	Mid-term Review
NGO	Non-Governmental Organisation
NDP	National Development Plan
OECD DAC	Organisation for Economic Co-operation and Development's Development Assistance Committee
O&M	Operation and Maintenance
ORRI	Oracle based accounting system (used by ICEIDA)
OVC	Orphan and vulnerable children
PC	Personal Computer
PD	Project Document
PEAP	Poverty Eradication Action Plan
PHA	People living with HIV/AIDS
PIT	Project Implementation Team
PLE	Primary Leaving Examination
PMT	Project Management Team
PRSP	Poverty Reduction Strategy Paper
PPA	Priority Programme Area
PSC	Project Supervisory Committee
PSO	Private Sector Organisation

PWDs	People with disabilities
RBM	Result-based management
SMART	Specific, Measurable, Achievable, Realistic, Timely (about indicators)
SMC	School Management Committee
TA	Technical Assistance
UBoS	Uganda Bureau of Statistics
UGX	Uganda Shillings
UN	United Nations
UNU-GEST	United Nations University Gender Equality Studies and Training Programme
UPDF	Ugandan People's Defence Forces (the Ugandan army)
UPE	Universal Primary Education
USAID	United States Agency for International Development
USD	United States Dollars
WASH	Water, Sanitation and Hygiene
WATSAN	Water and Sanitation

# CHAPTER 1

## Introduction

### 1.1 Background and Context

#### 1.1.1 Background

The *Kalangala District Development Programme* (KDDP, hereafter “the Programme”)<sup>1</sup> was a multi-sector intervention implemented by Kalangala District Local Government (KDLG), under the overall supervision of Uganda’s Ministry of Local Government (MoLG), financed and supported by Government of Iceland through the Icelandic International Development Agency (ICEIDA).

The development cooperation between Iceland and Uganda started with the signing of a General Agreement on 27 Sept 2000<sup>2</sup>, and the first joint intervention was the *Functional Adult Literacy Programme* (FALP) 2002-2005<sup>3</sup>, improving literacy of the fishing communities on the islands. Following successful implementation of FALP, the KDLG requested further assistance from Iceland also in other sectors (local administration, fisheries, education and health). The request was presented to an Icelandic delegation led by the Minister of Foreign Affairs visiting the islands in October 2003, and ICEIDA accepted to extend support to a wider KDDP addressing the needs of the population in the islands. A letter of intent was then signed between ICEIDA and Kalangala District Local Government in May 2005, providing the interim framework for the cooperation based on identified problems in each sector. Thereafter followed a series of needs assessment surveys from January to June 2005 to identify problems to be addressed in the mentioned sectors. Further consultations were held with key stakeholders during project identification in November 2005, and the programme planning meetings held in Entebbe and Masaka in January to February 2006.

These needs assessment surveys revealed critical gaps in service delivery in the District, and based on them a *Project Document*<sup>4</sup> was submitted in September 2006. The Plan of Operation (a “Memorandum of Understanding”-like document) for KDDP was signed 9 November 2006 forming the main steering legal document of the Programme. Following the recommendations of the Mid-term Review (MTR) in 2010, a new MoU was signed 25 October 2011 covering the remaining part of the KDDP up to 2015, also incorporating tourism sector, in addition to fisheries and education sectors, and with continued support to the local administration. The support to the health sector ended in 2010 and was thus not continued from this point in time.

<sup>1</sup> It is noted that the ICEIDA funding modality was formally “project support” and the Programme was conceived as “multi-sector project”. Thus, in some documents the Programme is termed «project» and the two terms are used inter-changeably in an inconsistent way in various documents. As there are several components of the intervention on-going over several years, the Consultant believes that term *programme* is the most appropriate one to use, and has tried to consistently use this in the report.

<sup>2</sup> «General Agreement on Forms and Procedures for Development Cooperation ...»

<sup>3</sup> FALP was later extended up to 2010. Implemented with the Ministry of Gender, Labour and Social Development and Kalangala District local government.

<sup>4</sup> Notably, the Project Document divided the Programme in to 4 phases: initial Phase for two years 2006-2008; Implementation Phase A for three years 2008-2010; Implementation Phase B for three years 2010-2013, and Phasing-Out Phase for two years 2013-2015. The Consultant observed that this division in phases was never referred to later during implementation, as the main milestone was the Mid-Term Review (MTR) when the implementation strategy was changed, before the MTR was Phase 1 and after Phase 2.

In 2015 the partners commissioned an internal review supported by an external independent consultant, who recommended, among others, the extension of the KDDP to consolidate the gains made, especially in the education sector. Consequently, a short-term consolidation phase was approved extending implementation of KDDP from July to December 2015, mainly focusing on installation of improved WASH facilities in schools. After the end of KDDP implementation period in December 2015, the partners further agreed to extend cooperation over the medium term through [a separate education project](#), *Kalangala-ICEIDA Development Partnership: Development in Education Sector 2016-2019* (KIEP). KIEP is thus construed as the consolidation phase of the KDDP in the education sector, aligned with the current *ICEIDA Uganda Country Strategy Paper (CSP) 2014-2019*.

### 1.1.2 Justifications and Problems Addressed

Kalangala District Local Government (KDLG) was established in 1989 (separated from Masaka District. Reference to the map in *Figure 1.1* in *Annex 4* showing the district location). The District comprises 84 widely scattered islands in Lake Victoria, also popularly called “Ssesse Islands”, of which 64 islands are populated. The main town and district headquarters (HQs) is Kalangala Town, located on the largest island – Buggala. The last *Population and Housing Census* before start-up showed a total population of around 36,700. The *2014 National Population and Housing Census* established Kalangala district having 53,400. The population growth was 3.6% during 2002-2014 which was a significant decline from 6.5% during the 1991-2002 period. The overall goal of the Government of Uganda was initially to reduce absolute poverty from 38% (2003) to less than 10% of the population by 2017 (*Poverty Eradication Action Plan, 2004*). Kalangala District is divided into 2 counties; Bujumba and Kyamuswa (the outer islands). These are further sub-divided into 6 sub-counties (Mugoye Bujumba, Bufumira, Kyamuswa, Bubeke and Mazinga) and 1 Town Council (Kalangala). The sub-counties and Town Council are divided into 15 parishes and 2 town wards respectively, which are made up of a total of 92 villages.

The initial rationale for ICEIDA support to KDDP came from the need for a special intervention to facilitate access to basic services in order to reduce the widespread poverty among the marginalised fishing communities of the islands. The Programme was designed to address development problems aligned to the national *priority programme areas* (PPAs) of agriculture (fisheries), water and sanitation, education and health, as identified under *Uganda Poverty Eradication Action Plan* (PEAP). KDDP was specifically intended to facilitate Kalangala District Local Government to fulfil its mandate in the delivery of decentralized services focusing not only on the PPAs, but also addressing its local priorities in the areas of administrative infrastructure, boarding facilities in primary schools, basic equipment and working tools, and capacity development of both public and partner civil society, and private sector organisations.

The justification for support to KDDP was based on three main reasons:

- The islands were historically neglected owing to their hard-to-reach remote location in Lake Victoria. When Kalangala District was established (due to “*administrative expediency*”) it lacked basic infrastructure for service delivery and yet it was not given start-up funds to put them in place.
- The District had a small population base that could not generate sufficient local revenue to finance service delivery operations, leave alone put in place the required basic infrastructure. Besides, the population was migratory and still needed time to settle so that it could own and make meaningful contribution to sustainable local development efforts.

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- The geography of the District, with widespread islands, posed unique development challenges, especially limitations relating to transport among the islands and between the District and the mainland. This made the delivery of basic public services to the population extremely expensive, resulting in low coverage and access to the services in all sectors.

The pre-Programme needs assessment studies undertaken in the sectors of fisheries, health, education and administration revealed that despite the previous and on-going investments in the District, a significant proportion of the population was not accessing the basic public services. The problems addressed by KDDP were identified through wide consultations involving a broad spectrum of stakeholders from the central government line ministries, Kalangala District Local Government, ICEIDA country office, independent consultants, local community members and civil society organisations in Kalangala. These stakeholders participated in various ways during needs assessment studies, preparation of the Project Document, in planning workshops that developed the project logframe, and during joint technical meetings that finalised the Project Document.

The overall strategy of ICEIDA has from the very first day been to support the KDLG in implementing the Programme. During the period 2006-2010, a Programme Office, with ICEIDA-recruited technical assistance (TA) staff, was located in Kalangala. From end of 2010, this office operation was discontinued and all responsibility for implementation was transferred to the KDLG. From that time, support and monitoring services were provided by ICEIDA staff in the Icelandic Embassy in Kampala through frequent visits to the islands. *Figure 1.3 in Annex 4* shows some of the milestones in the Programme in a time schedule.

### 1.1.3 Important Programme Surveys, Reviews and Milestones

#### a) Baseline Survey

A baseline survey was carried out in 5 fish landing sites (Kasekulo, Kyagalanyi (Mulabana), Kisaba, Namisoke (Musisi) and Kachungwa)<sup>5</sup> in July 2008 by the *Institute of Statistics and Applied Economics at Makerere University* (map in *Figure 1.2 in Annex 4* refers), and the report was submitted 18 March 2009. Notably, the baseline survey was not undertaken at the very start-up of the Programme, as the first 2 years of implementation was considered an “initial phase”, where pre-implementation issues were put in place (project launching, mobilization and sensitization events, establishing programme office and minimum institutional and technical capacities, revising logframes for health component, undertaking procurements, etc.). The End Evaluation Consultant (“the Consultant”) appreciates this explanation, but believes that *ideally* a baseline in general should be undertaken somewhat earlier, as some interventions on the ground obviously started during this first two years, to judge from the progress reports. Also, the baseline in fact took place only 2 years prior to the Mid-term Review, which is a relatively short period, when some results should be monitored. The delay in submitting the final report (9 months after the fieldwork) was obviously on the part of the consultant and outside the control of the project management.

<sup>5</sup> Neither schools nor health centres were visited during the baseline survey

The population in the 5 selected fish landing sites at the time of the survey was estimated at 3,842. The survey largely collected data regarding demographic distribution, housing conditions, education level, health situation, economic activities and environment. The survey report also presented some key recommendations:

- “Kalangala District should urgently be equipped with facilities to enable her carry out HIV/AIDS tests within the district and lower level health centres be supplied with Antiretroviral drugs (ARVs).
- The district should have a strategy of stopping school going children from dropping out of school and encouraging the men to attend functional adult literacy class.
- The baseline survey results should form an input to the review of the plans and implementation of the urbanization of the fishing village’s development plans.
- Periodic monitoring, evaluations will enable the project determine the achievements in realization of the programme objectives and review the targets as the implementation progresses”.

#### b) Mid-Term Review (MTR)

After the completion of the first years of KDDP implementation from 2006 to 2010, an external MTR was undertaken by a contracted consultant<sup>6</sup>, covering 7 sub-counties (Kyamuswa, Bubeke, Mugoye, Bujumba, Bufumira, Mazinga and Kalangala Town Council), visiting fish landing and handling sites, schools and health centres (*Figure 1.2 in Annex 4* refers). The MTR undertook a household (HH) survey in 409 HHs using a standardized questionnaire with elaborate and detailed questions, in addition to key informant interviews and focus group discussions. The questionnaire enabled the review team to generate data on: household demographics; livelihood/food security; water and sanitation issues; education and education delivery, health as well as fisheries. The population was assumed to be around 46,500 at the time of the MTR.

The MTR found that development objective and the overall strategy of the Programme were still relevant, and that KDDP addressed the most critical needs/priorities of target communities and collaborated with the relevant government structures/departments. It was concluded that e.g. the fish landing sites that had been supported were still few as compared to the demand, and this had resulted in high pressure on the two landing sites that were constructed by KDDP. On the other hand, in the areas where the people received the programme support, there were visible improvements on the quality of life. In addition those places had experienced a surge in the number of new people that were settling there. It was also concluded that the education interventions had positive impact (dormitories constructed, learning material supplied, WATSAN facilities improved, etc.). KDDP had improved service delivery in health units, e.g. with solar panel installation, staff capacity development, etc., but had been involved in too many activities. The review team especially noted that the KDDP got involved in too many health-related issues and this could potentially have reduced its impact in the sector.

Several recommendations were made for the second phase of KDDP and following these, adjustments were made in terms of the sector focus whereby the health sector was dropped and support was instead extended to the tourism development component, which was an attempt to realign the interventions to the policy shifts brought about by the first *National Development Plan (NDP-I)* for financial years 2010/11-2014/15, putting more emphasis on economic transformation and wealth creation, thereby intertwining sustainable economic growth with poverty eradication

<sup>6</sup> Windsor Consult Limited, Kampala

agenda. In terms of sector focus the NDP-I prioritized tourism among the primary growth sectors that were necessary to spur economic transformation.

The Consultant notes that a lot of detailed information and data were collected during the HH survey, but these were just to a very limited extent systematically analysed and presented in the MTR report. This meant that a lot of data obviously was collected “in vain”, and the data was not properly linked to the baseline survey. The reason for this shortcoming is not known to the Consultant.

### c) Kalangala District Administration Assessment

As a follow up of the MTR, an *Assessment of the Capacity of Kalangala District to Manage Donor Funds* was undertaken June-August 2011 by a team of consultants hired by ICEIDA, with the purpose “to review existing financial structures in Kalangala District and its capacity to administer direct funding availed by ICEIDA”. The findings, recommendations and proposed framework would guide implementation during the second phase of the Programme (2011-15). The review report concluded that due to the extensive capacity building exercises undertaken during the first phase “the district staff should be well prepared taking over full responsibility of the project”. It was also iterated that “corruption in Uganda is still on worrying high level compare to other countries” and that “weakness in service delivery and financial management and accountability and lack of supervision is still a major challenge”. It was however noted that “the District has received a clean opinion on the financial statements for at least three FYs ...”.

The main recommendations were:

- “Handover should be 1<sup>st</sup> October 2011, and if the fund transfer system is working well and both parties agree after one year of implementation the project cycle can be prolonged.
- MoU between ICEIDA and Uganda Local Government and Kalangala District to be prepared, ..., stipulating the role and each responsibility as well as structure and implantation plan ....
- District Chief Administration Officer (CAO) has to assign an officer among his staff to coordinate the project on his behalf.
- ICEIDA to close its Kalangala office by end of year 2011<sup>7</sup>.
- ICEIDA staff to continue supporting KDDP project implementation as well as continue strengthening Kalangala capacity.
- ICEIDA Senior Project Officer to work with Kalangala District Finance Unit, Administration Unit and Internal Audit Unit ... in order to make sure project handover and systems are in good compliance.
- ICEIDA M&E Officer to continue supporting the District Planning Unit and Work Units in order to strengthening the overall capacity in project structure, planning and monitoring.
- ICEIDA Engineer Officer to continue advising and support District Departments of Works to oversee infrastructure under the project.
- After the closure of each financial year ICEIDA should in cooperation with the MoLG... evaluate productivity, efficiency, financial management and its meaningful achievement in order to ensure value for money through timely execution of the project”.

<sup>7</sup> The ICEIDA office had in fact been discontinued from end of 2010.

#### d) Other Studies and milestones

Of other events undertaken should be mentioned:

- **Tracking and audit of text books provision in Kalangala District primary schools** (report July 2014). The exercise, undertaken by two external consultants, was ordered by ICEIDA as part of its monitoring responsibilities under the KDDP. The objectives of the exercise were to establish the current curriculum requirements for text books; the available standard text books on the Ugandan market; the actual stock of text books available in schools; the current pupil to text book ratios; the quality and shelf life of text books; availability of storage space for books in schools; and availability of text books for use by pupils at school and at home.
- **KDDP Internal Review.** Before the end of the phase-out period in 2015, the partners undertook an internal review based on a study report by an external independent consultant<sup>8</sup>. The study adopted a mix of data collection methods: i) Household survey (377 HHs) to collect data on dropout and non-transiting pupils and parents; ii) Key informants' interviews; iii) Focus group discussion sessions in grassroots communities, the in-school pupils and dropouts; and iv) Use of a social services infrastructure mapping tool to assess the availability, functionality and usability of school infrastructure and the social investments. The study showed that improved performance at primary education level is contingent of a combination of factors and not one factor is most significant.
- **A detailed review of KDDP Education Component.** This was a follow-up of the Internal Review, and the following main recommendations were given related to the sector: i) Accelerate lobbying/ advocacy to harmonize the involvement of other key stakeholders engaged in the sector, to minimize excessive drop-outs, ii) increase collaboration between CSOs and the Government for synergy to better enable achievement of education outcomes; iii) identify activities that best consolidate gains from education investment; iv) identify measures that reverse poor performance in drop-out; v) fill infrastructure and professional gaps; vi) identify strategies that promote accelerated educational performance through a community-state-development partners' involvement; vii) identify support measures that a) encourage community-driven participation in school governance, b) develop mechanisms for community monitoring school-going age, c) undertake intensive sensitisation to ensure internalization and appreciation of investing in the child education, d) promote community appreciation that school feeding leads to better pupil performances; and viii) identify measures where grassroots communities are linked to wealth creation Functional Adult Literacy (FAL) interventions.
- **Beach Management Units (BMUs)** were established in Lake Victoria in 1998, instigating co-management between Government, civil society, industry, and fisherfolk to leverage their combined knowledge to promote a sustainable approach to resource use. The success of these BMUs was however mixed. While they clearly gave fishers and fishing communities an active voice in the management of the fishery and tasked with self-enforcing fishery regulations through norm setting, for example leadership, and reporting; they were also accused of corruption and ineptitude. The BMUs also became a lightning rod for complaints about illegal fishing. However also, in some landing sites, fishers argued that BMU leaders were taking bribes to turn a blind eye to illegal fishing. In response to protests about corrupt BMU leadership, on 15 November 2015 President Yoweri Museveni disbanded Uganda's BMUs and recalled government fisheries officers charged with enforcing regulations.

<sup>8</sup> Greenstar International (U) Ltd, Development and Management Consultants. Report dated August 2015.

Ironically, the problem of illegal fishing appeared to increase following the disbandment of BMUs. Without the collective norms set by BMUs, and exacerbated by the absence of trained fisheries enforcement officers, fishers had little incentive to follow the law. The President then in March 2017 tasked the Ugandan People's Defence Force (UPDF, being the Ugandan army), with enforcing fisheries laws. Throughout 2017, the UPDF took the law breakers to courts that imposed fines or imprisoned the offenders. Illegal fishing gears were also confiscated and destroyed. During the Evaluation it was clear that most landing sites had reduced population following the cracking down on illegal fishing, with many fishermen and their families moving to other locations (e.g. urban areas) where alternative forms of employment exist.

With the disbandment of the BMUs, informal Fish Landing Site Committees (FLSC) took over some of the functions of the BMUs, but without formally having the mandate of the BMUs. In some places the staff of the BMUs were retained in the FLSC, and in other places completely new persons were brought on board. However, the FLSC did not have any income for operations like the BMUs had (25% of the landing site revenue went back to the BMUs). This meant that no funds were available for O&M of the infrastructure built under KDDP, and notably the WASH structure suffered from this with deterioration starting. This was clearly observed during the visit of the Evaluation Team to the fish landing sites.

## 1.2 The External Evaluation

### 1.2.1 Methodological Approach

The Evaluation in Kalangala was undertaken by a team led by the International Key Expert. (There was one team undertaking a similar evaluation of ICEIDA support in Mangochi District in Malawi). Additionally, the team in Uganda comprised a National Expert responsible for implementing the household (HH) survey, in addition to 5 enumerators visiting the households and one expert being responsible for entering the data collected in the HH survey and analyse these (also taking part in the HH survey interviews). In addition, minor inputs to the planning of the Evaluation and the reporting related to fisheries was given by a national Fishery Expert. The Evaluation took place during the period 1 March - 13 August 2018<sup>9</sup>, with inception visits to both countries during 12-17 March 2018.

In pursuit of the ToR, the Consultant applied a mix of methodological approaches, which included:

- Documentary review (a list of consulted documents is presented in *Annex 3*).
- Field visits to the District and visiting selected interventions implemented.
- Household (HH) surveys in selected communities (HH survey questionnaire in *Annex 5* and HH survey report in *Annex 9*).
- Interviews with key stakeholders, including key district government staff (standardised questions for the key respondent interviews were developed based on the ToR, in close consultation with the Icelandic Embassy in Kampala, see in *Annex 5*.)
- Debriefing meeting with the Icelandic Embassy and presentation of the main findings in ICEIDA in Reykjavik on 24 August 2018.

<sup>9</sup> This is the date of the final report from GOPA. The Consultant's presentation in ICEIDA in Reykjavik was held on 24 August 2018.

Wherever possible, and this was constrained by the tight timeframe, the Consultant employed participatory methodologies. The Terms of Reference (ToR) for the Evaluation in both countries is enclosed in *Annex 1* together with the overall time schedule and the itinerary of the HH survey in Uganda. *Annex 2* comprises the list of persons met with and consulted during the Evaluation. *Figure 1.4* in *Annex 4* shows the locations visited during the Evaluation.

### 1.2.2 The Household (HH) Survey

In the HH survey, 34 villages were sampled in the whole district, of which 22 were “intervention” villages (11 from each of the two counties - Bujumba County and Kyamuswa County)<sup>10</sup>. 12 villages were “control” villages (5 from Bujumba County and 7 from Kyamuswa County)<sup>11</sup>. The HH survey was conducted during the period 23<sup>rd</sup> April – 8<sup>th</sup> May 2018, and the Kalangala District Local Government put at the team’s disposal a fibreglass boat with a coxswain and a vehicle with driver. During the visit to Mazinga Sub-County, the Embassy of Iceland provided the survey team with a larger speed boat that tackled the heavy weather better than the smaller boat. The Consultant paid for the fuel and other associated costs.

Basing on the number of selected households in the *2014 Population and Housing Census*, the proportion of households was 0.49 for Bujumba County and 0.51 Kyamuswa County, 173 and 182 households respectively, totalling 355 households. The number of households to be selected for each village was determined based on proportionate numbering.

The training of enumerators was conducted on 23<sup>rd</sup> and 24<sup>th</sup> April at a venue provided by Kalangala District Local Government at the district headquarters. 4 enumerators, plus a “reserve” enumerator, were trained. The “reserve” enumerator was to be called upon in case of any unforeseen events that would prevent any of the 4 enumerators to continue with the exercise (and participated in the interviews in Mazinga). The training comprised a brief background of KDDP/ICEIDA interventions; the role of the survey team during the evaluation; a detailed explanation and how to administer the questionnaire and pretesting the results. Part of the training was pre-testing of the questionnaire in the nearby Kizzi village (4 HHs for each remunerator and the data analyst). Data entry was started while the team was gathered in Kalangala, and was completed in Kampala.

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<sup>10</sup> A list of the sample villages is enclosed with the HH Survey Report (*Annex 9*).

<sup>11</sup> For purposes of the HH Survey “intervention” villages (in *Annex 9* referred to as “intervention location” villages) were the villages and/or landing sites where KDDP-supported projects/interventions physically were located (e.g. fish landing structures, WATSAN facilities or schools). “Control” villages were those villages with no KDDP supported projects / interventions in the villages themselves. (The interventions considered in this case exclude administrative infrastructures e.g. the district HQs and sub-county offices). With respect to the education and health interventions, it should be noted that the *control* villages do not carry the usual meaning of “control groups” (i.e. groups that received no benefit), because virtually all villages in Kalangala District benefited from KDDP interventions in varying degrees depending on the sectors, though the *intervention* villages may have benefited to a greater extent. It is therefore apparent that the distinction between the intervention and control villages is the degree of access to the service facilities (e.g. schools, health centers, improved fish handling facilities, water and sanitation facilities), mainly defined by physical distance. (For example, in the education sector one primary school may serve several villages in a parish and since all schools in the district were supported, the distinction between the intervention and control villages by default becomes “blurred”, whereas for sectors like fisheries and WATSAN, a clear distinction can be made between intervention and so-called control villages).

ome challenges faced by the HH survey team were: the rainy and windy weather on several days; unavailability of complete household lists in some villages, necessitating on-spot sampling with the help of respective village leaders; distances between villages in Bukasa and Bubeke islands required not planned transporting the team using motorcycles (locally referred to as “Boda-Boda”); and the survey team had to spend 2 nights off the main island in very basic accommodations.

Detailed description of the HH survey and analysis of the results are presented in *Annex 9*.

### 1.2.3 Interviews with Key Stakeholders

The International Key Expert had several meetings with key informants that had been involved in the Programme. These, in addition to the staff at the Icelandic Embassy that earlier had been working in the Programme Office in Kalangala, included: 19 staff in the Kalangala District Administration and sub-county administrations; 1 NGO staff, and 1 employee at the Kalangala Tourist Information Centre. Additionally, the International Key Expert, together with the National Expert, met with interviewees in 16 primary schools (PSs), including 1 community school, (out of 26 PSs in total in the District, being 62%), 5 fish landing sites, 2 sub-county administrations and 5 health centres.

The Consultant believes that the key interviews undertaken were sufficient to get a fairly good picture of the outcomes and impact of the Programme. The following limitations/challenges were however encountered:

- Of the 4 sub-county offices that were visited, 2 had no-one present to answer any questions (Bufumira, with open doors, and Kalangala Town Council, which was closed two days in a row). Neither Bubeke sub-county office had anyone present, but the Consultant met the Chairperson of the Local Council incidentally in Bubeke PS, and went with him to the office.
- The fish landing site buildings in Kachungwa were locked up (the adjacent village is named Kachanga), so the Consultant could not inspect the office/store building and the toilet/washroom building. The Fisheries Officer in Mazinga Sub-County had taken the keys with him and was not present on the island (reasons unknown).
- Most of the staff at the health centres had come on board *after* 2010 when the Health Component of the Programme ended. Thus, they had very little knowledge of the activities that were implemented before this date.
- Certain departments in the District Administration (e.g. Health Dept.) were very slow in submitting simple statistics on various topics, even if agreed to with the Consultant. Some information was still lacking when the draft report was submitted.

Some key programme documents were *not* submitted to the Consultant when the Draft Evaluation Report was prepared and submitted, most importantly the annual reports from Phase II of the Programme. This led to a couple of wrong conclusions by the Consultant in the Draft Evaluation Report, and created some unnecessary additional work in the final reporting.

### 1.2.4 Structure of the Report

The report is structured in accordance with standard OECD DAC criteria. In *Chapter 2*, the relevance of the Programme, including the design and assessment of the logframe is assessed. *Chapter 3* is discussing the effectiveness of the Programme, including description of the programme management and assessment of the outputs/deliverables and most importantly the outcomes. *Chapter 4* is assessing the efficiency and *Chapter 5* the preliminary impact of the Programme, followed by *Chapter 6* assessing the sustainability. *Chapter 7* presents the overall conclusions and outlines the Consultant's recommendations arising from the foregoing.

In order to reduce the size of the report, all figures, tables and illustrations are included in annexes. This format has also made it easier for the Consultant when several people are working on the document and will subsequently make it easier to comment on the document without "disturbing" the formatting. It is emphasised that the illustration photos in Annex 10 is an integral part of the report and makes it much easier to comprehend some of the issues taken up in the report. In addition to the mentioned annexes above, *Annex 4* contains maps, figures and smaller tables, *Annex 6* lists the outputs and *Annex 7* lists the outcome achievements. *Annex 11* contains the comments to the Draft Evaluation Report.

# CHAPTER 2

## Design and Relevance

### 2.1 Policy and Strategy

#### 2.1.1 National and Local Policies and Strategies

At the time of preparing the Programme (2005), the most prevalent steering policy document in Uganda was the *Poverty Eradication Action Plan (PEAP)*, being Uganda's national development framework and medium term planning tool; prepared in 1997 through wide stakeholder consultations and participation. The PEAP was also the national instrument of the *Millennium Development Goals (MDGs)*, and constituted the country's *Poverty Reduction Strategy Paper (PRSP)*, guiding the formulation of government policy and implementation of programmes through sector wide approaches and a decentralized governance system. Since year 2000, the PEAP has been updated three times in annual PRSP Progress Reports. The key pillars of the PEAP were: Economic management; enhancing production, competitiveness and incomes; security and conflict resolution and disaster management; governance; and human development; in addition to crosscutting issues including HIV/AIDS, gender and environment (2004 PEAP version). PEAP 2004 also contained the vision of the Government of Uganda to reduce absolute poverty from 38% (2003) to less than 10% of the population by 2017<sup>12</sup>.

The policy instrument for development at local level was (and still is) decentralization. A *Decentralization Policy* was launched as early as in 1992, and laid out in *the Local Governments Act* from 1997. In 2001, Government agreed on a *Fiscal Decentralization Strategy (FDS)*, strengthening the process of decentralization in Uganda, through increasing local governments' autonomy, widening local participation in decision-making and streamlining of fiscal transfer modalities to local governments in order to increase the efficiency and effectiveness of local governments.

A new *National Development Plan 2010/11–2014/15 (NDP)* stipulated Uganda's medium-term strategic direction, development priorities and implementation strategies, including government-development partner relations. The aim was to accelerate socio-economic transformation to achieve the *National Vision* of a transformed Ugandan society "from a peasant to a modern and prosperous country within 30 years" (Vision 2040).

National development planning and budgeting mechanisms have been well integrated into the local government structures in Kalangala District, e.g. the *2014 Local Government Development Planning Guidelines*, ensuring citizen participation in planning, budgeting, implementation monitoring and reporting in service delivery, used for preparation of the FY2015/16 budget.

The Consultant concludes that the Programme at the planning stage, and further during implementation to the completion in 2015, have been fully in compliance with national and district policies and strategies.

<sup>12</sup> Current estimate 25.8% (Min. of Finance budget speech 2018/19)

### 2.1.2 Iceland's Development Strategy

ICEIDA started cooperation with Uganda through the signing of a *General Agreement on development cooperation on 27 September 2000*<sup>13</sup>, and the Icelandic Embassy in Kampala was opened in June 2004. The point of entry of Iceland into development cooperation has always been related to fisheries, in one form or another, as this is the sector where the country is strong and thus has a comparative advantage. Iceland's policy on international development cooperation in general, and in Uganda in particular, has therefore from the beginning prioritized natural resources (fisheries), and social sectors (education and health) and governance (local administration and civil society organizations) related to communities with fisheries as major source of income. The justification for support to KDDP was based on Kalangala's unique development challenges that arose from its history, geographical set up, and demographical features, which resulted in sub-standard delivery of public services. Clearly, the 4 sectors supported by ICEIDA in Kalangala captures the priority sectors of Iceland, making support to KDDP highly relevant<sup>14</sup>.

ICEIDA<sup>15</sup> is responsible for the delivery of Iceland's bilateral development cooperation in accordance with Act No. 121/2008 on *Iceland's International Development Cooperation Act, Regulation No. 894/2009* and the *Strategy for Iceland's International Development Cooperation 2013–2016*. These are the first important steering documents for ICEIDA in relation to the support also in Uganda, and the former document focused on a programme-based approach in its aid delivery with a more holistic support to districts with significant fishing communities. ICEIDA's first *Uganda Country Strategy Paper (CSP) 2014-2019* intertwined the development visions, strategies and priorities of the partners, drew from lessons learned and was further informed by extensive consultations with key stakeholders. A *Policy for Gender Equality* in Iceland's international development cooperation for the period 2013–2016 was published in 2013. Furthermore, in 2012 ICEIDA published guiding principles for addressing environmental issues in its projects. Also, the KDDP was designed in accordance with Iceland's international commitments, in particular the *Paris Agreement, the Accra Accord* and *Busan Partnership Agreement*.

The Consultant therefore concludes that KDDP has been fully in line with Iceland's development cooperation policy and strategy from the beginning in 2005 and, still at the time of the Evaluation, the continuation of the Education Component (KIEP) is very relevant.

### 2.1.3 Programme Strategy

The overall implementation strategy from the very planning of the Programme has been to build capacity in the District, and support and advice the District on its implementation of development interventions. As such, ICEIDA is being a "backseat driver", intended to operate as a programme supporter only. However, following the needs assessment survey undertaken in 2006, it became clear that due to the significant lack of capacity in the district administration to implement the Programme, ICEIDA had to take on a more pro-active part in the first programme

<sup>13</sup> The citation of the agreement is: "General Agreement on Forms and Procedures for Development Cooperation between the Republic of Iceland and Government of the Republic of Uganda".

<sup>14</sup> The first support to the fisheries sector was assistance to the quality assurance of Fish Products in Uganda, in the Fish Quality Laboratory in Entebbe (2002-2005).

<sup>15</sup> It is noted that ICEIDA up to end of 2015 stood for Icelandic International Development Agency that was an autonomous body under the Ministry of Foreign Affairs, responsible for administration of bilateral cooperation of Iceland. Since 2016, ICEIDA as an autonomous agency was abolished, and its functions were absorbed under the Ministry of Foreign Affairs, Directorate of International Development Cooperation. The Abbreviation "ICEIDA" was however retained – and now standing for Icelandic International Development Cooperation. Bilateral cooperation is administered by the Directorate of International Development Cooperation through Icelandic Embassies.

phase. ICEIDA therefore established an office in Kalangala town, with a Project Manager and 4 senior officers, providing support and TA to the programme components. This was the only way that the momentum from the planning stage and the expectations for tangible results with the stakeholders could be maintained. If not ideal, this surely was a pragmatic solution that gave the Programme a kickstart. The ICEIDA Office was closed by the end of 2010.

In the second phase of KDDP, funding and implementation support was channelled through the existing district government mechanisms and the role of ICEIDA became purely financing the Programme and giving minor technical assistance. ICEIDA has therefore all the way been giving support fully in line with national and local policies and strategies. With the managerial set-up, having *Project Supervisory Committee*, *Project Management Team* and *Project Implementation Teams* through both phases of the Programme, the continuity was secured in both phases, also with frequent ICEIDA support visits from Kampala in the second phase.

## 2.2 The Logframe

The **Project Document (PD)** from September 2006 defines the following Development Objective:

*“Sustainable livelihoods and equitable socio-economic development (in Uganda, particularly in Kalangala District)”*. (The Evaluation Team is a bit uncertain as to whether the part in brackets is part of the formulation. In any case, the reference to Uganda as a whole is *not* appropriate in this Programme).

As the Programme is multi-sectoral, the PD includes formulation of purposes/immediate objectives for all the programme components (given in the separate section for each component, with a shorter form in the *Summary Section* at the beginning of the PD, although the main contents are kept):

Local Government Administration Component: *“to facilitate and support the efforts of the Kalangala District Local Government in achieving efficient and effective leadership, administration and management of public, civil society and private agencies in Kalangala District by 2015”*. (It is noted that in the Summary section of the PD, the formulation is *“efficient and effective leadership in the district together with quality administration and management of public services along with strong private sector and civil society organisations”*).

Fishery and WATSAN Sectors Component: *“to facilitate and support the efforts of the Kalangala District Local Government in achieving sustainable quality fisheries production and marketing in Kalangala District, by 2015”*.

Education Sector Component: *“to facilitate and support the efforts of the Kalangala District local government in achieving equitable access of the population to quality education in Kalangala District by 2015”*.

Health Sector Component: *“to facilitate and support the efforts of the Kalangala District Local Government in achieving equitable access of the population to quality health services in Kalangala District by 2015”*.

In the purpose for the Local Government Administration Component, the reference to “private agencies” is not fully understood, as such agencies has hardly been an issue at all in the Programme. The Consultant also realizes that the formulation in the PD *Summary*, formally speaking, is different from the formulation in the main PD *text*, as it does not expect *“leadership, administration and management of ..... private agencies”*, but rather wants to achieve *“quality administration and management of public services along with strong private sector...”*, which might indicate

a hope for “co-management” of the public sector *together with* the private sector and civil society organisation. Without going too much into semantics, the latter formulation seems to be more appropriate, although the Consultant does not fully understand why the private sector organisations are mentioned at all in this context.

The logframe for the first programme phase lists some indicators for the *outcomes*, but with no target values connected, with most of them being qualitative:

- “No. and coverage of district and LLG policies and ordinances/bye-laws formulated and implemented
- Community priorities (lower councils, gender, PWDs, youth, elderly, PHA) integrated in LG development plans and budgets
- Proportion of activities in LG Development Plans implemented and monitored on schedule, by sector and location
- Availability of data disaggregated by sector, sex, age and location
- Number of departments/ actors producing activity and financial performance reports on schedule, by level
- Local revenue generated, by source and location
- Number of active NGOs, PSOs and networks in the district, by sector
- Administrative infrastructure and facilities in place”.

In addition, there are several *outputs* for the period 2006-10 listed, with target values for the indicators, for each of the components, supported by a list of activities.

Following the Mid-term Review in 2010, a new logframe was formulated for Phase 2 (2011-15), no longer with the Health Component included. This revised logframe with indicators and target values are enclosed in *Annex 6* and *Annex 7* respectively for the outputs and the outcomes.

The overall objective/development objective remained unchanged from the first phase of the Programme (with the reference to Uganda taken out, being an improvement). The immediate objectives (*outcomes*) for the programme components also remained almost identical with the ones in the PD, where the formulation from the main text of the PD is kept for the Local Government Administration Component. It is noted that the purpose for the Fishery Component has been formulated as less ambitious in the second phase (“*improved quality fisheries...*” has taken the place of “*sustainable quality fisheries*”), which seems to be a realistic change. The new Tourism Component got the purpose: “*Improved exploitation of Kalangala District tourism potential by 2015*”, which proved to be utterly unrealistic.

It is noted that there are no target values listed for the outcome indicators. The project management confirms that this was not done at the time, but refers to the national and sector targets, which is not included in the logframe document. This makes it more cumbersome for outsiders to easily verify whether the targets were reached or not. The *Completion Report* from the Programme (June 2017) nevertheless lists some outcomes and achievements for the components, also with reference to the baseline year. (This is further commented upon below in *Section 3.2.2*).

The Consultant finds the logframe *formulations* largely relevant, with some minor shortcomings commented upon above, although none of the indicators are fully SMART (specific, measurable, achievable, realistic and timely). However, target values for the outcome indicators have *not* been formulated, and some outcomes are of a very general nature, difficult to measure. This is a shortcoming, as the outcomes constitutes the main reasons for the

interventions being implemented in the first place, representing the *effects* of the outputs/deliverables that are guaranteed by the programme management. As such, the implementation progress reporting in Phase I and the monitoring reports in Phase II are mainly outputs focused. It is however noted that the annual reports in Phase II (2012, 2013 and 2014) prepared by the district authorities have sections assessing the outcomes.<sup>16</sup>

### 2.3 Conclusion

The Consultant concludes that the Programme has been very relevant related to the national and local development policies and strategies from the very start of the planning and until the programme completion in 2015. The design of the Programme, with the components related to local administration strengthening, fisheries and WATSAN, education and sports, and health in the first phase responded directly to the critical shortcomings in Kalangala District. The design is also in line with national policies and strategies, namely *Uganda Poverty Eradication Action Plan* (PEAP), the *Millennium Development Goals* (MDGs), the *National Development Plan* (NDP) and the national decentralisation policy. The Tourism Component that came on board in the second phase of the Programme, was an unrealistic attempt to create short-term economic benefits in the District.

The Programme is also relevant in relation to Iceland's policy and strategy or development cooperation, namely *Iceland's International Development Cooperation Act, Regulation No. 894/2009* and the *Strategy for Iceland's International Development Cooperation 2013–2016*, ICEIDA's first *Uganda Country Strategy Paper (CSP) 2014-2019* and *Policy for Gender Equality* published in 2013. Furthermore, in 2012 ICEIDA published guiding principles for addressing environmental issues in its projects. KDDP was designed in accordance with the *Paris Agreement*, the *Accra Accord* and *Busan Partnership Agreement* regulating international development cooperation. The Consultant therefore concludes that KDDP has been fully in line with Iceland's development cooperation policy and strategy from the beginning in 2005 and, still at the time of the Evaluation, the continuation of the Education Component (KIEP) is very relevant.

The logframe for both phases are very much output-focused, no SMART indicators and no indicator target values are connected to the outcomes, although this result level is the most important in any development intervention. The mentioning of the private agencies in the formulation of immediate objective to the Local Government Administration Component is irrelevant, as long as no interventions have been targeting such stakeholders.

<sup>16</sup> The Icelandic Embassy (ICEMB) in their comments to the Draft Evaluation Report: *"The findings on the shortcomings in the project logframe formulation are appreciated. However, there are accepted methods of addressing such weaknesses during project implementation, monitoring and evaluation (iterative and incremental process informed by knowledge accumulated through lessons learned). The methods include, but are not limited to: baseline reconstruction, and use of benchmarks in lieu of missing targets etc. In view of that, the KDDP Project Completion Report and the earlier KDDP Internal Review Report by Partners (2015) reported on outcomes using leverage indicators and the assessment of achievement was benchmarked on national actual performance or targets, as well as international targets"*. **The Consultant appreciates this distinction, and agrees that the 2 reports compare results with national targets.**

# CHAPTER 3

## Effectiveness

### 3.1 Programme Management

#### 3.1.1 Managerial Setup

It is emphasised that Iceland's role as a donor has, from the very beginning, clearly been to support Kalangala District in their development efforts, meaning taking on an advisory and facilitating role. As the District's capacity during Phase I of the Programme was limited, Iceland however had to take on a pragmatic and more pro-active role in order to get activities started, at the same time as building capacity with the district staff. The priority areas in focus derived from the priorities that were set by the District Council and the programme management was participatory and consultative as far as reality allowed. The programme management however changed in 2010 following the Mid-term Review.

#### a) During Phase I of the Programme (2006-2010)

In order to achieve accountability, several managerial levels were instigated:

- At the national level a Project Supervisory Committee (PSC) was established, with the Permanent Secretary of the Ministry of Local Government (or his appointed representative) representing Government of Uganda (GoU) as (chair); ICEIDA Country Director from the Icelandic Embassy representing Government of Iceland (GoI) as the co-chair. In addition, the PSC had the following members: the Chief Administrative Officer (CAO) of Kalangala District (secretary) and District Chairperson (member) representing Kalangala District Local Government, and the ICEIDA Programme Director (technical advisor).  
The PSC met bi-annually to review and approve the project progress reports and annual work plans and budgets for the coming year. The PSC was in reality a policy interface arena between the donor and the Ugandan Government, helping the GoU and the GoI to maintain a good bilateral relationship.
- At district level a Project Management Team (PMT) was established, chaired by the CAO and with the following members: the KDDP Project Manager (Icelandic) based in the ICEIDA Programme Office in Kalangala, and all members of the (permanent) *District Technical Planning Committee* in Kalangala district administration representing all relevant departments (Administration, Audit Section, Community Development, Education, Finance, Fisheries, Health, Natural Resources, Production and Marketing, the District Engineer and the Senior Water Engineer, with the District Planning Unit as the secretariat). There was additionally a member from the Civil Society in Kalangala (Kalangala District NGO Forum), also seemingly representing the private sector organisations. (This arrangement is not understood by the Consultant, as such set-up is not in line with "normal" *modus operandi* of the civil society versus the private sector)<sup>17</sup>.

<sup>17</sup> ICEMB in their comments to the Draft Evaluation Report: "During project implementation, the envisaged private sector organisations (of nature of umbrella organisation serving the common good of individual private agencies) were not fully established. The project concentrated on KADINGO, which was already as an established umbrella body for CSOs, and was specified for support in the project document".  
**The Consultant thus remains with the comment in the text.**

The PMT was responsible for the management functions of the Programme; planning and budgeting, direction and control of implementation, supervision and monitoring, and reporting and accountability. The PMT was collectively responsible to the PSC for the use of project inputs and delivery of project results at output and outcome level. The PMT took responsibility for ensuring that the Programme remained on course and that it satisfied both the policy aspirations of the GoU and the interests of the donor. Through its regular strategic guidance on both programme and finance issues the PMT worked both as a reference team and as a quality control mechanism that guided programme focus, helped the Programme Implementation Teams (PITs) to deal with contextual challenges all of which enhanced programme delivery, efficiency and impact.

- The implementation of activities was planned at the sector (district department) level. 2 Project Implementation Teams (PITs) were established: a PIT for Administration and Fishery; and a PIT for Education and Health. The PITs comprised 2 ICEIDA Project Officers (national) based in the ICEIDA Kalangala Programme Office and 4 Senior Sector Officers from the district administration representing the main departments supported (i) Local Administration (including crosscutting departments: administration, finance, planning, audit, and civil society and private sector organizations); ii) Education and Sports; iii) Health Services; and iv) Fisheries sub-sector (under Production and Marketing Department)).
- The PITs prepared the work plans and budget and undertook implementation, supervision and monitoring, quality control and reporting in the Programme, also securing accountability. The PITs processed workplans, requisitions, and reports through the sector heads, up to the CAO for approval, and eventually to the Kalangala-based KDDP Project Manager for final authorization. All other processes like procurement of goods and services were handled in accordance with systems and procedures being in compliance with GoU. There were however exceptions allowed whereby some procurements or payments were processed directly by ICEIDA, on request of the District. In addition to the Project Manager and the two Project Officers, the Kalangala ICEIDA Programme Office comprised a Senior Project Officer responsible for Finance and Administration issues, and a KDDP Advisor (Engineer) responsible for supervision and quality control of the infrastructure development component. After 2010, when the ICEIDA KDDP Programme Office was closed (formally closed by the signing of the Phase II MoU October 2011, but in practical term closing by the end of 2010), all the 4 officers were absorbed into the ICEIDA Country Office structure (in the Iceland Embassy Office), and later pre-designated as Senior Programme Officers<sup>18</sup>. The input from two of the officers were gradually reduced in the Programme, whereas two were retained and were still working with the Embassy at the time of the Evaluation (also partly supporting KIEP).

<sup>18</sup> KDDP Project Manager came on board the Programme in December 2006 and left at the end of 2011. Project Officer PIT Health and Education came in 2007 and left ICEIDA in March 2011. The KDDP Advisor came in April 2008, became ICEIDA Senior Programme Officer and left at end of 2015. ICEIDA Project officer for Finance and Administration started in November 2006 and Project Officer for Administration and Fisheries in January 2007, both being Senior Programme Officer with ICEIDA today.

### b) During Phase II (2011-2015)

The Mid-term Review recommended that the daily management of the Programme be left with Kalangala District from 2011, and that the daily ICEIDA support to the PITs should be discontinued. The Icelandic Embassy therefore in June-August 2011 instigated a study to assess the capacity and capability of the District to take on this role<sup>19</sup>. The main recommendations are listed in *Section 1.1.3 c)* above. The ICEIDA office in Kalangala was closed by the end of 2010 and the implementation teams continued with staff from the district administration, but with frequent support and advisory visits by the Senior Programme Officers from that time being located at the Icelandic Embassy in Kampala (previously being at the Kalangala office). However, the health advisory services by ICEIDA ended following the recommendations of the MTR. The PSC and PMT continued as before, but without the KDDP Project Manager joining the PMT meetings.

The Consultant believes that the managerial set-up at large was pragmatic and seemingly well-functioning. In order to get the activities started on the ground, the establishment of the PITs during the first phase seems to have been the only viable solution. Showing some tangible results to the stakeholders, and the beneficiaries in particular, was assumed important to maintain the enthusiasm and keep up the momentum while at the same time building capacity with the district administration.

In case the Programme had waited until the District had enough capacity to start implementation by themselves, the momentum and good spirit from the start would surely have dwindled. It also seemed to be the right moment to hand over more responsibility to the district administration in 2011, as evidenced by the findings of the mentioned study undertaken. On the other hand, the Consultant believes that the rather extensive technical assistance input by ICEIDA staff, especially during the first phase until 2010 (operating a local programme office with 5 employees at its peak), has been relatively costly consuming a fair bit of the donor funds (see below). The sharing of responsibility and accountability between the programme partners at different levels, and the various programme groups, has seemingly worked as intended.

### 3.1.2 Programme Reporting and Monitoring

(Please note that a distinction has been made between “progress reports” and “monitoring reports” below, *directly reflecting the title of the reports*. This might seem like focussing on semantics, but the Consultant believes it is not in this case. Normally, *progress reports* are prepared by the main implementing partner, which in the first phase was the KDDP Programme Office and in the second phase the Kalangala District Local Government. *Monitoring* could in principle be undertaken by “anyone”, internal monitoring by the implementing partners and/or external monitoring by outsiders, like mostly in the case of KDDP in Phase II).

<sup>19</sup> *Assessment of the capacity of Kalangala District to management donor funds. With a special focus on KDDP project funded by ICEIDA. June to August 2011.* Undertaken by an ICEIDA consultant with support from three consultants from Uganda Ministry of Local Government (1 from Planning and Administration Unit and 2 from Financial Management and Audit Unit).

### a) Progress Reporting

The Programme has had an extensive monitoring and reporting system during the first phase. There are 9 Progress Reports produced by the PITs at sector level while ICEIDA had a KDDP Programme Office in Kalangala. The reports were processed by the Project Management Team (PMT) and presented to, and approved by, the Project Supervisory Committee (PSC), covering the period from October-December 2006 up to and including the period January-March 2009. Additionally, a *Mid-term Review Report, October 2010* summarised the achievements in Phase I of the Programme, and a *Midterm (five year) Report (2006-2010)* submitted in December 2010, also listed the same achievements/outputs during Phase I. The reports are to a limited degree reporting on outcomes, but where such data were readily available outcomes of a qualitative nature was mentioned. The format of the produced progress reports during Phase I were very informative and orderly presented, with sections on undertaken activities and achieved outputs (in tabular format) for each sector supported (Administration, Fishery, Education, Health, and Infrastructure Development, the latter treated as a separate sector), in addition to sections on problems/challenges met with, the financial status, and the activity plan and budget for the next period.

After 2010, in Phase II, KDDP progress reports (annual and biannual) were prepared by the District, coordinated by the District Planning Unit, and processed at district level by the District Technical Planning Committee (DTPC) and submitted to the PSC for perusal and approval<sup>20</sup>. All reports from 2011 onwards were submitted by the District, including the KDDP Completion Report. The annual reports from Phase II made available are also orderly structured, having sections reporting on programme inputs, detailed activities and produced outputs on each of the programme sectors, also presenting *Infrastructure Development* as a separate component. The reports also have a separate section on *Performance Against Outcomes*, which is commendable. The reports additionally summarises the *Challenges, Lessons and Recommendations*, and presents in tabular form the work plan and budget for the coming year. The bi-annual report reviewed by the Consultant summarises the progress and achievements in a bulleted form, separated on the programme components.

Regarding the financial reporting in the Programme, the following modality was prevalent:

Under the first phase of KDDP, ICEIDA operated the Programme Office in Kalangala and the ICEIDA Project Manager, along with CAO/Chief Financial Officer (CFO) of Kalangala district administration, was signatory to the KDDP bank account in Stanbic Bank. This meant that all payments were under shared control/co-management. The funds were accounted for in the GoI's Oracle-based accounting system (ORRI), used by the Icelandic Embassy in Kampala, with special codes for various types of costs for every transaction.

In the second phase of KDDP, an intermittent system was used, from primo 2011 to end of 2013, where all transfers to the KDDP bank account were debited to an interim account in ORRI ("float account"), and debited in ORRI following monthly accountability reports from the District. This procedure was abandoned by end of 2013 and from that point in time and onwards, ICEIDA transferred funds to the account in Stanbic Bank in Kalangala on a regular basis and as needed, and it was entered in ORRI under one code only ("*Contribution to foreign parties*"). The responsibility for the KDDP project account was then shifted entirely to Kalangala district and the CAO and the CFO became signatories of the account. The use of these funds was continued to be monitored by ICEIDA as part of the monthly

<sup>20</sup> Annual reports for 2011-2013, and a copy of biannual report for 2014, were made available to the Consultant as part of the Icelandic Embassy's comments to the Draft Evaluation Report.

accountability and reconciliation reports from the District<sup>21</sup>.

Control and accountability for the use of funds in Phase I was on a monthly basis, where transactions on KDDP bank account statement were checked against approved activities. This in principle continued in Phase II. The responsible ICEIDA Senior Programme Officer checked on a monthly basis that all transactions on the bank account could be linked to a particular approved KDDP activity, but after end 2013 the expenditures appeared as “lump sums” in ORRI. As far as control and accountability is concerned, every transaction on the KDDP bank account was checked and reconciled by the KDDP-SPO on a monthly basis throughout the programme period 2006-2015, so the financial reporting is after all considered to have been good.

#### b) Monitoring

Following the closing of the ICEIDA KDDP Programme Office in Kalangala, an M&E Plan was produced (not existing in the first phase): *Monitoring and Evaluation Plan for Kalangala Local Government. Support to the implementation of KDDP. Final M&E Plan. February 2011*. The lack of such plan in Phase I was also commented upon in the MTR report. In addition to definition of key M&E terms, the plan contains description of programme background, objectives of the M&E, monitoring tools and M&E management, a list of indicators to be monitored under each programme component (also at outcome and impact levels), in addition to establishment of a “dynamic computerised database LOGICS” to be “operationalised in collaboration with MoLG headquarters and the Planning Unit at district level” and elaborated in the *Management Information System*. The District Planning Unit would “coordinate and monitor” the M&E system and generate reports. At sector level monthly reports should be generated (internal district administration). Quarterly monitoring reports and periodic evaluation reports should also be generated and submitted to the PSC for discussion. The Consultant believes the M&E plan prepared is rather a “textbook plan” than a realistic and practical M&E system<sup>22</sup>. As far as understood the M&E plan was not followed as presented by the District. (Notably, the Planning Unit claimed they were lacking staff and equipment to follow the plan as laid out. ICEIDA however emphasised in the comments to the Draft Evaluation Report that the District did *some* monitoring themselves<sup>23</sup>).

<sup>21</sup> Notably not all payments of costs for the KDDP after 2011 were paid from the District operated KDDP bank account. In some cases (some consultants contracts and infrastructure contracts) payments were made directly from the ICEIDA office in Kampala.

<sup>22</sup> ICEMB in their comments to the Draft Evaluation Report writes: “*The development and application of M&E as management tool in development projects has evolved overtime and based on knowledge accumulated overtime the current projects have better designs than the previous ones. Uganda developed the first M&E policy in 2011 and it was approved in 2013. Similarly, the OECD-DAC Evaluation standards were developed in 2010. Notwithstanding the weaknesses the consultant found in the document, the efforts of the partners to develop the M&E Plan that early merits some recognition.*”

- *As admitted by the consultant, the M&E Plan which was part of the development of the Logframes for 2011-2015 refined the immediate objective for the support to the fisheries and WATSAN sector and added a timeframe of 2015.*

- *The plan added measurable indicators for support to administration sector (especially performance on minimum capacity requirement and performance quality attracting rewards (minimum conditions and performance measures).*

- *The plan emphasized the need for putting in place key structures and personnel – leading to a functional planning unit”.*

<sup>23</sup> ICEMB in their comments to the Draft Evaluation Report writes:

“- *A functional District Planning Unit was established with 100% staffing (District Planner, Senior Economist, Statistician and Population Officer)– this was set as precondition for funding the second five phases of KDDP implementation*

- *District Technical Planning Committee Members and the entire district planning unit staff (total of 13 officials) were sponsored to undertake training in monitoring and evaluation at Uganda Management Institute (UMI).*

- *The District Planning Unit was equipped with basic equipment and tools e.g. computers*

- *The M&E Unit based in the District Planning Unit headed by the Senior Economist coordinated reporting activities of KDDP involving collection, analysis and integration of sector reports into cumulative quarterly reports for the period 2011-2014 – culminating into the KDDP project completion report.*

It was also noted that the M&E database was never established<sup>24</sup>.

In principle, the monitoring of KDDP was a shared responsibility. Joint monitoring missions involved the district, ICEIDA and MoLG, multi-sector monitoring involved the districts sectors, and ICEIDA also carried out independent monitoring. The following monitoring mission reports have been made available to the Consultant: *Monitoring Report February 2013* (covering July-December 2012); *Monitoring Report April 2013* (covering first quarter 2013); *Synthesis Report On Analysis of KDDP Annual Report for 2013* (and KDDP Annual Work Plan and Budget for 2014); *Quarterly Monitoring Report for the Period Ending June 30, 2014*; *Joint Monitoring Mission Report, October 2014*; and *Final Report of KDDP Joint Monitoring Mission, 15-17 November 2016*. All these monitoring reports are prepared by the ICEIDA Senior Programme Officers at that time based in the Iceland Embassy offices in Kampala, except for the one from 2016 which was jointly prepared by ICEIDA and the District. Mostly, the monitoring missions comprised the two ICEIDA Senior Project Officers (Monitoring/Evaluation and Finance), meeting with all district administrative staff and visited selected programme locations. During the monitoring mission in October 2014 however 2 groups took part, with 12 and 13 participants respectively. On the final monitoring mission in December 2016, 16 persons participated (with 3 participants from ICEIDA, 1 from the MoLG and the rest from the district administration).

The format of the monitoring mission reports varies, and presents a mixture of tabular and narrative reporting, depending on the purpose and scope of the monitoring. The December 2016 report being (by default) the most elaborate. Monitoring reporting would have benefitted from having a standardized format and table of contents, which would have made it easier for outsiders to follow the monitoring throughout. Having said that, the reports all contain relevant information of the *Progress of Implementation, Achievements of Results* (outputs), *Validation of Results on the Ground, What Worked and What Worked Not*, and also give *Recommendations*.

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- Joint monitoring missions (ICEIDA, MoLG and KDLG) and multi-sector monitoring mission (District level sectors) were conducted to validate reports and get feedback from beneficiaries and mission reports were prepared by District Planning Unit".

<sup>24</sup> ICEMB emphasises in a comment to the Draft Evaluation Report:: "It is true that a separate computerized database for KDDP was not established. All reports are backed by source paper records filed in the District Central Registry. The copies of paper files were further filed by ICEIDA in the Gopro database/filing system. Some sectors supported have operational databases at district level linked to the sector Ministries (education, health, water and sanitation and local government) but some are under upgrades, especially the LoGICS database under the Ministry of Local Government".

## 3.2 Programme Achievements and Effectiveness

Effectiveness reviews the contribution of individual interventions to the output and outcome achievements of the defined result areas.

### 3.2.1 Programme Activities and Outputs

The *Project Document* from September 2006 contains narrative descriptions of the all the activities to be undertaken and the output indicators with target values in an orderly format. This set-up was also referred to in the progress reporting, and *Annex 6* lists the achievements related to the targets for easy reference (as presented in the June 2017 *KDDP Completion Report*). May be more interesting for the Evaluation of KDDP is the achievement in Phase II, based on the revised logframe from January 2011, and this is also enclosed in *Annex 6*. As seen, the reporting on achievements from both phases is very orderly presented. Below follows some brief comments to the achievements.

#### a) Local Government Administration Component

It is noted that Phase I comprised a lot of capacity building of the administrative staff (e.g. planning/budgeting, revenue enhancement, administration/M&E, generic skills, and various short courses). In addition, the data bank was established but few District Statistical Abstracts were produced. The development of district and sub-county office blocks were largely lagging behind, with the planned district block not finalised as planned. 3+4 rounds of grants for CSO support was undertaken in Phase I and Phase II respectively, but the Programme came short on the preparation of development plans for villages (only 40% achieved).

Seemingly Phase II had a larger rate of target achievements, with all the capacity building in e.g. planning, M&E, gender planning, revenue enhancement and data collection capacity building achieved. However, also in this phase the Programme came short on data collection, in addition to the update of the district website (which never properly came up running and is non-existent at the time of the Evaluation). 4 District Statistical Abstracts were produced and submitted to Uganda Bureau of Statistics (UBoS) for data quality check and approval before they were published for official use by user departments at district level and other stakeholders. Although the capacity building in revenue enhancement was undertaken, and even a fiberglass boat was procured for inspection on the islands<sup>25</sup>, the data-based revenue management system was never developed and consultancy for “*enacting ordinances to collect cess tax on palm oil produce and lading site fees*” not undertaken. This lack of progress on enhancement of revenue in the district is a shortcoming, as increased income to the District is imperative to sustainability of all public services! On the other hand, the scholarships to the 2 medical doctors and the 3 clinical officers budgeted under this component (as the health component in Phase I was discontinued in the second phase), was a positive achievement (see below).

#### b) Fishery and WATSAN Component

In Phase I, the capacity building on fish quality was nearly fulfilled, whereas all the equipment was purchased as planned (PCs, boats and engines, motor cycles, filing cabinets, office chairs and tables). The two fish handling facilities on the main island was never constructed, the facilities on the other islands constructed to around 70%, and the planting of trees and greening in the fishing villages and preparation of Environmental Impact Assessments (EIAs) in

<sup>25</sup> The Consultant does not know what happened to the boat.

the same was delivered to only 40%. It is further noted that the capacity building related to WATSAN in the fishing villages had serious shortcomings like the construction of water supply systems, eco-friendly pit latrines, and compost and refuse sites.

During Phase II basically all the outputs were delivered to 100%, which also included capacity building on fish quality, HIV/AIDS, gender, fish handling, and procurement of landing site equipment (fiberglass boats, inspection kits, protective kits, weighing scales) and furnishing of BMU offices. Positive impact from such capacity building noted as reduced fish post-harvest losses. Contrary to Phase I, all the community sensitisation on WATSAN O&M, and capacity building of WATSAN Committees, was undertaken, as the Programme's approach was using community-based maintenance system. The Evaluation Team however unfortunately found little positive impact from such WATSAN capacity building during the Evaluation<sup>26</sup>.

### c) Education & Sports Component

Capacity building of education officers and primary school teachers in Phase I was only partly achieved as planned, with training in interventions for special needs, gender, curriculum interpretation and HIV/AIDS coming the shortest. Training of *School Management Committees* (SMCs) in leadership was achieved to 100%. The number of sensitisation meetings for parents/guardians on e.g. child rights came seriously short of target, whereas the procured equipment was, not surprisingly, fulfilled to 100% (boats and engines, motor cycles and PCs/printer, sport equipment, musical instruments). The construction of schools kitchen was lagging seriously behind schedule, but 3 dormitory blocks were constructed giving a chance for schooling to children in remote islands from the schools. It is noted that the procurement of 228 "assessment stationary kits", meaning exam papers, were fully undertaken. This gave the schools an long-wanted opportunity to measure their skills in national exams, an opportunity they did not have earlier due to lack of funding. This was obviously well remembered by the school teachers interviewed during the Evaluation, and very much appreciated!

In Phase II, almost all outputs were delivered as planned (mid-term and end-of-term exams, text books, sport kits/trophies, training of sports teachers and *Music, Dance and Drama* (MDD) teachers, competitions held, parents meetings, etc.). Refresher courses for teachers were fulfilled to 150%. Also outputs directed to secondary and vocation education was fulfilled to 100% (learners' assessment, procurement of solar power systems, libraries with books and laboratories).

It should be mentioned again that the Education Component continued into a consolidation phase 2016-2019 (KIEP), and was thus still ongoing by the time of the Evaluation, basically continuing with some of the same activities as in Phase II, but with emphasis on improving the *quality* of the education at large, and also with more focus on the secondary education level<sup>27</sup>.

<sup>26</sup> ICEEMB in the comments to the Draft evaluation report: "The main issue is that strategy of using community based maintenance system (CBMS) which was original designed for simple water point sources was not effective for the piped water systems – this is one of the lessons learned and in the design of the WASH project in the district of Buikwe".

<sup>27</sup> ICEMB elaborated this in the comments to the Draft Evaluation Report: "There was a fundamental change from Education component supported under KDDP to the consolidation phase under KIEP:

1. **Immediate objective of KIEP puts emphasis on improving quality of education** (whereas in KDDP the immediate objective covered the elements of access, equity and quality).
2. **Under KIEP Primary education is still a priority** with focus on the following key result areas

#### d) Health Component

During Phase I the Health Component delivered achievements to a varying degree. All the equipment and facilities build were delivered (boats and engines; water tanks; mortuaries built, furniture procured; telephone lines and phones; motor vehicle; motor cycles), except for the ambulance boat with engine; and some of the training of staff (in childhood illnesses and T.B. treatment). Other activities came seriously short of target (e.g. outreaches in hard-to-reach areas totally failed<sup>28</sup>; number of school visits by the health centres; number of facilities and equipment maintained; strengthening of *Health Unit Management Committees* (HUMCs); training of private sector staff (0); radio shows and management meetings in the districts). Scholarship support to the two medical students were included and seemed to have been a good investment in the sector to judge from the observations during the Evaluation. (In Phase II this support was accounted for under the Local Administration Component).

The Health Component was ended after Phase I of the Programme, the main reason being “*mounting implementation challenges arising from failure of the district partner to fulfil the project preconditions, especially recruitment of critical qualified health staff*” (ref. the Completion Report). However, some of the health staff interviewed during the Evaluation, including the staff at district administration level, claimed they did not understand why the Health Component suddenly stopped, and claimed they never were given any explanation for this<sup>29</sup>. The Consultant believes that reasons for such comments could be that some of the interviewees came on board *after* the component had ended, and some simply had a “selective memory”, may be even in hope for the support to come back. The Health Department also claimed that the support to the Health Component very much was “steered” by the ICEIDA KDDP Programme Office and that the Health Department was not properly “consulted” at the time of closing the Programme component. According to ICEIDA however, such lack of consultation did not exist, as the KDDP was managed through formal national structures<sup>30</sup>. (It is also reminded that the MTR Report mentioned that the component had spread too much out and the risk of not giving a proper impact was prevalent, which surely would be a reason for discontinuing the donor support to the sector).

- a. Improved learning to acquire basic skills (literacy and numeracy) in early grades P1-P4
- b. Increased cohort survival to grade 5 and completion of P7
- c. Increased pass rates in PLE in Division I-III so that learners qualify for tuition free universal secondary education

#### 3. Lower secondary education is emphasised with the following key result areas

- a. Increased transition to secondary education or equivalent training
- b. Increased cohort survival and completion of lower secondary education (senior four)
- c. Increased transition to higher secondary education”.

<sup>28</sup> But boat and engine was procured for this purpose .... Lack of fuel to undertake the outreach most likely the reason for failure?

<sup>29</sup> One officer at district level commented that “*a staff member in ICEIDA had negative attitude towards health and claimed that “health was a department that did not need help”*”.

<sup>30</sup> ICEMB says: “*KDDP was managed through formal structures – PSC as coordination structure at National level, PMT as the management structure at District level. Decisions were made or communicated through these formal structures. The PMT at District level comprised of key sector heads including the District Health Officer. Hence the question of the department not being consulted or informed does not arise.*”

#### e) Tourism Component

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The Tourism Component came on board the Programme in Phase II and only lasted for 3 years. Some of the planned outputs were delivered as per target (consultancy for preparation of a *District Tourism Master Plan* and the following *Tourism Implementation Strategy* was procured; stakeholder/community meetings; PC and filing cabinet to Commercial Office; training for Natural Resources Dept. and Commercial Section; tourist sites mapping). A couple of outputs were not at all delivered (private sector support and study tours) and some were delivered to a minor degree (marketing of Ssesse Islands tourism, incl. website (not functioning today) and through other media). An external consultant was hired in 2013 to update the strategy presented in the Master Plan, submitting a report in November 2013 (*Needs Assessment Report for the Tourism Component of KDDP*), also containing the work plan for the remaining period of 2013 and the beginning of 2014. Also a *Tourism Component Workplan for January- December 2014* was prepared, totalling activities with a budget of around USD 190,000, expecting ICEIDA to cover 74%, the district 22% and the rest by private investors and communities. The workplan largely looks like a theoretical “wish list”, but with the discontinuation of the ICEIDA support, nothing was implemented as planned, and in practical terms almost all activities related to the tourism sector stopped. The Consultant is somewhat surprised that the Tourism Component was started at all, and a realistic risk assessment before start-up would mostly likely have revealed the risk of failure really materialising later.

#### f) Infrastructure Development and Equipment

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Although this was not a separate component in the Programme, the management decided to compile the infrastructure outputs in Phase II of all the other components under this heading also, in more detail than under the other components. The Consultant believes that was a wise move that gives a good overview of the main infrastructure “at a glance”. All the infrastructure was completed as planned, except for the *Transient Hostels in Bubeke and Mainga* (under Administration Sector) and some primary school kitchens under Education and Sports Component. The latter are being constructed later under KIEP (2016-2019).

A lot of equipment and material were purchased during KDDP for all components, and it was of course impossible for the Evaluation Team to inspect even a fraction of such. The equipment was inspected to the degree they were an integral part of the visits to the various locations. *Annex 8* contains a list of equipment, materials and infrastructure supplied in the KDDP taken from the *Completion Report*, with the status of the equipment as recorded per mid-2017<sup>31</sup>. The following was noted in the passing:

- All wooden boats purchased are written off and not in use.
- All fibre glass boats as still in use, with most of the engines.
- Of the 10 motor cycles purchased, all except 2 are operational.
- All the vehicles are in operational condition, except for the Toyota Hilux, which needs to be transported to Kampala for major overhaul.
- Of the desktop PCs purchased, only a couple are in daily use today. The senior officers at the district now have laptops.

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<sup>31</sup> The Consultant was in fact informed that the status was as per December 2017, but this must be a misunderstanding as the date of the Completion Report is June 2017.

- All the filing cabinets and office tables and chairs are in use.
- Some of the metal racks for drying fish are rusty and not in use (see photos in Annex 10). Other racks are in use in some locations and not in use in some others (local social-cultural habits?).
- Most rainwater harvest tanks are functioning, but a couple had been broken were the water tap is mounted (due to frequent moving of the tap making the tank to leak and finally a hole is opened).
- Most brass taps in water supply systems are broken and need replacement.
- None of the floating markers on location of the submersible intake water pumps remain (to mark no fishing in that vicinity), with a danger of fishing gear getting stuck in the pumps or destroying the pumps.
- The latrines are mostly functional and regularly cleaned, with a few exceptions (see photos). However, the “urban style” water flushing toilets with elevated water tank does not seem to be appropriate in a rural setting, as this is a too sophisticated mechanical system prone to easy breakdowns.
- Most of the MDD and sport equipment in schools are still available, just prone to normal wear and tear (e.g. balls are worn out, drums with hide need repair, etc.).
- All solar energy batteries are worn out and new are purchased in most places (normal lifetime with guaranteed effect is 5-6 years for good quality Western batteries. Obviously the batteries purchased were of inferior quality or counterfeit).
- The digital camera is written off and the video camera, which is noted as written off, in fact was never delivered, although it had been paid in advance (according to a procurement officer). The money was refunded.

The total investments in infrastructure, materials and equipment was USD 4,010,513, distributed as follows: Administration (incl. tourism)-24%; Education and Sports-45%; Fisheries and WATSAN-28%; and Health-4%, in total constituting 38.6% of the total programme budget.

### 3.2.2 Programme Outcomes

It is reminded as a backdrop that outcomes are the immediate (short- and medium-term) effects of the outputs, when these have been delivered as planned. This is illustrated in the Results Chain shown in *Figure 3.1 in Annex 4*, being according to the OECD DAC definitions for result-based management (RBM). The expected outcomes, often captured in a formulated *purpose* for a project/programme, are the main reason for any (Western) donor funding of development interventions/activities in the first place. One should also remember that fulfilment of the outcomes *cannot* in theory be guaranteed by the project management, but will (hopefully) materialise with a high probability, *if* the outputs are delivered. (It should be noted that as the HH survey is undertaken more than 2 years after the Programme ended, the information collected and observed is reported upon under the *Impact* section in this report).

As mentioned in *Section 2.2*, some outcomes are not well formulated (which in general indeed is difficult and requires a lot of experience in such formulations to get them appropriate), are difficult to measure, and all are lacking target values (although a reference to national standard is truly given ...). In general, an indicator without a target value is not so useful for monitoring the purpose of any intervention being achieved. Reference is made to the table in *Annex 7* for the comments below. In the table comments on indicators and achievements from both programme partners and the Consultant are included<sup>32</sup>.

<sup>32</sup> See ICEMB’s comments to the table in the introductory text in *Annex 7*.

It is also reminded that the immediate objective of the Local Government Administration Component of the Programme is formulated as “to facilitate and support the efforts of the Kalangala District Local Government in achieving efficient and effective leadership, administration and management of public, civil society and private agencies in Kalangala District by 2015”. In other words, as a result of the Programme it was expected (hoped for) that the civil society and private agencies should have more efficient leadership, administration and management. This is of course a formulation which is clearly unrealistic, as the civil society and private sector are operating independently of the public authorities.

Nevertheless, the Programme had an activity directly targeting the civil society, namely 3 batches of small grants to support local CSOs during 2006-2010 (UGX 200 mill) and 4 rounds during 2010-15 (total grant amount unknown to the Consultant<sup>33</sup>). The implementation of this small grants project financed under KDDP was monitored by the *Kalangala District NGO Forum (KADINGO)*, having a contract with KDDP and also receiving a motorbike and a boat for this monitoring purpose (still operational at the time of the Evaluation). Notably, the *Completion Report* for the Programme contains little information about these small grant schemes, and neither do the *Final Report* or the *Mid-Term (5 year) Report*.

However, two final reports from the CSO support in the two phases were seemingly prepared (according to information by KADINGO), but it was not possible for the Consultant to retrieve these reports during the fieldwork or the draft reporting period of the Evaluation, neither from the District nor from the Icelandic Embassy. (A significant number of documents regarding the CSO support were however sent to the Consultant as part of the Icelandic Embassy’s comments to the Draft Evaluation Report, but not any report covering all the grant batches in the second phase)<sup>34</sup>.

There has been no direct programme support to the private sector, except for the hiring of contractors to build the infrastructure (tendering) and suppliers for various equipment. One person from KADINGO was member of the PMT, seemingly representing both the civil society sector and the private sector, which is “strange” set-up indeed.

#### a) Local Government Administration Component

At least 5 of the outcomes are not well formulated, and none have timing indicated. The most important outcome is that in 2014 all the 8 local governments (LGs, meaning sub-counties) in Kalangala District met the minimum functional capacity requirements in the key areas defined by the national authorities, and 70% gained rewards in performance measures. According to the *Daily Monitor News Paper* of Thursday June 2018, the Government released the report on performance of local governments for the Financial Year 2017/2018, showing that Kalangala scored 61% compared to the best LG that scored 85% and the worst that scored 28%. The districts and municipal councils were assessed on their performance in the health, education and water offices, as well as cross-cutting issues such as

<sup>33</sup> In 2010 total grants of UGX 88.7 mill were awarded to 14 CSO (according to the 2010 *Monitoring Report* by KADINGO); and in 2011 total grants of UGX 72.6 mill (according to the *KDDP Grant Committee Declaration*).

<sup>34</sup> ICEMB in their comments to the Draft Evaluation Report writes: “It is admitted there was a filing problem between the district and ICEIDA, but this was a successful intervention with verifiable impact. The organizations supported have sustained their operations up to now. See the initial reports on this folder; Example are including, among other, the following:

- *Kalangala District Education Forum (KADEFO) – Is currently engaged to implement community sensitization under KIEP*
- *SHED has won a grant from USAID to sensitize parents and their role in promoting earl grade learning*
- *KAFOPHAN is an active network for people living with HIV/AIDS”.*

accountability and filing of quarterly reports. Kalangala District was ranked the 43<sup>rd</sup> out of 138 local governments (district and municipal councils<sup>35</sup>). The local revenue realisation rate increased from 24% in the Financial Year (FY) 2009/10 to 66% in FY 2015/16<sup>36</sup>, which is encouraging, but still on the low side.

The most positive achievement is that the district administration and the LGs have all received basic infrastructure, largely meaning office buildings with furniture, enabling them to operate as mandated and expected (none of the LGs had this in 2006). However, the construction of infrastructure is clearly an *output* indicator, whereas the improved service delivery by the LGs is the wanted *outcome* (ref. to indicator of functional capacity). The support to 5 of the 8 LGs administration by KDDP was also seemingly according to target (although no target was really set), but again this is an *output* and not an *outcome*.

#### b) Fishery and WATSAN Component

The most important outcome is that post-harvest fish loss has been reduced from 25-30% in 2005 to 1-5% in 2014 (not substantiated by real figures, but merely a subjective assessment by the programme partners). The *Completion Report* claims that Kalangala was still amongst the top 3 district using illegal gillnets for fishing at that time. Later, the army (UPDF) intervened, and during the Consultant's visit to the Fish Landing Sites (FLSs), all the members of the *FLS Committees* (FLSCs) interviewed claimed that there was virtually no illegal fishing any more on those sites ("*.. the ones that undertook illegal fishing have moved.....*").

Also the revenue from fishing has increased, from around 40% contribution in 2012/13 to 50% in 2015/16, a positive development indeed. However, from the interviews in the FLSs, and also with sub-county staff, it seemed that not all fish movements were reported to the authorities, although the control has been stricter now when the army control the landing sites and the Directorate of Fisheries Resources carries out a strict registration of fishermen and traders through issuing licences. It is reported that all FLSs are complying with rules related to the non-encroachment zone at the beaches, which is a positive development.

Related to WATSAN, the *Completion Report* claims that there have been no reported cases of cholera and dysentery since 2010 in the 5 focal fish landing sites. On the other hand, the statistics from the District Health Information System (DHIS) shows that in the District there have been some individual cases of cholera the last years (2012-5 cases, 2014-2 cases, 2015-4 cases, 2017-1 case), and dysentery (2012-311 cases, 2013-1,031 cases, 2014-933 cases, 2015-459 cases, 2016-909 cases and 2017-687 cases), as seen in *Table 3.1* in *Annex 4*. The statistics also show that there has been a significant increase in diarrhoea cases the last three years, whereas the number of typhoid cases have been fairly stable. The reasons for this development have not been given.

<sup>35</sup>Information given by the Icelandic Embassy with the comments to the Draft Evaluation Report. They also informed that the assessment of performance of local governments was taken-over by Office of Prime Minister (OPM) from MoLG and the OPM released the latest report in 2018. (<http://www.monitor.co.ug/News/National/Govt-names-best--and-worst-districts/688334-4635104-hy84cm/index.html>)".

<sup>36</sup> The Financial Year notably goes from 1 July to 30 June.

### c) Education & Sports Component

In the Completion Report, the KDDP outputs and outcomes are reported on for the period 2006-2015. KIEP started in 2016 onwards and its expected outputs were listed separately and independent of KDDP. However, as the activities largely continued seamlessly from KDDP into KIEP, some interviewees in the schools visited by the Evaluation Team had difficulties in remembering what came before 2015 under KDDP and what came after under KIEP. Some school staff were also employed after 2015 and thus did not have the direct experience with KDDP activities.

Notwithstanding the fact that some of the *outcome* indicators are clearly *output* indicators (namely indicators 9, 10 and 11), education indicators in general are fairly easy to formulate and thus are all relevant. The outcome table under this component reports on the years 2014 and 2015. However, some more recent data has been obtained from the Education Dept. in the District and are referred to below.

- Indicator 1: the Gross Enrolment Rate (GER) has increased from 73% in 2005 to 86% in 2014 (national average was informed to be 117%<sup>37</sup>). *Table 3.2 in Annex 4* show the enrolment figures for the years 2011-2018, which indicates the changes since the MTR and thus the outcome of the efforts in the Programme since then. It shows that enrolment for all grades have increased by 27.2%. However, the enrolment in Grade 1 has increased by only 8.4% from 2011 to 2018 (with only 1.8% increase for girls).
- Indicator 2: The Completion rate was 40% in 2009 and this has increased to 53% in 2015, as compared to the national average that year of 62%. This indicates a relatively high drop-out rate still prevalent in Kalangala. From the pupils enrolling in 2011, only 21.5% graduated after 7 years, **meaning a dropout rate of 78.5%**. The dropout rates for boys were 87.5 and for girls 69.5%. (In comparison: The total dropout rate for the period 2012-2018 was 70.3%, but it remains to see whether this reduction trend will last). Interestingly enough the largest dropouts are the first year (Grade 1 to 2 with 38.9%) and the last year (Grade 6 to 7 with 46.2%), with the lowest from grade 3 to 4 (2.6%). According to the district Education Dept. there might be several reasons for this, of which the most important are listed as:
  - High HIV/AIDS prevalence rate in Kalangala District (25%-30%) leading to "Child-headed families", increased numbers of OVCs, stigmatization, deaths, etc.
  - Child labour due to many oil palm plantations where children are used especially during harvesting season; and rice growing where children are forced to keep birds away from rice gardens and fishing.
  - Long distances from the nearest school (5 km+) where children have to walk through thick forests, oil palm plantations, etc..
  - Inaccessibility to schools among children especially from outlying islands with no school and at the same time disadvantaged to afford boarding charges.
  - Migratory tendencies of the fisher communities who keep on moving with their families from one island to another in pursuit of "big fish catches".

<sup>37</sup> The Education and Sports Sector Fact Sheet 2002-2016 from the Ministry <http://www.education.go.ug/files/downloads/FACT%20%20%20SHEET%202016.pdf> presents the national average as 117% in 2014, but this is assumed to be a misprint, as the figures could possibly not be more than 100%. (Neither the Education Dept. in the District could explain this but never came back with a verification on the issue).

- Target workers among non-permanent members of the community, especially among the workers of oil palm plantations, who are ferried from other districts with their families to work in the plantations.
  - A recent crackdown by the Government on illegal fishing has demobilized many families; many families have relocated to other districts.
  - Early pregnancies (defilement and rape) among the girl children.
  - Early marriages by very poor families.
- Indicator 3: The transition rates for KDDP alone have not been established and baseline figures were not given.
  - Indicator 4: Pass rates in national exams (Primary Leaving Examination - PLE) have increased significantly in Kalangala. In 2006 the rate in Division 1-2 was 35%, and in 2015 it was 67%<sup>38</sup> (national average being 86% that year). The overall pass rate for all 4 divisions increased from 71% to 89% in the same period.

The Kalangala performance in Divisions 1-4 is listed in *Table 3.3a* for the years 2010-2017, being a good proxy for the outcome/impact of the efforts in the Programme. The table shows that there has been an increase in Kalangala in all 4 divisions during 2015-2017 from 90.1% to 92.8% passes. The national average figure for 2017 was 90.9%, so Kalangala is above the average! The aim is always to increase PLE performance for the upper divisions, and there is in fact an increase in Division 1 and 2 from 66.7% to 71.8% (2015-17), with an increase from 52.6% to 61.5% for Division 2 alone! (Subsequently there has been *decrease* in Divisions 3 and 4). The improvement in Kalangala is also shown in the PLE Performance Index<sup>39</sup> shown in *Table 3.3.b*, illustrating the develop from the very beginning of the Programme up to the end in 2015 (more updated figures have unfortunately not been readily provided to the Consultant). The index for Kalangala has moved from 46% in 2005 (below national average) to 65.3% in 2015, being well above national average, putting the District as number 11 amongst the 112 districts in Uganda!

- Indicator 5: The construction of infrastructure is an output, and has been reported accordingly.
- Indicator 6: All 23 government schools have functional management bodies (*Schools Management Committees* – SMCs).
- Indicator 7: *Table 3.4* shows the number of teachers in Kalangala in 2018. There are in total 117 teachers (67.5% governmental 32.5% and the rest privately employed). This mean that the teacher-pupil ratio is 0.021, compared to the national average of 0.018 in government schools (2016 figures, being the latest available).
- Indicator 8: The Pupil-textbook ratio was reported to be 1:1 in 2014, with the national average of 4:1. However, visiting the schools during the Evaluation revealed that some schools still have a lower ratio, but clearly are approaching 1:1. This is indeed a very good achievement (also resulting from the activities post-2015 in KIEP), which cannot be attributed to ICEIDA alone, as the Evaluation Team observed several new books that were given by others, e.g. Rotary Club.

<sup>38</sup> Notably at the end of primary Grade 7, pupils sit their first major national exams, the primary leaving examinations (PLE). Presently PLE has 4 examinable subjects – English language, mathematics, science and social studies. The best possible mark pupils can achieve is a total of 4 with the worst being 36 (means a failure). Students with 4-12 points pass the PLE with a first grade, or Division 1. Scores 13-23 get a Division 2, 24-29 get a Division 3, while those with 30-34 pass with a Division 4.

<sup>39</sup> The PLE Performance Index measures the quality of passing at all levels of education. (The number of candidates passing in each grade or were ungraded multiplied by a respective weight factor, and then the actual weight is summed up and expressed as a ratio of the expected weight for maximum performance. The official designed weights are division one (20), division two (15), division three (10), division four (5), division U (0)).

There is no doubt that the support to the education sector in Kalangala has been successful, although there is always need for improvements. The Consultant firmly believes that all the interventions jointly (renovation of classrooms; construction of kitchens with energy-saving stoves (reduced fuelwood consumption of up to 2/3!); building of dormitories to capture pupils from the outer islands; construction of latrines and water supply systems (mostly rainwater harvesting); provision of books, sports equipment and MDD material, etc.) have significantly contributed to the improved school enrolments figures and performance results. Many school teachers interviewed also proudly pointed at the increased *status* of the schools within the communities, now looking proper and being able to give the pupils adequate education. Relatively more families are willing to send their children to schools than before, in spite of the drop-out rate still being high (of reasons outside the control of the sector per se). The serving of meals at schools also most likely will have a positive effect on the child health in the District, and also contributing to creating a better learning environment.

#### d) Health Component

There seems to be no significant difference in the *outcome* disease statistics for the health centres supported by ICEIDA up to 2010 and the ones that did *not* get support (meaning statistics from 2011 onwards, which *could* indicate any outcomes of the ICEIDA-supported interventions). Nothing else was expected as the support to the HCs ended many years ago, and the present lack of operational funds is the same with all HCs<sup>40</sup>.

Little seems to remain of the equipment given to the HCs under KDDP, except for the solar panels mostly being in use, although the batteries have been changed. The desktop telephones with antennas was said to have lasted around 1 year the most, but at least in one of the HCs visited it had never been in use since the day it was installed. (The Consultant saw only one such dusty telephone stored away in a cupboard in a HC). The car and one of the two motor bikes given to the District Health Dept. were still operating, in addition to the two boats, where one was given to Mazinga Sub-County (hard-to-reach). It is also assumed that the training given under KDDP to the health workers still has an effect as such knowledge stays with individuals, but this is impossible to measure as many of the trained staff have moved to other places, and taken their knowledge with them.

There is however one KDDP output that obviously can show positive outcome, and that is the sponsoring of the education of 2 medical doctors (females) and 3 clinical officers. The two doctors were coming from Kalangala, and started working in Kalangala after education in 2015 and 2016 respectively<sup>41</sup>. Both were still working in Kalangala at the time of the Evaluation<sup>42</sup>, and wanted to continue working there. (The 3 clinical officers were under education to become medical doctors at the time of the Evaluation). Together with the renovation of the maternity staff houses in Kalangala HC this was said to have given positive tangible results on the number of maternal deaths in Kalangala HC. However, this was *not* the case by judging from the statistics received from the Health Dept. in the District. (The number of maternal deaths have been fairly stable the last years, although the new doctors started to work in 2015 and 2016 (respectively: 2011-1, 2012-, 2013-0, 2014-2, 2015-0, 2016-1, 2017-3). On the other hand, *Figure 3.2* in

<sup>40</sup> For example, the Health Management Committees (HMCs) in Kalangala were active and meeting regularly (quarterly) supported by ICEIDA under KDDP (transport and lunch). However, today they are not so active and rarely meeting, except for the HMCs on the main island, due to lack of funding to facilitate the meetings. It was informed that the HMCs are only working in the districts in Uganda where there is donor support.

<sup>41</sup> One was first deployed to Kyamuswa Health Centre (in Kalangala) and later transferred to Kalangala HC.

<sup>42</sup> It was informed that one of the doctors was still using the vehicle provided to the Kalangala Health Centre by ICEIDA.

*Annex 4* shows the significant increase in Caesarean surgery following the arrival of the medical female doctors (more than doubled from 2016 to 2017). It was also informed that the number of more complicated cases referred to the hospitals in Entebbe and Masaka has been reduced the last couple of years, meaning more cases are treated in Kalangala<sup>43</sup>.

#### e) Tourism Component

The Tourism Component, as mentioned earlier, started in 2011 and ended in 2013. The formulated indicators for tourism outcome are as taken from a “textbook” and could be suitable in a well-functioning city with a strong private sector and a good reporting system. In the Kalangala setting such indicators does not even have an “academic interest”. The main issue is that there is no system in the District of recording the number of tourists entering the island. Such data are registered by the Ministry of Works at the ferry terminals in Entebbe and Masaka, but there is no requirement for the ministry to share this info with the District, which neither is done automatically. The district HQs did not have any tourism statistics readily available at the time of the Evaluation.

However, the District Commercial Officer managed later to get some statistics on the tourism sector as follows: the number of tourists in Kalangala has gradually doubled since 2012 and around 10,000 were registered in 2017 (with a reduction in the number in 2013 and 2014 due to irregular ferry routes)<sup>44</sup>. Information from the Business Centre in Kalangala Town Council shows that the revenue from tourism has been insignificant but fairly stable the last 4 financial years, with around UGX 3 million in 2017 (around € 680 only). According to information given to the Consultant, there has been some investment in tourism-related facilities, seemingly the last 4 years, e.g. improvements in 5 resorts<sup>45</sup>, building of a green park hosting celebrations/weddings, 8 restaurants and bars opened, 7 super markets open, 10 private garden “home stays” and 200 new self-contained houses for rent.

There was obviously no use in continuing the Tourism Component under KDDP beyond the 3 years. The Consultant could easily in retro perspective say that it should *not* have been started at all, as it would be obvious, and simply based on common sense, that a boost in this sector could not realistically be expected in the foreseeable future. This is not due to the lack of interesting sites to visit in Kalangala, but because there is simply no market for extensive tourism on the islands, especially so when considering what the island can offer as compared other locations in East Africa. What Kalangala can offer, at least to foreign tourists, only targets a very narrow group at present. (The Ssesse Island being amongst the top 10 of the *World’s Best Secret Islands* in Lonely Planet 2010 targeting such groups of “explorers”).

The main reason is of course that the infrastructure is not developed to a point where the islands could be competitive with other locations on mass tourism. Even during the Evaluation, the infrastructure by mere observations proved to be sub-standard (limited internet coverage, and even in the best hotels it was intermittent and very weak, the roads are bad, there is no readily available guides or boats for transport to the island sites, and no accommodation in those places, etc.). Even if it was a noble idea to develop tourism in order to get more income revenue, it should be realised that it is the private sector that always must be by the steering wheel in the tourism sector and

<sup>43</sup> Kalangala HC has applied, and promised by the Ministry of Health, to get a hospital status, but this is still pending the President’s approval. Normally, districts with more than 500,000 people would get a hospital, but due to the location of Kalangala and far to reach islands, an exception would be made in this case.

<sup>44</sup> There is not information whether these were national or foreign tourists

<sup>45</sup> Dream Land Gust House, Fephilo Leisure Garden, Happy Times, Camp David Beach and Brovad Beach.

not the district authorities per se. If there is a tourist market potential, the private sector will surely develop it. So far this has happened to a limited degree, and according to its “own pace”.

Following the arrangement of the World Tourism Day in 2017 the Kalangala Tourism Development Association (KTDA) was established comprising some small tourist-related association<sup>46</sup>. Lately they had one meeting in 2016 and one in 2017, but without any funding for development initiatives (no sponsors so far), no activities have been undertaken.

The Consultant visited the Ssesse Island Tourism Centre being located in a building next to the District HQs in Kalangala. There were some few artefacts displayed in a disorderly manner, and a café was offering drinks (instant coffee and tea) and food (brought from nearby cafés). The centre was established in November 2017 by a private family and had a full time manager to run the place, in addition to a waitress and a cook, with no support from the district authorities. The manager produces some simple handicraft that is sold in the café. She informed that there are very few customers, with the café being visited by a couple of people per day in average. In December 2017 there were 6 foreign tourists visiting the centre (from Poland and Germany). The Centre was a sad sight indeed, but probably representative for the state of the tourism sector in Kalangala at large.

### 3.2.3 Cross-Cutting Issues

#### a) Gender

The *Project Document* emphasises the need for reporting and analysing on gender in the education sector. (Notably, this is also a national requirement and all statistics are reporting on gender). Reference is also made to the *Millennium Development Goals* (MDGs) and the need to promote gender equity and empowering women, and iterates that training will be given in implementation of gender analysis and mainstreaming. It is also reminded that the fishing-dependent communities include marginalized women in decision-making, management and utilization of the fisheries resource. This includes inadequate access to basic services, especially health, including safe water, sanitation and hygiene (WASH) facilities, and education, which invariably affect women/girls more than men/boys.

In the Programme, all reporting under the Education Component has thus by default been on gender, as all data and statistics are always presenting figures for boys and girls. (It is also noted that this is reflected in the logframe indicators). The *Completion Report* concludes that gender issues have been fully integrated and mainstreamed in all the interventions. Specifically, the following gender-related issues should be highlighted:

- Capacity development interventions have emphasized participation of both men and women to benefit from the skills training, community sensitisation and awareness campaigns; and a specific training in gender planning and budgeting was implemented (under the Local Administration Component).
- Infrastructure development interventions clearly focused on gender issues by addressing the different needs of men/boys and women/girls, especially in construction of WASH facilities for community use and schools (e.g. washrooms for menstruation management). This also included the WASH facilities at the fish landing sites. At the fish processing facilities, such as the silver fish (Mukene) drying racks and the choker kilns for drying fish<sup>47</sup>,

<sup>46</sup> Ssesse Islands Beach Association, Lake Victoria Development Initiatives, Kalangala Farmers Association, Ssesse Islands Nature Conservation and Tourism Association, Ssesse Islands Farm Packers Association, Ssesse Tourism Guides Association

<sup>47</sup> Notably, at the time of the Evaluation, such choker kilns have been banned and were thus not in use.

specific needs of women who were mainly involved in post-harvest fish trade, was addressed (as they could not benefit from the infrastructure and facilities designed to handle fresh fish for the export market where men were dominant).

- ICEIDA arranged training in gender issues conducted by *United Nations University Gender Equality Studies and Training Programme* (UNU-GEST) where the programme management and technical staff and officials from partner districts participated. The district gender focal person was sponsored for course in gender studies at the UNU-GEST in Iceland.
- Gender equality was considered during the selection process for sponsorship of the medical personnel whereby the 2 medical doctors were female and one of the 3 medical assistants/clinical officers trained, was a female.
- The district authorities were encouraged to promote gender equality in recruitment of staff, and as a result the District Natural Resources Officer and the Senior Economist recruited during the project implementation period are females (referred to as “soft diplomacy” by the programme management).

The Consultant concludes that the gender issues have been well incorporated in the Programme, and well blended with the local social-cultural aspects of division of work between men and women. The constructed infrastructure meeting the special needs of females has surely made daily life easier for e.g. girls in schools and women in the communities at large, by meeting their special needs.

#### b) Environment

The core challenge of Uganda’s fisheries was over-exploitation of the fish stock and subsequent degradation of ecosystems, due to population increase and improper fishing practices (e.g. use of illegal gillnets and fishing of immature fish) leading to low fish catches. The mere rationale for the KDDP was contributing to the efforts of sustained benefits for the poor communities who depend on fish for income and food security. As such, environmental challenges were the basis for the interventions in the first place and have been addressed in the Programme through several actions, to mention some:

- Compliance with non-encroachment environment lakeshore protection zones was emphasized while developing fish handling infrastructure, in accordance with Uganda’s *National Environmental Act (CAP 153)*. (For example: The population were shifted away from the lakeshore protection zone, ideally a minimum of 200 meters, but down to 100 meters was allowed).
- All fish handling infrastructure and facilities were developed after project briefs were prepared by the Natural Resources Dept., to ensure that their construction and utilization would not contribute to degradation of the environment on both land and water<sup>48</sup>).
- The Programme supported the Natural Resources Dept. at district level to undertake regular environment inspections, data collection and production of state of environment reports.
- The WATSAN interventions supported under KDDP addressed environmental issues of poor sanitation and risks posed by open defecation and use of unsafe water to the communities.

<sup>48</sup> The project briefs provided a management plan to ensure regulated public use of the lakeshore protection zones, prevention of siltation of the lake, and control of pollution or degrading activities, in line with the objectives and principles specified in the environmental regulations.

## Effectiveness

- Kitchen saving stoves in schools addressed environment concerns by reducing the demand for wood fuel (down to 1/3 of previous consumption) hence reducing pressure on forests.
- Environment issues were mainstreamed in capacity building trainings, and sensitisation and awareness campaigns undertaken under the Programme.

The Consultant concludes that the Programme has encouraged sustainable natural resources management in an appropriate way, and that the activities have not caused any negative environmental impact.

### c) Anti-Corruption

The issue of anti-corruption work in developing countries at risk is a concern with most likeminded Western donors. The *Project Document* makes reference to the *Poverty Eradication Action Plan* (PEAP), on which principles the Programme is built, mentioning the focus on “... transparency, accountability and elimination of corruption”. This issue is however not part of the programme strategy, not at all mentioned in the list of activities and not reported upon in the *Completion Report*.

The Consultant believes that this should have been addressed in the planning documents and the activity list, especially as part of the capacity building/training of district staff under the Local Government Administration Component. Especially so, when Uganda is considered to be struggling with high level of corruption and is ranked as number 151 in Transparency International list of 180 countries (2017), with a *Corruption Perception Index* (CPI) of 26 (where 0 is highly corrupt and 100 is very clean). Only Somalia (180/180) and South Sudan (179/180) is ranked lower in the region. In 2005, when the Programme was planned, Uganda ranked as 117 of 158 countries<sup>49</sup> (with Iceland ranked on top...).

The only document in which corruption is mentioned, is in the “*Assessment of the capacity of Kalangala District to manage donor funds*” where such consideration has a natural place anyway. In addition to stating Uganda’s ranking in the Transparency International list, it lists some positive development in the country in relation to corruption and investments, including establishment of *The Public Procurement and Disposal of Public Assets Authority* (PPDA) in 2003; the Government’s anti-corruption strategies as well as the coordinating body *Inter-Agency Forum* (IAF); the *Anti-Corruption Act 2009*; the *Data Tracking Mechanism* (DTM) initiative launched in 2009; to monitor corruption trends in Uganda on an annual basis; and the *Whistle-blowers Protection Act* enacted into law in April 2010, also monetary incentives for reporting on corruption. The document additionally lists some risks in very general terms related to national corruption and bribery, with no mentioning of possible risks in Kalangala District, making this assessment of little use indeed.

<sup>49</sup> With e.g. Tanzania, Malawi, Zambia and Zimbabwe having better ranking, but Kenya and Somalia and Sudan having lower ranking.

### 3.3 Conclusion

The Consultant concludes that the effectiveness of the Programme has been satisfactory, but with some shortcomings.

The managerial set-up has been implemented as described in the Project Document, but ICEIDA took on a more proactive managerial role in the first phase due to the lack of implementation capacity in the district administration. This was a pragmatic decision to keep up the momentum of the Programme and some tangible results, while at the same time building capacity in the District. The ICEIDA KDDP Programme Office in Kalangala was closed in 2010 and from then ICEIDA only operated as funder and sole advisors. Progress reporting was undertaken by the ICEIDA KDDP Programme Office in Phase I, and in Phase II the district administration prepared progress reports. The Phase I progress reports and the annual reports in Phase II are orderly and commendably reporting on activities, output, and the latter also on outcomes. During Phase II monitoring reports, in various formats, were produced mainly by ICEIDA staff following the joint monitoring visits (with one exception where also the District took part on the reporting). The comprehensive textbook-like *M&E Plan* was never followed as outlined by the District, although *some* monitoring was undertaken.

The planned outputs have been delivered to a satisfactory degree, with a few shortcomings especially in Phase I, e.g. preparation of village development plans and delayed infrastructure development. All capacity building, procurement of equipment and most building of infrastructure were achieved, but the district website and the data-based revenue management system never materialised. Sponsoring education of medical staff was a positive achievement. The Tourism Component, lasting for 3 years in Phase II seemed to have been based on very unrealistic assumptions from the very beginning, and produced no tangible useful results (just “reports”). The lack of private sector involvement seems to have been the stumbling block. Most of the main equipment, material and infrastructure purchased are still operational, but with some natural wear and tear materialising.

The outcomes, being the effects of the outputs, is more important, but these indicators are not well formulated and without target values listed. The effect of the small grants to the civil society cannot be directly detected (no summary reports were available from these grants, except from one year). The local governments have all got improved office facilities as basis for giving improved services to the population.

The post-harvest loss at the *Fish Landing Sites* (FLS) have been reduced, and the revenue from fisheries have increased. The WATSAN structures surely have made life easier for the inhabitants at the FLSs, but the technical condition of the systems seems to be sub-standard, as proper O&M is lacking (except in Kasekulo-Ttubi).

The Education Component (with activities seamlessly continued into KIEP after 2015) has evidently given a positive contribution to the District, with increasing enrolment of pupils (one factor being new dormitories) and PLE results above the national average. The pupil to textbook ratio is close to 1:1, but school dropout rate remains high.

Few effects of the ICEIDA support to health can be seen today, except for the increase in Caesarean surgery in Kalangala Health Centre due to the medical doctors which education was sponsored by ICEIDA.

There is no effect of the Tourism Component, as no funds have been set aside in the District and no donor is supporting such efforts today. At large, tourism development is entirely depending on private initiatives, and some few

## Effectiveness

positive development signs have been detected, although development is slow and infrastructure in Kalangala is still not *en par* with modern tourism requirements.

## CHAPTER 4 Efficiency

It is reminded that *efficiency* is an indication to what degree the programme outputs have been delivered in accordance with Programme Documents, at the appropriate quality and quantity and at planned cost.

### 4.1 Implementation Efficiency

In *Section 3.1.1* the Consultant concluded that the managerial set-up seems to have been pragmatic and effective to implement the Programme. Following appropriate capacity building in the first phase of the Programme, the district administration themselves took over a more leading role in the second phase, which also seemed to have worked satisfactorily. Notwithstanding this fact, it is still at the time of the Evaluation noted that the district administration has a staffing gap as compared to the ideal and mandated set-up. The last available figures from October 2017 show that 571 positions are filled out of 723 position in total (79%). This includes all staff at the district HQs, the health centres, the sub-county governments and the schools, and is indeed good as compared to the staffing level in 2005, being only around 48%<sup>50</sup>. The improvement is assumed largely attributed to the support from ICEIDA, in construction of district HQs, sub-county offices and schools, making it more attractive to work in the administration, in addition to the equipment provided and the training of the district staff. Through interviews with district staff it was clear that the staff turnover in the district administration had been reduced and that staff stay in their positions for a much longer time (although no statistics is readily found on this).

In spite of the ICEIDA support being efficient, under the prevailing circumstances, the hardware support of the capacity building has by default created increased need of capacity and resources in the District for post-Programme O&M of the facilities and equipment. Such adequate O&M can clearly not be met by the District as evidenced at the time of the Evaluation, which puts the sustainability at risk. As such, and even if the efficiency during programme implementation was satisfactory, the District seems to have “taken a too big bite of the apple, not being able to swallow it”. In other words, the efficiency post-Programme to manage and administer the gains achieved through the Programme is not good enough.

<sup>50</sup> Figure not including the health sector.

## 4.2 Programme Expenditures and Cost-effectiveness

The initial budget for the Programme was USD 7 million (82.3% grants from ICEIDA, the rest from GoU/KDLG). Included in this budget was around USD 1.620 mill in technical assistance (TA) from ICEIDA, 1.085 mill for district local staff, USD 0.050 mill for evaluation and USD 4.245 in direct monetary contributions from ICEIDA. The budget was later revised in several steps, as follows (*Table 4.1 in Annex 4* refers):

- The total expenditure out of ICEIDA contribution during Phase I was USD 3,964,014, leaving USD 1,795,986 available for Phase II.
- In the MoU agreed upon in October 2011 for Phase II, additional activities to the cost of USD 1,450,250 were approved for funding by ICEIDA, bringing the total budget for Phase II to USD 3,250,236.
- Additional activities and administrative costs of USD 1,093,222, not planned for in the original programme plan, were approved by ICEIDA for funding during 2014-2015 (based on i) availability of funds from ICEIDA HQ; and ii) the activities were considered being a valuable addition to the Programme and likely to enhance and strengthen the outcomes).
- Finally, additional funding of USD 772,941 was approved by ICEIDA to cover various administrative/overhead costs occurring in Phase II, which had not been included in the MoU of October 2011 (salaries of local staff, operation of the KDDP Programme Office, etc.).

USD 10,396,140<sup>51</sup> was actually in total spent in the Programme, with USD 9,080,413 coming from ICEIDA. The national contribution was USD 1,300,713, but this was never accounted for as part of the programme accounting. This was a contribution *in kind* by the national Government/ Kalangala District Local Government, where most of funds that pay salaries of district staff are transfers from the Central Government.. It is not known how much of this local contribution that really covered management/ administration costs/staff at district and national level, but it is assumed to be the bulk of the money/time.

*Table 4.2 in Annex 4* shows ICEIDA's direct monetary contribution to the KDDP during the entire programme period 2006-2015 divided on components. The support was distributed to the various sectors/components as follows: Administration - 19.6%, Education and Sports - 38.2%. Fisheries/ WATSAN - 13.8%, Health - 3.7%, Tourism - 1.6% and Overhead costs - 23.1%. The Overhead Costs comprises operation of the ICEIDA KDDP Programme Office in Kalangala up to 2010 and thereafter TA from ICEIDA, Kampala.

Of the ICEIDA support, in total USD 2,847,666 were direct transfer to the District, which is not posted under the various ORRI codes in the ICEIDA accounts, but is accounted for as "*Direct transfers undistributed to cost Codes*"<sup>52</sup>. These figures are expenditures accrued from January 2014, when the accounting and money transfer system changed (explained in the *Section 3.1.2 on Reporting*). According to ICEIDA, the District accounted for all the funds spent on a monthly basis, submitted together with the electronic cash book and certified bank statement for verification and validation. The transfers were made in lump sums within the approved budget for that period, but are not broken down into expenditure codes as previously done.

<sup>51</sup> There is a variance of USD 22,220 in this total figure and the total figure given in the Completion Report (USD 9,080,413 vs. USD 9,102,633). The Embassy is looking for a clarification for this, which is most likely a calculation error, not influencing on the explanations for the revised costs given.

<sup>52</sup> In the ORRI system posted under a special code "59182-Contribution to foreign parties".

It is close to impossible to calculate the management costs (or rather the *value* of the management input) under KDDP, but nevertheless the Consultant has made an attempt to assess the *magnitude* of such costs. In case all the contribution by national/local funds could be characterised as “management/ administration”, it means that around USD 3,398,736 in total was used for administration and management, being around 33% of the programme budget. Assuming that only 50% of the local contribution was used for managerial purposes, this gives USD 2,748,379, or 26% of the budget for management/administration. The real figure most likely is somewhere between the two. Even the lowest figure is a relatively high transaction cost by most standards<sup>53</sup>. There is however no internationally accepted “rule of thumb” for how much the transaction costs for international development cooperation should be, especially when the donor is operating his own programme support office for a period of time, and capacity building and TA are prevalent cost items.

For comparison however, most NGOs receiving project support from donors, have administration cost of 7-8%, but this is of course not directly comparable with the situation in KDDP. EU allows 7% of the eligible costs as flat rate to cover indirect costs (no supporting document required) in their international development cooperation projects and EEA Financial Mechanism Office (representing EFTA countries) allows for 7.5%. Typical figures for UN institutions are in the same magnitude. It is for example noted that implementing partners working with Global Environment Facility (GEF) funds receive a 10% fee to manage, administrate and supervise the day-to-day activities of projects<sup>54</sup>.

The Consultant appreciates that during the first phase, and as capacity building of the local administration took place, ICEIDA had to provide TA (through the ICEIDA Kalangala Office) in order to produce tangible results on the ground and keep up a certain implementation momentum from the planning phase. This is not necessarily a wrong approach, and it is always a question of how much TA should be provided as compared to waiting with the bulk of the implementation until ample national capacity had been built with the local implementing agencies. It is therefore concluded that based on the approach chosen, with extensive TA the first years, the cost-effectiveness is satisfactory, although on the high side.

<sup>53</sup> ICEMB in their comments to the Draft Evaluation Report states: “*The analysis of project management costs under KDDP and any comparisons with international best practices should be put into context, otherwise it can be misleading:*”

1. *Contribution in kind by district though monetised in terms of staff salaries should be treated as in-kind contribution and excluded from the analysis of project management costs. First the district would have incurred this cost with or without the support to KDDP. Secondly, the determination of the district contribution did not include other non-wage contributions by government and other development partners.*
2. *The relevant measure is commitment of the district which the in-kind contribution was meant to reflect – i.e. recruitment and deployment of staff for project management and implementation (key staff were recruited and deployed in the community development department, natural resources department and District Planning Unit)”.*

**The Consultant appreciates the comments, but disagrees to the statement of the in-kind contribution to be kept outside the management cost calculations. The main purpose of this exercise is to get *some* idea of the managerial/administrative *input*, or *value*, in the Programme, as this might be a good proxy of the transaction costs.**

<sup>54</sup> In addition the GEF Agencies that administer the funds (like UN organisations) get a fee of 9.5% (for GEF project/program financing up to and including USD 10 million); 9.0% (for GEF project/program financing above USD 10 million); and 4.0% (for GEF Small Grants Programmes).

### 4.3 Risk Management

The *Project Document* contains a section on “Risks and Assumptions”. This merely comprises a list of keywords but no elaboration on what the risks/assumptions really comprise, and no rating of the risk likelihood and impact (small, medium or large), and with no description of mitigating measures. The listing is also repeated in the logframe table. Amongst the key listings are found (some repeated...): Political stability and security; stakeholders’ commitment; absence of natural calamities and war; adequate numbers of qualified and committed staff [which indeed required a lot of capacity building]; political will and stability (local government); favourable market for fish (fishery sector); adequate water quality and quantity; functional BMUs [a risk materialising with large consequences for sustainability]; prudent management of equipment and facilities; existence of a school policy on maintenance (education sector); etc. This listing could as such *not* be characterised as a real “risk assessment”.

The *Mid-term Review Report* contains nothing on risks, and neither do the *Mid-term (5 year) Report*, the *Final Report* nor the *Completion Report*. The *KDDP Assessment of District Capacity to Hand Donor Funds* only mentions risk of corruption. Neither do any of the progress reports (2013-14) contain any risk assessment, although the report deals with implementation challenges in general and what works well and what do not.

### 4.4 Conclusion

Under the prevalent circumstances, the Consultant concludes that the efficiency has been satisfactory, with managerial costs seemingly on the high side. The capacity building in the District under the Programme (training, building of office infrastructure, procurement of material and equipment) has certainly led to reducing the staffing gap in the District (from 48% in 2005 to 79% in 2018), and less staff turnover. It is more attractive to work in Kalangala now than before. However, the efficiency of the district administration post-Programme does not seem to keep up with the requirements for O&M and is thus not efficient enough to maintain the benefits.

ICEIDA has increased the grants to the Programme in several steps through implementation, as needs have been revealed or unforeseen costs have surfaced. Such flexibility and willingness to “go an extra mile” from the donor’s side should really be appreciated by the District, as this is rare in the donor community. ICEIDA has *not* left their Ugandan partners in Kalangala in limbo, but followed them all through implementation, also evidence by the continuation of the Education Component in KIEP. Such long-term support to a sector is also rare by all standards with donors, and in this case it has born fruits. The managerial/transaction costs seem to be on the high side as compared to programmes/project financed by other donors, but then again, KDDP is not a “typical” programme, so direct comparisons is difficult. There has been no proper risk assessment in the programme planning or in the progress reporting.

# CHAPTER 5

## Impact

### 5.1 Field Observations and Household Survey

*Impact* refers to positive or negative, intended or unintended, long-term effects from the interventions. However, there is always a question what is “long-term”. Since the KDDP was completed in 2015 (except for the Education Component) it should be possible to detect any impacts at the time of the Evaluation, in this case effects clearly *beyond the planned outputs and outcomes*, where the latter are the immediate and medium-term *effects* of the outputs. It is however always a question which of the positive impacts were initially planned for and which were not planned for, and indeed whether an effect should be characterised as *outcome* or *impact*. Surely, the question of improved livelihood and socio-economic conditions amongst the beneficiaries is a typical parameter to measure impact, and in this case the basic reason for embarking on the interventions in the first place.

The Consultant has in this case chosen to consider the findings in the HH survey representing mostly impacts, as some time has elapsed since the Programme ended (except for the Education Component still ongoing under KIEP, but presented hereunder nevertheless). *Annex 9* comprises a comprehensive presentation of the results of the HH survey, with comments connected to selected results. The document might be read as a separate stand-alone report, but the text below must surely be read with direct reference to *Annex 9*. Only some of the findings from the HH survey are referred to below, to the degree they relate to possible important programme impacts.

It is reminded that the HH survey was undertaken in 355 households in 34 villages, of which 22 villages where programme interventions had taken place (intervention villages) and 12 nearby villages without any interventions by the Programme (control villages, see explanation in *Section 1.2.2*). The households interviewed were selected by random sampling. Of all the HHs, 65% were male-headed and 35% female-headed. In the Mid-term Review (MTR) in 2010<sup>55</sup> only 21% were female-headed, roughly in the same magnitude as in the baseline survey in the 5 fish landing sites in 2008. The reason for increase in female-headed villages might be that more men have moved out of the villages to seek income-generating work, also connected to the strict control of illegal fishing from March 2017 onwards. The Consultant might also suspect that the high alcohol consumption amongst male fishers in the communities could be a contributing reason, although such question was not part of the HH survey.

66% of the HHs have lived in the villages for more than 10 years, thus have experienced the benefits of KDDP, where implemented. Around 67% had lived outside Kalangala District previously, meaning they had also experience from other villages in Uganda. Interestingly enough, the average number of people in the HHs have increased since the MTR (2.6), with 44% having 5-10 family members. The reason for this could be improved health care and social services, immunization, treatment of diseases, and more stable incomes (improved predictability of local economy in the islands). It is realised that a common tendency is for fishermen to move around in search for better fish catches,

<sup>55</sup> It is reminded that the MTR HH survey asked a lot of detailed questions, but hardly any of these are presented in any survey report or even in analysis, that naturally should have been presented in the MTR Report. The Consultant does not know why this was not done, but it means that several of the parameters covered in the end evaluation HH survey cannot be compared with the situation in 2010, which is really a pity.

## Impact

better prices, better social services and amenities in general. In the event that most of these benefits/services can be accessed predictably in one place, the effect could be that individuals establish more fixed dwellings and assets, and run “stable” families.

The HH survey shows that related to occupation, as much as 34% are students/pupils, and 13% are involved in fisheries, whereas comparable figures from 2010 (MTR) were 6% and 24% respectively. (Almost 34% have “others” occupation, e.g. farming). The reduction in fishers might be attributed to the crackdown on illegal fishing, as well as maybe enforcement against use of child labour. The increase in number of pupils most likely result from better learning environment (heavily supported by ICEIDA) and the fact that a larger ratio of the population are children in school-age, in addition to increased awareness raising to parents on the importance of schooling, and general encouragement by the authorities on increasing level of education. The number of people involved in “Sales & Services” has decreased from 29% in the MTR<sup>56</sup> to 12% now, one reason assumed to be the reduced demand for goods and services following the reduction in the number of fishermen. The main source of income however is from farming (37%, which might coincide with the high figure for “others” in *occupation*) followed by fisheries (27%)<sup>57</sup>.

Below are some comments related directly to the programme components, based on observations, key informant interviews and mostly the HH survey:

#### Education:

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Education: Around 4% of the household members have had no schooling at all and 5% of the school children (6-13 years) are not at all attending school. The population (English) literacy is around 80%<sup>58</sup>. Almost 40% of the school children live less than 1 km from the school, whereas nearly 30% live more than 3 km away or on another island, creating special challenges related to transport and commuting in general. (The pupils in control villages have longer distance to school, and spend more time getting to schools, than pupils in the intervention villages. This is merely by default as the improved schools are located in the latter villages). Nearly 60% of the pupils spend 1-2 hours to reach school, and 54% of the households have children that are attending school (the last 30 days). 88% claim that there are no Functional Adult Literacy (FAL) classes available any more.

Of the children that missed some days in schools the last 30 days, sickness is the main reason (48%), with “lack of scholastic material” being around 36%. This is not properly understood by the Consultant, as most of the schools in the District now have a pupil-textbook ratio close to 1:1, which means that there must be other “materials” lacking (for example: school uniforms, pens and pencils). An interesting observation is that more pupils missed school due to sickness on the main island (Bujumba County) than on the remote islands (Kyamuswa County), with 54% and 42%

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<sup>56</sup> Referred to as «Business» in the MTR, being a similar occupation.

<sup>57</sup> When a comparison is made between the two counties, the results show that the majority of households in Bujumba County rely on farming (52.0%), fishing activities (17.9%), and others (14.5%) for income; and in Kyamuswa County it is fishing activities (36.3%), farming (22.5%) and others (15.9%). Notably, the National Population and Household Census from 2014 shows that in average 22% of the district population was doing “subsistence farming” (25.3% in Bujumba County and 18.8% in Kyamuswa County). However, the figures are not directly comparable, as “farming” in the HH Survey encompasses more than only “subsistence” farming. The figures nevertheless show the same distribution trend between the two counties.

<sup>58</sup> 81% in intervention villages and 77% in control villages, not a significant difference.

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respectively. The reason for this is neither understood by the Consultant. On the other hand, missing school due to other reasons (bad weather, attending funerals, etc.) was, not surprisingly, higher on the remote islands (20%, against 9% in Bujumba County).

A positive development is that none of the girls are home from schools due to their monthly periods, and this goes both for intervention and control villages. The high school dropout rate noted in the district statistics is not directly detected in the HH survey, as only 6% of the HHs report dropout<sup>59</sup>. Only 1 HH report pregnancy as the reason for drop-out, so the problems *might* have been somewhat “exaggerated” by the district administration, or the households are “under-reporting” this problem<sup>60</sup>.

The main result of the survey is however that 60% of the HHs believe that the quality of education is good or average/fair (36% and 25% respectively), with 17% who do not know. Amongst the reasons for believing the quality is good, the following could be noted, with direct relation to the KDDP and KIEP supported by ICEIDA:

- Better performance of pupils in PLE
- Pupils understand what they are taught
- Pupil and teacher absenteeism reduced
- Schools have more qualified teachers
- Construction and renovation of school infrastructure/good classroom environment
- Introduction of boarding sections in most schools [Consultant’s observation: Parents do not have to take children to boarding schools in Masaka District anymore]
- Provision of school necessities like books

The Consultant also noted during the key informant interviews that a positive impact is that money that was spent for boarding schooling earlier could now be used to cover other needs in the households (improved housing, health/medicine, etc.).

## Health:

The impact of the KDDP Health Component, ending in 2010, is difficult to see with the various health centres visited, although it is anticipated that the training of staff has an impact “somewhere in the country”. (The solar panels are mostly in operation although the batteries have been changed). However, the sponsoring of especially the two medical doctors’ education show some positive impact (increased number of Caesarean operations undertaken in Kalangala HC). It is believed, with a large degree of certainty, that ICEIDA’s support has had a positive impact in this case, although it cannot be verified through other statistics (e.g. maternal deaths, see above under “outcomes”).

The HH survey shows that 85% of the population have a distance less than 5 km to get to the nearest health centre. (The MTR considered this distance the maximum in order to be “accessible” to the population). 22% of the HHs have experienced Malaria cases the last 30 days and 5% experienced Diarrhoea. (The health centre staff interviewed had

<sup>59</sup> Only 12 households answered the question on reasons for dropout, and 42% gave the reasons that schools fees/charges were too high. Only 1 family reported pregnancy as the reason.

<sup>60</sup> ICEMB indicates: “It could be the other way around. The households may not be reporting accurately. The apparent cohort survival rates by grade, which is a relatively more reliable quantitative data, indicates that dropout rates were indeed high”.

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the perception that the number of Diarrhoea cases had gone *down*, but there are no comparable data from the MTR to verify this). Around 3% of the inhabitants experienced water/sanitation-related sickness the last 30 days. There is no significant difference between number of cases in intervention and control villages, and neither was this expected. 39.3% of the HHs believe that the health services are good, and 36.3% believes they are fair/average (same percentage in intervention and control villages). Interestingly enough, only 30% of the inhabitants in Bujumba Country believe that health services are good, whereas the portion is 48% in Kyamuswa County (the more remote islands). The reasons for this is not understood by the Consultant, as one would expect that the communities closer to the largest health centres would be more satisfied.

The HH survey also shows that there is less correlation than expected between *distance* from the health centre and the *satisfaction* with the services, with 23% of the inhabitants living less than 1 km from the health centre considering the services as being bad/poor. (On the other hand, as expected, 63% of the inhabitants living on another island and/or more than 6 km from the health centre consider the services to be bad/poor). Amongst the reasons for believing the quality of health services are good, the following could be noted, but largely without any *direct* relation to the KDDP, but may be an indirect correlation could be found:

- Availability of adequate drugs most of the time (minimal irregularities with availability of medicines)
- Health services are readily available
- Services of health workers are satisfactory.
- Well-equipped health centres.

## Fishery:

The HH survey shows that of the 27% of household income coming from fisheries (24% in intervention and 35% in control villages), 80% is coming directly from catching and selling to/buying from traders (83% in intervention and 75% in control villages). This means that the relatively low number of the inhabitants occupied with fishing contribute to a relatively high portion of the community income (see above)<sup>61</sup>. Trading constituted 23% in the MTR whereas only 10% now. Another issue noted from the HH survey is that all 5 fish landing sites report availability of fish drying racks. However, at least in two of the sites those racks were not in use (due to rust, etc.).

Hand wash facilities are reported in all five sites but running water is only found in Kasekulo-Ttubi. Soap for hand washing was reported available in 3 sites, but the Consultant only found soap in Kasekulo-Ttubi and Kisaba. (Protective gear was also observed in Kasekulo-Ttubi, although reported in 3 sites). Smoking kilns are found in all sites but

<sup>61</sup> In the MTR, 33.8% got their income from fisheries and 26.4% from farming, meaning that the two sectors have changed importance related to income during the last 8 years. Income from fishing is thus not so important income source anymore. The reasons for the present situation could be increased catch due to better fishing method, and/or reduced post-harvest losses and/or a result of the enforcement by UPDF. However, as no specific study has been carried out to assess changes in fish catches before and after the enforcement by UPDF it is difficult to conclude. The Consultant also cannot find compelling evidence of significantly increased prices. However, given that much of the catch is marketed as fresh fish, the quality is prone to rapid deterioration. Any effort that facilitates preservation and extension of shelf life therefore implies that the fisherman/fishmonger can keep all his fish on the market in fresh form still fetching the good price of fresh fish as opposed to being compelled to take it to further processing. This ultimately means the buyers have access to high quality fish for which they are willing to pay a good price. ICEMB's comment is also appreciated "At the time of the evaluation, fishing activities had been on standstill and this could account for the responses the household made".

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authorities have banned the use of such kilns<sup>62</sup>. Access to toilet facilities are reported in all sites, but notably the toilets in Kachungwa landing site were closed at the time of the Consultants' visit. 90% of all HHs answer that there are solid waste bins available at the fish landing sites, which coincided with the observations of the Consultant. However, the standard waste bins made of concrete does not have any hatch/opening for easy emptying of garbage, as emptying has to be done manually by climbing into the bin and shuffling garbage out manually. In other words: the access to various facilities reported in the HH survey does not necessarily reflect the reality at any point in time, and does not say anything about the *quality* of the services/facilities.

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 Local government services and social welfare:
 

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Local government services and social welfare: Regarding the capacity of the District Government and the sub-county governments to deliver basic services to the population, the picture is somewhat mixed to judge from the key informant interviews. One impact is that the staff turnover in the district administration obviously has been reduced after new office facilities were built and equipment purchased under the Programme. But has this resulted in improved services to the populations? The HH survey answers show that 64% report improved HH welfare since 2011 (intervention villages-67%, control villages-57%, not being a significant difference), with no difference in the two counties. On the reasons for improved welfare, 77% answered increased income, and only 10% answered improved access to various services in general (same magnitude in both intervention and control villages), the same percentage as *"Improved yields & availability of market for farm produce"*, surely also connected to the increased income level.

Amongst the 36% that do *not* report on improved HH welfare, 40% say that they had become poorer since 2011 (43% in intervention and 35% in control villages), meaning 14% of total number of district population, with lack of income and *"bad governance"* being the main reasons, followed by *"lack of credit"*. (The Consultant is a bit uncertain how people perceive *"bad governance"* in this case, but it is likely they refer to local government performance and services. The distribution of the ones that had become poorer in the countries are: Bujumba-44% and Kyamuswa-35%, which is somewhat contrary to what would be expected. The answers on perceived poverty is somewhat surprising and means that ("relative") poverty in the District has increased the last 7-8 years.

On the other hand, 64% report that they save some of their income (68% in intervention village and 57% in control villages). 13% of these are saving more than 30% of their income<sup>63</sup>, and 72% are saving 10-30% of their income (little difference between intervention and control villages), which is encouraging. At the same time, expenditures of most households have increased since 2011, especially on education (tuition fees, textbooks, uniforms, school operation contribution, etc., where 44% report to spend more than 40% of their expenditures), followed by food and health. The increased expenditures on education might be due to the fact that the education environment has improved and more families are sending their children to school.

Around 52% of the HHs report improved housing structures, with only 3% reporting decreased quality of structures. On the observed standard of housing by the enumerators, it was reported that around 47% of the houses have cement screed floor, whereas the baseline reported between 1-10% only in the 5 fishing villages. This observation

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<sup>62</sup> There is a reluctance to deploy this design of kiln because of the risk of accumulating potentially carcinogenic compounds (polycyclic aromatic hydrocarbons) from the smoke into the fish, rendering it unsafe for human consumption. Although seemingly a "safer" type of kiln has been developed.

<sup>63</sup> Although the MTR HH survey asked questions about saving, the answers were unfortunately never reported upon.

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could serve as a good proxy for improved housing/living standards, and coincides well with the HH answers<sup>64</sup>. A majority of the HHs report unchanged status on livestock, and also unchanged status on assets within agriculture and fishing.

It is interesting to note that 96% of the households interviewed have at least one mobile phone, with around 45% having 2 phones (no difference between intervention and control villages). The baseline survey in 2008 indicated that around 45-55% had mobile phones (with only 25% of the women in Namisoke, being the lowest). As with all poor communities in the developing world, the mobile phone has really made a difference in ordinary people's life.

On the questions related to development efforts in the villages since 2011, KDDP/ICEIDA is specifically mentioned as supporter to education, but indeed second to the District Government. The reason could be that ICEIDA is not mentioned once in the signboards placed on the new school buildings, where the District in fact is mentioned as "funder". Also related to development efforts in sanitation/hygiene, fisheries/trade and health, the District is perceived to be much more important than KDDP/ICEIDA, not so surprising related to health (ending in 2010). On the other hand, all HHs say that the communities had been benefitting from the development interventions.

In relation to the perception of improvements in provision of public services since 2011, 54% say "yes" related to education (intervention villages - 58%, control villages - 45%), 37% to water (intervention villages - 46%, control villages - 19%, being significant), 29% to fisheries, 27% to sanitation and as much as 50% in relation to health (the 3 last with no difference between intervention and control villages). The improvements in education could most likely be attributed to the ICEIDA support, but the improvement in health is due to other support than from KDDP, for example through the last years' comprehensive support to many health centres under the *Kalangala Comprehensive Health Services Project* (KCHSP). Amongst the reasons for improved services related to education the Consultant largely found the same statements as for education listed above. There is no significant difference between the two counties related to the perception of household changes in education, fishery/trade, health and sanitation, but a significant difference in water ("yes" in Bujumba County - 49%, Kyamuswa County - 26%).

#### Water and Sanitation:

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Some questions in the HH survey related to WATSAN facilities, whereas nothing was reported from the MTR HH survey in comparison. Around 74% of the population report to have water supply from a safe source ("piped water"<sup>65</sup>, borehole, protected spring or well, etc.), with 83% in the intervention villages and only 55% in the control villages<sup>66</sup>. Only 16% in the intervention villages use the lake as main water sources, whereas 44% in the control villages, which surely is a result of the KDDP efforts.

Around 80% consider the water quality as being good (63%) or average, coinciding well with the perception of "safe source". This could most likely be attributed to the District/ICEIDA support in the intervention villages. Most house-

<sup>64</sup> It is noted that the 2014 Census states that 20% of the households have "permanent" floor structure, which might indicate a trend of increased welfare the last 4 years.

<sup>65</sup> «Piped water» does not necessarily guarantee that the source itself is safe, as it just refers to the method of transporting the water from the source to the consumer.....

<sup>66</sup> In comparison, the 2014 Census shows that in the whole district around 47% used a "protected" source for drinking (piped water, borehole, protected well/spring, gravity flow and bottled water). It is however noted that already at the time of the Census, all landing site villages under KDDP had got improved water supply, so indisputably KDDP has made a difference in the intervention villages.

## Impact

holds, not surprisingly, have the lake as their second water supply source, and around 77% say they use secondary sources due to “unavailability” or “unreliability” of protected sources. On the other hand, the baseline survey in 2008 indicated that in 4 of the fish landing sites around 93% had “reliable water supply” (Kachungwa, Kasekulo, Kisaba, and Namisoke), one having 50% (Kyagalanyi). This in fact means that the perception of what was “good water supply” in four villages was higher during the baseline period than 10 years later! This is not fully understood by the Consultant, but it might be due to the perception of what is “good” or not changing with time and the *operational status* of the present facilities, regardless of what *kind* of facilities.

90% of the respondents spend less than 30 minutes collecting water from their main source (80% from the secondary source), which is a fully acceptable result by all standards. Almost 60% of the HHs are consuming 50-100 litres of water per day (but the amount depends on the number of family members), and 98% boil the water (as treatment). This high number is a very encouraging result and might be attributed to effective awareness raising amongst the population as to the importance of treating water for human consumption. 80% of the respondents have perennial water supply, with no difference between the two counties. 48% are paying for water from their primary source, with 54% in the intervention villages and 35% in the control villages. Ideally then, higher payment in the intervention villages should result in improved services/O&M (quantity, quality, availability) and improved state of repair of the infrastructure.

Hereunder, the survey also confirms that 20% *more* HHs in the control villages are saying that protected sources are *not* available, than in the intervention villages. Nearly 60% of the households say that water is affordable/low, but surprisingly only 21% answer that the payment for water should be used for improved O&M, much fewer in the intervention villages answering this (16%!), with 57% in the intervention villages saying that “government rules” is the reason for them paying (38% only in control villages). This is indeed surprising, and shows that in this respect the awareness raising in the intervention villages might have failed to get the main message through to some degree. 64% believed that the water supply system is well maintained (with 72% in the intervention villages and 47% in the control villages, being encouraging. But the answer from the intervention villages is not properly understood when compared to the *reasons* for people having to pay for the water, but might have to do with inadequate sensitisation in the intervention communities).

In average 48% say they were using private latrines (mostly simple pit latrine), with 52% in intervention villages and 40% in control villages<sup>67</sup>. However, slightly more do *not at all* use a latrine in the intervention villages than in the control villages. As much as 68% of the latrines do not have water and soap available (50% in the public latrines), but almost 80% believe that public latrines are clean/satisfactory. This is also the impression of the Consultant from having inspected the latrines during the fieldwork.

64% of the HHs confirm that there has been sensitisation meetings on hygiene and sanitation held, with 49% in Bujumba County and 78% in Kyamuswa County, which could mean that the health workers on the outer islands have been more active on awareness raising. 70% of the inhabitants claim to have acquired increased knowledge from such sensitisation meetings, with 61% in Bujumba County and 78% in Kyamuswa County. It is a bit surprising that the

<sup>67</sup> The 2014 Census shows that only 27% of the households in the District had «improved toilet» (flush toilet, VIP Latrine, covered pit latrine with a slab, compost toilet, not shared with others). The high coverage in the intervention villages is a strong indication that the awareness raising on improving hygiene practices has given results.

inhabitants on the outer islands perceive to have acquired more knowledge than the ones living closer to the district HQs.

## 5.2 Conclusion

Impact in this case represents the longer terms effects *beyond* the outputs and outcomes, based on observations in the field and analysis from the HH survey, covering 34 villages (355 randomly sampled HHs), of which 22 had received direct interventions of KDDP support. The female-headed HHs has increased since the MTR HH survey in 2010 (from 21% to 35%), amongst others indicating migration of male workers to outside Kalangala. There are also more students/pupils now than during the MTR in 2010 (34% against 6%), reflecting the increased school enrolment most likely due to improved learning environment created under KDDP and KIEP. The main *occupation* is still farming, followed by fisheries. However, a relatively larger proportion of the community *income* is coming from fisheries today than some years back.

The majority of pupils missing schools report sickness and lack of scholastic material as the causes, which is not properly understood by the Consultant (as pupil-textbook ratio being close to 1:1). Girls are now attending schools during their monthly period. 60% of the HHs believe the quality of education is good/fair, thanks to several of the interventions under KDDP and KIEP. On the other hand, any impact from the KDDP Health Component interventions up to 2010 cannot be detected, apart from the increase in Caesarean operations today undertaken in Kalangala HC, with doctors educated partly by ICEIDA funding.

Based on the HH survey results, the field visits to the communities and the interviews with programme partners and stakeholders, the Consultant concludes that the Programme has had a positive impact on the livelihood of people in general. 64% of the HHs report improved welfare since 2011, the majority due to increased income, and 13% manage to save more than 30% of their income. Of the 36% *not* experiencing improved welfare, 14% of the district population report lack of income and “*bad governance*”. Only 3% report decreased standard of housing structures, 96% of the HHs have a mobile phone, an improvement from 45-55% in the baseline survey, with 45% now having 2 mobile phones. It is however impossible assessing to what degree KDDP has directly contributed to this increased welfare. A rather low percentage have recognised ICEIDA as funder of the improved education environment, as now signboard reveal the real funder.

80% of the HHs consider water supply to be good/average, whereas the baseline survey in the 5 fish landing sites alone showed that 93% had “reliable water supply”. It is a bit surprising that relatively few inhabitants in the intervention villages recognise that they pay for water because of required O&M of the systems. On the consequences of failing to maintain proper hygiene practices, 96% answer that people would fall sick, which is a positive feedback reflecting *some* basic understanding of the hygiene issues. Visual observations (see photos) revealed that the WATSAN facilities in the fish landing sites, and partly the buildings constructed, show clear signs of deterioration and in a couple of locations are not at all properly maintained (see sustainability below).

The discontinuation of the BMU, a happening totally outside the control of the Programme, surely had a very negative impact on the operations of the landing sites, with the present *Fishery Landing Site Committees* having no formal mandate to execute any services and getting no money to do anything.

# CHAPTER 6

## Sustainability

### 6.1 Various Sustainability Aspects

Sustainability is the ability for the District and the local communities to continue the benefits from the outputs and outcomes *after* the programme support has ended. As the Programme ended in 2015, it is in this case possible to verify if at least some of the interventions were sustainable. For most programmes where the end evaluation is undertaken right at the completion of the interventions, one must often make *assumptions* of the sustainability.

In principle, there are several issues related to sustainability that should be considered, the most important being: institutional, financial and environmental. The last one is not so relevant here as the Ugandan army now is controlling the beaches and is cracking down on illegal fishing, meaning controlling the possible over-exploitation of the fishery resources in the Lake, having nothing to do with the Programme as such. The ban on building living houses closer than 100-200 m from the lake at the fish landing sites to maintain a green zone seem to be respected so far, at least to judge from the observations during the field visits. Time will however show whether such ban is sustainable in the long run.

With the improved infrastructure at district level, and the capacity building at large, the institutional sustainability has improved. It is reported that the staff turnover has been reduced, as it is much more attractive to work in a spacious “modern” office building. Also at sub-county level the available office space forms a good basis for the staff to perform better, and the office environment is much more welcoming for community members visiting. (It is said to be an “open house policy” prevailing, and in one sub-county, the Consultant found all doors open but with no officers present...<sup>68</sup>). It is understood that all the furniture purchased under the Programme is still in use, although most of the desktop PCs are not in use anymore in the district HQs, as their lifetime has certainly ended. Most of the motor vehicles are still in use, as are the fiberglass boats and engines, although the wooden boats are all written off. It is also assumed that the training and awareness raising of the District and sub-county staff has at least to some extent led to better understanding of the communities’ needs and thus resulting in improved service level.

The stumbling block for achieving good sustainability is however the financial factors. Like any poor developing country district, Kalangala is also struggling with lack of income from revenue and national government grants to ensure the required O&M of the infrastructure facilities built. (Reference is made to the photos in *Annex 10* as illustration to the following text). This especially was observed in the water supply system on the fish landing sites and partly on the sanitation facilities, with one exception - the Kasekulo-Ttubi site which was run smoothly and maintained properly (even with wet paint on the concrete pedestrian path marked at the time of the evaluation visit). It is believed that all the water supply systems were in good order and well operating at the time of handing over the systems to the BMUs. Design of the systems were carried out by a consultant and various contractors built

<sup>68</sup> The fact that few local government staff were present in their offices at the time of the Evaluation *could* however be a worrying sign. Where the staff “around” in the communities to interact with people locally or where they temporarily away in Kalangala town or in their home areas where life is more pleasant to live.....?

the systems with the Senior Water Engineer in the District as construction supervisor, visiting the sites frequently during construction.

In Kisaba landing site the floating barges are broken (holes in bottom) and there are no funds to repair them. Also the needed rehabilitation of 2 latrines (broken walls) is unaffordable to the community, although the water supply is maintained well so far (gravity system with relatively low O&M costs), and metal pipes have been replaced with plastic ones. In Kyagalanyi landing site the bats destroying the fish-stand ceiling have (almost) been removed, but the broken staircase to the water has to be reconstructed, and new batteries to the solar system have to be purchased. Although the latrines at the site are clean (hardly in use), there is no handwashing facilities any more.

In Namisoke and Kachungwa lading sites, the water supply systems are barely working, in the latter not giving enough water even with two pumps running all the time. There is no chlorine for disinfection and has not been for several months (maybe years?), and the present (and fairly new) pump operator in Namisoke has not received any training on the system operations<sup>69</sup>. She only switches on the pumps twice per week<sup>70</sup>. There has been no maintenance on the pumps since the BMUs disappeared in 2015, but until that day the pumps were seemingly serviced regularly as required. The Grundfos submersible pumps used for lake water intake should ideally be taken up and serviced every 6 months<sup>71</sup>. The Consultant fears that some of the pumps in these two locations are running on “borrowed time” and might stop working in the foreseeable future. There is no cleaning undertaken of the houses in which the switches and valves are placed, and the solar panels were also in need of cleaning at the time of the Evaluation (dust and bird droppings). As with the other sites, the floating markers to locate the submersible pumps have gone missing, which makes retrieving the pumps for servicing more difficult and might lead to conflicts with fishing gears getting stuck in the intake structure<sup>72</sup>.

Most of the latrines visited at the fish landing sites and adjacent villages during the Evaluation were clean, with the exception of the public latrine in Namisoke (which was very smelly) and the public latrine in Kasekulo-Ttubi community (!). Except for Kasekulo-Ttubi, none of the fish landing sites had running water for hand washing in the toilets, and neither had the village latrines. It was observed that the “urban” type of flushing toilet with elevated water tank does not seem to work in a rural setting. Also in the schools the latrines were fairly clean, and in most places it was the pupils that cleaned the toilets on a rotating basis. None of the schools had soap available for hand washing. Some latrine structures proved to have crumbling concrete and rotten wooden doors.

The environment surrounding the water taps in schools in general need more attention. By simple means the area of the water tap could be made more user-friendly, e.g. by putting stones or bricks on the ground to stand on while filling cans, to make proper drainage channels leading the spill-water away from the tap points, and finally simply to remove litter and debris from the area giving it a more attractive appearance. The awareness raising amongst the pupils and the teachers on such operational procedures must be intensified.

<sup>69</sup> The previous WATSAN Committee in the village got training during construction, but they were accused of mismanaging the collected water fees and a completely new committee was selected, not being given any training at all.

<sup>70</sup> In fact the operator said that she is starting the pumps every day, but the villagers claimed that they only got water two days per week.

<sup>71</sup> Information by the Senior Water Engineer in the District.

<sup>72</sup> The Consultant was informed by the Sen. Water Engineer in the District that the GoU is now considering taking the responsibility of O&M from the communities and contracting it out to private companies that service and maintain the system regularly. The Consultant has not been able to verify this information and has doubts as to whether the authorities can afford such a solution, especially for the most remote areas.

The handle was broken on almost all the brass water taps in the schools, obviously being a weak point in the material. These taps should be removed and new ones put in place. The Consultant recommends a simpler (but more expensive) tap with a metal handle having on/off on a 90 degree swing (see photos). This kind of taps are in use in for example the one private school visited (Lake Victoria Learning Centre) and in the new system being constructed in Bubeke PS.

The solar energy systems installed in health centres, schools and sub-country offices might be an appropriate solution in case it is operated and maintained properly. The weak part is the batteries where such are installed, as these normally have to be renewed every 6-7 years (good industrial batteries might last longer), as the capacity is significantly reduced at that time. However, in KDDP many batteries lost capacity long before that time, e.g. after 2 years, which might indicate that the batteries were of inferior/counterfeit quality. Surely, when such batteries are installed, the user must make sure to set aside money to renew the batteries when time comes, and several of the beneficiaries have obviously been able to get funds for such renewal. Some have however not been able to raise money for such purchases. The Consultant's reflection is that a donor could support installation of smaller solar power systems in special institutions, where selected staff are trained to maintain the systems and where the institution is really depending on such system for giving the required service to the public. Typical institutions could be health centres where medicine has to be cooled and where night light is absolutely required. However, in places where a community takes joint responsibility of O&M and where there is staff turnover (typically landing sites), such systems should be avoided and more simple solution considered (e.g. handpumps for water supply).

At present, the District seemingly have no funds (for fuel, DSA, etc.) for sending any of the district officers on inspection visits to the fish landing sites and communities. Also to judge from the interviews with the district staff, very few such visits are arranged in a year, if any at all. However, "*they all travel together*" once there is a transport available, preferably paid by a "*project*", but this is more like haphazardly taking place and is not part of regular inspection procedures. For the hard-to-reach areas (where Namisoke and Kachungwa are two) this means that deterioration will gradually continue until things reach a state of "beyond repair", and some of the infrastructure might end up as so-called "white elephants".

## 6.2 Conclusion

Environmental sustainability seem to be secured, both regarding maintaining a green zone by the lake shore in the fish landing sites and regarding stopping the over-exploitation of the fish resources due to the guarding by the Ugandan army. The institutional sustainability has seemingly improved, with reduced staff turnover in the District and the sub-county governments. The difficult part is, as in most developing countries, the financial sustainability. With low tax income and limited support from the national government, the district government cannot afford to keep up proper O&M of the infrastructure and facilities built under KDDP, especially in the fish landing sites.

Kasekulo-Ttubi fish landing site is running fairly smoothly, but the others show clear sign of deterioration, especially of the water supply systems, where pumps are not serviced and are run at their maximum capacity; there are no chemicals for disinfection; and the systems are in some cases not operated 24/7 as intended. There is no follow-up of the systems from the district water experts. Although most latrines appeared clean, some have damaged concrete and wooden doors. The environment around the water taps, especially in schools, should be cleaned my simple

means, and the broken brass taps exchanged to simpler make. All batteries supplied with the solar energy systems (in health centres, sub-county offices and schools alike) were worn out and some replaced, but the initial solar panels were still operating.

# CHAPTER 7

## Conclusions and Recommendations

### 7.1 Overall Conclusions

The KDDP was relevant when it was planned and designed, and still remained so at the time of the Evaluation. The Programme was designed with components fully in accordance with the national policies and strategies, namely *Uganda Poverty Eradication Action Plan (PEAP)*, the *Millennium Development Goals (MDGs)*, the *National Development Plan (NDP)* and the national decentralisation policy. The Consultant also concludes that KDDP has been fully in line with Iceland's development cooperation visions, policy and strategy from the beginning in 2005 and still is at the time of the Evaluation, with the continuation of the Education Component under KIEP still being relevant. KDDP was also in accordance with Iceland's international commitments (e.g. the *Paris Agreement*, the *Accra Accord* and *Busan Partnership Agreement*).

The programme logframe formulations are largely relevant, but with some shortcomings. The reference in the objective of the Local Government Administration Component to the "*private agencies*" is not understood, as no activities were directed towards the private sector. The logframe is in general very much output-focused, and the outcome indicators are formulated in general terms with no target values listed. Thus, these are almost useless for measuring success and effects. The purpose of the Tourism Component (2011-2013) proved to be unrealistically formulated.

The effectiveness of the Programme has largely been satisfactory, with some shortcomings. The programme management set-up seems to have been effective, considering the prevailing circumstances. ICEIDA however took on a rather pro-active role during Phase I, having an ICEIDA KDDP Programme Office in Kalangala until 2010, virtually controlling the programme implementation. From 2011, it was left with the district administration to be fully in charge, leaving ICEIDA more to a donor role with TA support only. In Phase I proper progress reports were produced by the ICEIDA KDDP Programme Office, and the District continued to produce such reports in Phase II. The M&E Plan prepared was never followed by the district administration.

The *outputs*, especially during Phase II, have been delivered to a satisfactory degree. It is noted that all capacity building (training, procurement of equipment and building of infrastructure) was achieved as planned, and much of the equipment is still in use at the time of the Evaluation (except e.g. desktop PCs). The *outcomes* are not properly formulated and the indicators have no target values. The revenue from the fisheries have increased and the post-harvest loss has been reduced. The WATSAN infrastructure built has made life easier for the population, but the lack of O&M is evident. The Education Component continued after 2015 in a consolidation phase, KIEP, and the outcomes here are promising (increased pupil enrolment and PLE results in the District being above national average). Few outcomes from the Health Component can be seen today (activities stopped in 2010). The Tourism Component was based on unrealistic assumptions from the very start. No funding have been available to implement any tourism strategy, as this will depend entirely on private sector involvement.

Programme efficiency has been satisfactory. The use of funds for capacity building in the district administration has reduced the staff turnover and filled staffing gaps. ICEIDA has been flexible as to gradual increase in the programme

budget as needs arose during implementation, a modality being rare amongst donors. Management/administration costs in the Programme seem to be on the high side.

The HH survey covered 34 villages (355 randomly sampled HHs), of which 22 where KDDP interventions had been implemented. There are relatively more students/pupils amongst the population now than in 2010, most likely reflecting a positive effect from the improved learning environment under KDDP and KIEP. Although the number of fishermen has reduced, the relative community income from fisheries have increased.

60% of the HHs believe quality of education is good/fair, thanks to several of the measures under KDDP and KIEP, with girls attending schools during their monthly period. An increased number of Caesarean operations are undertaken in Kalangala HC, a positive impact from the funding of doctor education under KDPP.

In general, the Consultant concludes that the Programme has had a positive impact on the livelihood of people in general, with 64% of the HHs reported improved welfare since 2011. Only 3% reported decreased standard of housing structures, and as much as 96% of the HHs has at least one mobile phone. A rather low percentage have recognised ICEIDA as funder of the improve education environment, as this is not displayed anywhere. 80% of the HHs considered water supply to be good/average. People have not properly realised that they have to pay for water because of O&M needs. Negative impact has been experienced following the disbandment of the BMUs in 2015 (by the President), which might have contributed to the deteriorating situation on the fish landing sites infrastructure.

Institutional sustainability in the District and sub-counties has improved with the capacity building and construction of office facilities, and staff turnover in the local governments have seemingly been reduced due to this. Financial sustainability is weak, as the District has insufficient revenue income, and grants from the National Government, to properly operate and maintain the equipment and facilities developed under KDDP. Especially, the infrastructure on the islands suffers from this lack of O&M, as the district staff have no funds for undertaking inspection visits to the hard-to-reach communities. The communities themselves lack training and/or funds to properly maintain the infrastructure. Especially the water supply systems in Namisoke and Kachungwa are in a bad state of condition, due to lack of O&M, with no service on the pumps since 2015. Chlorine for disinfection is not used any more. A positive exception is Kasekulo fish landing site, which is operating well. Most brass water taps, also in the schools, were broken and need replacement. The environment around the school water posts needs to be improved with proper drainage and cleaning. Batteries for the solar energy systems need replacement after some years, requiring funds, but some users (read: health centres) in fact have been able to buy new ones with own funds.

## 7.2 Lessons Learned

Some few general lessons learned could be listed from the experience gained with KDDP:

1. Almost needless to repeat: Flexibility from the donor side as to increasing the financial support when needs (always) arise during implementation will most likely give the best results in the long run, and is of course appreciated by the beneficiary stakeholders. This should however not relieve the recipients from undertaking proper planning and budgeting of the interventions. Such funding modality is of course only possible when the donor has adequate funds to fill gaps that might materialise underway.
2. Interventions having a long-term perspective and being supported over a longer period by donors have a larger chance of bringing impact and being sustainable, and thus simply making a difference. The Education Component under KDDP is a good example of such support, where ICEIDA with KDDP and KIEP will support primary education in Kalangala District for 13 years, a positive and rare case amongst donors in general.
3. Changing of old socio-cultural habits and procedures takes time and awareness raising related to such aspects must always be an integral part of capacity building, also in connection with improved infrastructure and procurement of equipment. The non-use of new fish drying racks in certain locations is a typical example.
4. It is imperative to develop systems using appropriate technology, especially in remote places, as this makes it easier for communities to operate and cheaper to maintain. Sophisticated infrastructure, e.g. solar-powered water pumping with submersible pumps and chlorination needs skilled staff to be properly operated, a continued supply of chlorine (if such is needed), and money to buy such; so in some cases maybe simpler solutions should be considered, although not being so “modern”.
5. Design and construction of infrastructure (buildings, WATSAN systems, etc.) need close supervision and monitoring in order to secure proper quality. Technical specifications must be quality assured, in order to, to the extent possible, avoiding purchase of inferior material (counterfeit solar batteries, fish drying racks that rust, etc.).
6. It is important that proper training in O&M of infrastructure and equipment is an integral part of the development efforts. This should go beyond the compulsory on-the job training by suppliers. Especially so when the communities should remain with responsibility of the O&M post-project, as community ownership to the structures is imperative. Community participation in the implementation process might be better than leaving all implementation to contractors, with e.g. contribution to provision of local building materials and free labour, as this gives better ownership than just receiving a “gift”. Training too few operators of for example WATSAN structures, makes the O&M very vulnerable, especially when such trained people disappear/move.
7. The brass taps commonly used in water supply stand posts are vulnerable to frequent use with the handle prone to break. The one-handle on-off tap have proven more sturdy.
8. The flushing toilets with “urban-type” high level cistern is not so suitable in rural areas. More simple solutions with water buckets for manual flushing is preferred.
9. In case of inferior programme logframe, it is difficult to measure the outcomes/effects and long-term impact of the interventions. Formulation of realistic SMART indicators is imperative in this respect, and establishing a proper logframe is normally done by experience staff, used to the modality and terminologies.

## 7.3 Recommendations

### 7.3.1 Recommendations to ICEIDA

1. The donor should in general carefully assess the probable future capacity and capability of the recipient beneficiaries (being local communities and local governments alike) to operate and maintain hardware facilities (e.g. buildings, water supply systems, solar power systems, etc.). The experience from Kalangala shows that during programme planning, there were obviously unrealistic expectations (or over-selling?) in the District as to the future ability to undertake proper O&M of the assets. The more hardware assets given, the more funds are needed for O&M.
2. The donor should encourage appropriate technology solutions to be introduced, especially in remote communities where capacity and capability for proper O&M is lacking. This includes remote fishing communities where, based on experience, trained operators easily move away and inhabitants in general come and go. In such places there might be less joint community ownership and responsibility to maintain the assets. Solar pumping systems should only be installed for special purposes in smaller locations (e.g. health centres, where for example cooling of medicine is imperative), where permanent dedicated employees take responsibility for operation. In larger communities in remote places the donor should consider simpler solutions, for example handpumps for water supply, even if the local recipients request more “modern” technology<sup>73</sup>. Systems that require steady supply of chemicals (e.g. for chlorination of water), should be avoided.
3. Proper logframes for new projects and programmes must be formulated as part of the design, as this will ease the M&E later on. This should not be done as “left hand work” by someone who only knows the theory, but rather formulations should be led by experts that have long-term experience from such work. The formulation of realistic useful SMART indicators that can be used for monitoring and reporting purposes, requires state-of-the-art knowledge!
4. The donor should seriously consider introducing more community contribution in infrastructure development efforts, for example in form of free self-help work (carrying building material, trench digging, etc.). Experience from all around the world show that such contributions will increase the local ownership of the structures and give a higher probability of sustainable O&M afterwards.

<sup>73</sup> ICEMB’s comments to the Draft Evaluation Report: “*The Uganda Vision 2040 aims to increase percentage of the population with access to safe piped water from 15% (2010) to 100% (2040). To that effect, Government issued a circular to all districts (Letter Ref. No. ADM/107/01, dated 14<sup>th</sup> March 2016- by Permanent Secretary of Ministry of Water and Environment to all Chief Administrative Officers) which guided that with effect from the financial year 2016/2017 the priority for Water Development would be as follows : First, extension of National Water and Sewerage Water System; Second, Construction of solar mini piped water systems. Construction of point water sources should be developed in areas where it is not possible to develop the 1<sup>st</sup> and 2<sup>nd</sup> option*”. **The Consultant appreciates this policy, and considers the remote fish landing site villages falling in the last category.**

### 7.3.2 Recommendations to Kalangala District

1. The district must set aside funds for major service of the water supply structures in the fish landing sites. This especially concerns the Grundfos submersible pumps, that have not been serviced since 2015. Service must be undertaken by qualified personnel from the supplier, and the floating markers in the Lake must be re-installed.
2. A simple M&E system should be instigated locally in development interventions, and not a sophisticated one based on theoretical textbook set-up. It is much better to monitor a few parameters which are really needed and possible to follow up, than trying to include as many aspects as possible, where none are properly fulfilled.
3. Such M&E system must include procedures for regular inspection visits from the district HQs staff to the fish landing sites and adjacent communities, to ensure proper O&M of the infrastructure. This especially goes for the water supply and sanitation systems that was built under KDDP, but also for buildings. Such inspections should include refresher courses for operational staff in O&M, and feedback to suppliers when more sophisticated repairs are required.
4. Most brass taps must be removed, and the one-handle on-off type with metal handle should be installed instead.
5. The District and local government administrations must continue raising awareness in the communities on the importance of people paying for the water, in order to upkeep proper O&M. Sensitisation must also continue on aspects related to personal hygiene, for example the importance of washing hands after toilet visits.
6. The District and local government administrations must raise awareness in all the schools on the importance of having a clean environment around the water supply points. This can be done by simple means and it should be the Health Clubs in the schools that take responsible for such measures, once trained.
7. The information and filing system in the District must be improved. It seems that some statistics and reports are very difficult to retrieve sometime after programme completion. (One example in Kalangala are the reports connected to the small grants for the CSOs under KDDP, which simply could not be found anywhere).

# **Annex 1: Terms of Reference, evaluation time schedule and fieldwork itinerary**

## **Terms of Reference**

### **External Evaluation of District Development Cooperation Programmes in Mangochi District in Malawi and Kalangala District in Uganda**

#### **1. Introduction**

Malawi and Uganda have been bilateral partner countries in Icelandic development cooperation since, 1989 and 2001 respectively. In 2006 Iceland started district development cooperation with Kalangala district in Uganda based on previous development project cooperation. This was the start of a district approach, focusing on support through district governments to improve livelihoods and provide basic services, which was later adopted more widely by the Icelandic International Development Agency (ICEIDA, which has now merged with MFA Iceland). In 2012 a formal district cooperation programme was started in Mangochi District in Malawi, building on previous development cooperation projects, which had been implemented in the district.

In both cases, the chosen approach has placed MFA-ICEIDA as a key external partner to the district authorities and as the single largest financier of investments in social infrastructure, such as water and sanitation (both countries), education (both countries), maternal and child health (Mangochi). In Kalangala, MFA-ICEIDA has been a key financier of economic infrastructure for fisheries. In both countries/districts financing for capacity building and administrative strengthening has been provided. The two districts are very different in many aspects. Mangochi district has a population of more than one million people, while Kalangala has a population of less than one hundred thousand. While in Mangochi fisheries is a sizeable activity, and the reason Iceland started support there, agriculture is the dominant economic activity, whereas in Kalangala it is fisheries. The population in Kalangala is highly transient, while in Mangochi it is stationary and engaged in cultivation. Nevertheless, both districts face similar challenges in social infrastructure: insufficient access to clean water, insufficient provision of quality education, insufficient public health access.

The main purpose of the evaluation is to provide an external, independent and objective assessment of the two cooperation programmes, to strengthen mutual accountability for development results and provide lessons learned for stakeholders for future planning and decision-making.

Thus, the team of evaluators, henceforth referred to as the Consultant, have a twofold task within this assignment. The first and main task is to conduct an evaluation of the two distinct development programmes in Mangochi and Kalangala Districts with a focus on results achieved, potential impact and sustainability. The second task is to assess the effectiveness of the district level approach with reference to the two programmes, including benefits, challenges and risks, and provide recommendations as may be applicable with reference to district cooperation and strategic partnerships in the respective countries. MFA Iceland is now seeking a team of consultants (the Consultant) with at least 10 years of experience in evaluations in international development, including vast experience in evaluating projects in Southern and East Africa, knowledge and experience of working in Malawi and/or Uganda is required.

## **2. The programmes to be evaluated**

Two district level development programmes under Icelandic bi-lateral cooperation are the subjects of this evaluation.

1. Malawi – Mangochi Basic Services Programme 2012-2016 (extended to 2017) New phase has recently started.
2. Uganda – Support to Kalangala District Development Programme 2006-2015 (extended to 2017)

### **2.1. Malawi - Mangochi Basic Services Programme: Programme Support by ICEIDA to the Mangochi District Council for the Improvement of Basic Services in Mangochi District 2012-2016.**

Project Number:	MAL16050-1201
Implementation period:	2012-2017
Partners:	Mangochi District Council and Ministry of Local Government and Rural Development
Implementing Agent:	Mangochi District Council
Sector DAC:	Multisector aid for basic social services – 16050
Estimated funding:	15 million USD

A Country Strategy Plan (CSP) 2012-2016 (extended to 2018) for cooperation between Iceland and Malawi was approved by the Ministry for Foreign Affairs in Iceland and Government of Malawi. The CSP is aligned with the Malawi Growth and Development Strategy 2011-2016 (MGDS II) of the Government of Malawi. Prior to MBSP, ICEIDA had been collaborating on various development projects in the Monkey Bay area of Mangochi district.

The Mangochi Basic Services Programme was subject to a tripartite partnership agreement on funding, management, implementation and monitoring, between the Ministry of Local Government and Rural Development (MoLGRD) and Mangochi District Council on behalf of the Government of Malawi (GoM) and ICEIDA on behalf of the Government of Iceland.

Under MBSP, ICEIDA provided programme based assistance to the District Council of Mangochi to achieve the goals of its development strategy in areas of social services, which included, water and sanitation, education and public health. The Programme has included capacity building at district level which was incorporated into all relevant areas of support.

The overall objective of the MBSP 2012-2016 was to assist the Malawian Government and the Mangochi District Council to improve living standards in the rural communities in Mangochi District. This was expected to result in a more resilient population in adversity and a more resourceful one for self-sufficiency. The programme consisted of these four main components:

1. In **water and sanitation** the main objectives were to increase access of the population to potable water and improving hygiene practices with the use of adequate sanitation facilities to reduce waterborne diseases and to promote better health and well-being. The immediate objective of the water and sanitation programme was: Increased and sustainable access to and use of improved safe water sources and improved sanitation practices in TA Chimwala.

2. In **public health** the main goal was to reduce maternal and neonatal mortality through increased availability, access and utilization of improved maternal and neonatal health care services. The immediate objective of the Public Health Programme was: Increased availability, access and utilisation of high impact, quality maternal and child health services in Mangochi.
3. In **education** the programme objective was to provide more equitable access to education, to improve the quality of education facilities and to increase the pass rate in primary schools by means of improving school facilities and training of staff. The immediate objective of the Education Programme is: Improve quality of education in target schools to reduce drop-out and repetition and promote effective learning.
4. **Capacity building** to strengthen the ability of Mangochi District Council to deliver quality services and ensure successful implementation of the MBSP.

Throughout the MBSP, two cross cutting issues, gender and environment, were to be systematically considered and indicators developed to measure progress towards gender equality.

For monitoring and reporting purposes the MBSP has followed the District monitoring and reporting system. Furthermore a specific M&E plan was developed for the programme and extensive monitoring data are available for the programmes, which shall be incorporated in the evaluation.

In 2016, the current programme was extended for a period of one year, and in 2017 a new programme was designed and approved, which will be implemented from late 2017.

A mid-term review was conducted of MBSP in 2014.

Key documents:

- Malawi Country Strategy Paper 2012-2016 – ICEIDA
- Partnership Agreement 2012-2016
- Mangochi Basic Services Programme Master Programme Document 2012-2016
- Mangochi ICEIDA Partnership in Water and Sanitation 2012-2016 Part I
- Mangochi ICEIDA Partnership in Public Health 2012-2016 Part-II
- Mangochi ICEIDA Partnership in Education 2012-2016 Part-III
- Mangochi Basic Services Programme – Mid-term Evaluation – Final Report 2014

## 2.2. Uganda - Support to the Implementation of Kalangala District Development Programme (KDDP) 2006-2015

Project Number:	UGA43040-0602
Implementation period:	2006-2015
Partners:	Ministry of Local Government and Kalangala District Local Government
Implementing Agency:	Local government Kalangala with ICEIDA support
Sector – DAC:	Multisector aid for basic social services – 16050
MFA-ICEIDA funding:	9.1 million USD

The project was initiated on the request of Kalangala District Local Government, through the Ministry of Local Government, to address deficiencies in service delivery in the district. The project preparations started in 2005 and the project plan of operation was signed in September 2006. Prior to KDDP, ICEIDA had been collaborating with the Ministry of Gender, Labour and Social Development and Kalangala district in the implementation of functional adult literacy programme (FALP) to improve literacy of the fishing communities in the district.

The project implementation commenced in December 2006, in 2010 a new logframe was approved for the second phase of implementation, which was finalized in 2015. Based on internal review in 2015 a four year consolidation phase for education was designed and approved, which is currently under implementation.

The development objective of the KDDP was conceived in line with Uganda's Poverty Eradication Action Plan (PEAP), to contribute to sustainable livelihoods and equitable socio-economic development in Uganda, particularly in Kalangala District. The overall strategy was to support Kalangala district local government to implement its development plan in the sectors of fisheries (integrating water and sanitation), education and health sectors, an integral part of the approach was to develop capacity for local governance to improve service delivery to the population of the district. In line with this strategy, the immediate objectives of the KDDP were fourfold:

1. *Under local administration* sector; to support the efforts of the Kalangala district local government to achieve efficient and effective leadership in the district together with quality administration and management of public services along with strong private sector and civil society organisations by 2015.
2. *Under Fisheries, and Water and Sanitation*; to support the efforts of Kalangala district local government to achieve sustainable quality fisheries production and marketing in the whole district 2015.
3. *Under Education and Sports* sector; to support the efforts of Kalangala district local government to achieve equitable access for the citizens to quality primary and secondary education 2015.
4. *Under Health* sector; to support the efforts of Kalangala district local government to achieve equitable access for the citizens to quality health services at district level by 2015.

In the revised logframe from 2010, an additional immediate object is defined, following recommendations presented in the mid term review in 2010:

1. Improved exploitation of Kalangala District tourism potential by 2015

Gender equality and environmental matters were to be addressed in the project as cross cutting issues. It may be noted that the mid-term review in 2010, made recommendation for improvement of monitoring progress in gender equality indicators.

Mid term review of KDDP was conducted in 2010.

Key documents:

- Project document 2006-2015
- Mid-term review 2010
- Revised logframe 2010-2015
- Internal review document for programme partners 2015
- Project Completion report 2017

### **3. Purpose and objectives of the evaluation**

In accordance with MFA policy on development evaluations and Iceland's Strategy for Development Cooperation, evaluations shall be carried out on development interventions.

This evaluation is both carried out for accountability and learning purposes. It is meant to provide evidence on the outcome, impact and sustainability of the two respective programmes, and to provide MFA-ICEIDA, the respective district councils in Mangochi and Kalangala and other stakeholders with evidence of results and recommendation on how to strengthen their work further with a focus on results based management.

The evaluation is expected to shed light on the degree to which outcomes have been or are likely to be achieved in the two respective programmes, whether outputs have been produced as planned and whether inputs have been employed efficiently. Furthermore, the relevance of the programmes as well as its impact on local communities (intended and unintended) and the likelihood that results are sustainable shall be addressed.

The three main objectives of this evaluation assignment are:

1. To provide independent and objective assessment of the results (outputs, outcome and impact, as well as relevance and sustainability) achieved by the respective programmes in the two districts.
2. To provide assessment of the relevance and effectiveness of working directly with district authorities as implementing partners in Iceland's development cooperation, including the main benefits, challenges and risks of such cooperation. This included an assessment of to what extent decentralization structures and linkages between local and central government support or hinder such arrangements?
3. To provide recommendation to strengthen further results-based management in the implementation of district development programmes.

As outlined above the evaluation shall follow the current OECD-DAC Quality Standards for Development Evaluations and address: relevance, effectiveness, efficiency, impact and the sustainability of the programmes.

#### **4. Scope of the evaluation**

The scope of the evaluation is to assess, whether and to what degree the immediate objectives of the programmes were achieved and have contributed to the long term objectives of sustainable livelihoods in Kalangala (economic and social living conditions) and improved living standards of rural population in Mangochi district. It shall also assess whether the programme components were well implemented in terms of producing the planned outputs through efficient use of inputs. Furthermore, the relevance of the programmes, its impact on local communities (intended and unintended) and the likelihood that results are sustainable shall be addressed. The evaluation shall address, but not be limited, to the following issues:

##### Relevance

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- Were the programmes an appropriate response to the needs of the identified beneficiaries in the two districts?
- Did the programmes address an important issue in relation to priorities in Malawi and Uganda, development plans at the district level, and was it in line with Iceland's development strategy?
- How can the results of this evaluation inform the current and planned reviews of Country Strategy Papers for Malawi and Uganda?

##### Effectiveness

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Have the intended outcomes, as defined in Programme Documents been achieved or are they likely to be achieved– and to what degree? To what extent, has the KDDP through the Kalangala District local government, contributed to:

- Efficient and effective leadership in the district together with quality administration and management of public services along with strong private sector and civil society organisations.
- Improved quality fisheries production and marketing in the Kalangala district.
- Equitable access to quality education in Kalangala district.
- Equitable access for the citizens to quality health services at district level (2006-2010).
- Improved exploitation of Kalangala District tourism potential (2010-2013). To what extent has the MBSP, contribute to:
- Increased and sustainable access to and use of improved safe water sources and improved sanitation practices in TA Chimwala.
- Increased availability, access and utilisation of high impact, quality maternal and child health services in Mangochi.
- Improved quality of education in target schools to reduce drop-out and repetition and promote effective learning.
- Improved institutional capacity for delivery of basic services, including health, water and sanitation and education, at the Mangochi district government.

## Efficiency

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- To what degree have the programmed outputs been delivered in accordance with Programme Documents, at the appropriate quality and quantity and at planned cost?
- Assess the sharing of responsibility and accountability among the stakeholders, including MFAICEIDA, District governments and respective Ministries.
- To what degree has the use of inputs in implementation been efficient?
  - Construction and procurement of goods and equipment
  - Arrangement of training
  - Monitoring and Evaluation (provide comments and recommendations on the implementation of M&E plans)
  - The work of the “Programme Steering Committees” and project management
- Do the district councils have the absorption capacity to effectively manage and administer the funding and activities?

## Impact

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Have the two programmes and their implementation had an impact, beyond the defined outcomes and outputs, on benefitting communities. Have the programmes contributed to improved livelihoods – measurable and perceived - among beneficiaries, including indicators from the key sectors of health, education, fisheries and water and sanitation, as defined in the respective project documents and government strategies in Malawi and Uganda.

- To what extent has the KDDP contributed to sustainable livelihoods and equitable socioeconomic development in Kalangala District?
- To what extent has the MBSP contributed to improved living standards in the rural communities in Mangochi District and a more resilient population in adversity and a more resourceful one for self-sufficiency.
- Has the capacity of the district local governments improved in terms of delivering basic services to the population?

The consultancy is expected to extract from its evaluation an overall analysis drawn from diverse resources of available indicators and information whether the programmes have had impact (positive or negative) on beneficiary communities, or specific groups within those, notably different socio-economic classes.

## Sustainability

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- Is it likely that the outputs can be maintained and operated for the benefits of the population without programme support? This should in particular address matters concerning operations and maintenance of infrastructure. If not, what further support will be needed?
- Has the contribution from the programmes been within limits of the absorption capacity of the two districts?
- Are outcomes likely to be sustained without support from the Programmes? If not, what further support will be needed?

- To what extent has capacity building of the district governments been sustainable, for instance with regard to retention of qualified/trained district staff, and has it contributed to improved sustainability of project outputs and outcomes?
- What factors influence or challenge sustainability of the two programmes?
- In the case of Kalangala, what impact will the end of the project have for delivery of services in the supported sectors?

#### Crosscutting Issues

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##### Gender

- Have both genders benefited from the programmes on equal terms?
- Have the programmes contributed to increased gender equality?
- To what extent did the two programmes create equal opportunities for men and women / boys and girls to participate?

##### Environment

- Have the programmes caused any significant environmental impact, positive or negative?
- To what extent have the programmes encouraged sustainable natural resource management?
- Were proper environmental considerations followed during implementation of activities where applicable?

With reference to the questions above and relevant M&E plans and available data for the programmes the Consultant will during the Inception phase, produce an evaluation framework in collaboration with the key stakeholders, including the district governments that identifies the relevant evaluation questions, formulated with reference to the objectives and indicators of each programme.

## **5. Methodology**

The evaluation shall be based on study of relevant documents, available monitoring data and statistics for relevant indicators, surveys and interviews with relevant stakeholders and field visits. It is expected that mixed methods will be applied, qualitative and quantitative. It is expected that interviews will be carried out with key stakeholders and that fieldwork will be carried out for about two weeks in Kalangala and Mangochi Districts (total four weeks), including household surveys with the assistance of local consultants.

Wrap-up and validation meetings should be conducted with stakeholders at the end of field visits in each district.

It is expected that local experts will form a part of the evaluation team in each country to assist with surveys, interviews, translations etc. Such input shall be budgeted in the financial proposal, and qualified local consultants proposed.

During the preparation stages the Consultant will work on defining in detail the appropriate methodological approach, which is likely to yield evidence based assessment and develop a detailed evaluation matrix in cooperation with MFA and the respective stakeholders, which will be presented in the Inception report.

## **6. Deliverables**

The deliverables for this consultancy consist of the following outputs:

- Inception report including an evaluation plan/matrix, key indicators and statistics to be used with reference to Project Document and M&E plans, workplan, interview guides, questionnaire etc. There may be one Inception report for the two programmes, but two evaluation matrixes shall be developed for the respective programmes.
- Draft report 1 including the two case study reports and analysis of the relevance and effectiveness of the district level cooperation mechanism and lessons learned.
- Draft report 2 incorporating feedback from Draft report 1.
- Organizing a feedback meeting with stakeholders in Malawi and Uganda to present the findings of the Draft 2 report and discuss comments and feedback.
- Final report including Executive summary and recommendations
- Evaluation brief not exceeding 4 pages

## **7. Timeframe**

It is expected that the assignment will be carried out from the beginning of February 2018 and be finalized by June 2018. The Inception report shall be submitted within four weeks from the start of the assignment. The assignment is budgeted with an estimated input from the Consultant of up to 30 weeks (150 days), thereof 10 weeks allocated for local consultants.

## **8. Management and Logistics**

The evaluation will be managed by the Evaluation Unit at MFA. The evaluation shall be led by a team leader. With respect to the overall management and execution of the evaluation the following assignment of responsibilities is expected:

### The Evaluation Manager at MFA

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The Evaluation Manager at MFA will be the primary MFA representative for this evaluation and be a focal point for communication with other MFA personnel when required. The Evaluation Manager is responsible for:

- Facilitating the Consultant's access to pertinent MFA documents and personnel.
- Providing overall management responsibility for the evaluation.
- Approving all deliverables.

### The Icelandic Embassies in Malawi and Uganda

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- Will contribute appropriately to all steps in the evaluation process without affecting the independency of the evaluation proper.
- Assist the consultant in establishing contact with all stakeholders as applicable.
- Arrange and provide transportation for the Consultant for field visits.
- Provide the Consultant with access to relevant documents.

- Provide feedback and comments on the reports.
- Arrange stakeholder meeting for feedback on draft evaluation report.

#### The Consultant

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The Consultant is responsible for:

- Conducting the evaluation in accordance with the ToR and the approved Inception report and evaluation plan.
- Managing day-to-day operations related to the evaluation.
- Making relevant travel arrangements related to the assignment and Consultant's work.
- Arranging all applicable visa's and health procedures as may be required.
- Providing regular progress updates to MFA's Evaluation Manager.
- Producing deliverables in accordance with the contractual requirements.

### **9. Consultant's Qualifications**

The evaluation team (The Consultant) shall be comprised of two key experts and one or two local nonkey experts in each country. The evaluation team shall combine core evaluation competencies with strong experience in international development evaluations in particular in Southern and East Africa.

The evaluation team leader shall be proposed who will manage and coordinate the work, and provide the overall editorial guidance and synthesis of the evaluation report.

Specific qualifications and experience of the two key experts:

1. An advanced university degree in relevant discipline.
2. A minimum of 10 years experience in evaluations for international development, demonstrated by at least two evaluation reports for development project of considerable scope.
3. Experience from working in Malawi and/or Uganda.
4. Experience in evaluations covering at least three of the following sectors; decentralization, education, health, water and sanitation and institutional capacity building.
5. Demonstrated professionalism in all aspects of work, possess excellent communication and interpersonal skills as well as good planning and organizational skills.
6. Excellent command of oral and written English.

The two key experts shall complement each others qualifications.

Specific qualifications and experience of the local non-key experts (one or two may be proposed for each country)

1. An advanced university degree in relevant discipline.
2. A minimum of 5 years evaluation experience.
3. Experience in evaluations covering at least two of the following sectors; decentralization, education, health, water and sanitation, fisheries (for Uganda) and institutional capacity building.

4. Knowledge and experience in relevant social science methods, including interviews and household surveys.
5. Demonstrated professionalism in all aspects of work, possess excellent communication and interpersonal skills as well as good planning and organizational skills.
6. Fluent in relevant local languages in Manghochi (Chichewa and Yao) and Kalangala (Luganda) districts and excellent command of oral and written English.

## **10. Application procedure**

The Consultant shall prepare and submit the following:

1. A cover letter, outlining the qualifications of the consultant/team for the assignment, including references to previous relevant work.
2. Technical proposal (4-5 pages), responding to this ToR, outlining the envisioned evaluation process, proposed methods and workplan.
3. CV's of the two key experts and the local experts proposed for each country, detailing relevant skills and experience.
4. Two examples of recent evaluation reports for international development.
5. Financial proposal, in a separate file, based on the premises outlined in this ToR, including expected travel costs. The budget shall include:
  - a. Remuneration for the two key experts for a period of 100 days in total
  - b. Remuneration for the local experts for a period of 50 days in total
  - c. Inception mission to Malawi and Uganda, 3 working days expected in each country.
  - d. Fieldwork in Uganda and Malawi for a period of 2 weeks in each country, for both key experts.
  - e. Reimbursable costs associated with the evaluation
6. Two contactable references from similar assignments, or reference letters.

Evaluation of proposals will be based on Quality and Cost Based Selection (QCBS), the evaluation of quality will be based on the following criteria:

1. Adequacy and quality of the proposed methodology, work plan and team composition in responding to the Terms of Reference (50%)
  - a. Approach and methods
  - b. Workplan and team composition, including the non-key experts
2. Key Experts' qualifications and competence for the Assignment (50%)

For inquiries or clarifications on this assignment, please send an email to [tenders@mfa.is](mailto:tenders@mfa.is). Responses to all inquiries will be posted on the website: <http://www.iceida.is/english/tenders/>

MFA is not bound to accept any proposal, and reserves the right to annul the selection process at any time prior to Contract award.

Proposals shall be submitted in electronic format to [tenders@mfa.is](mailto:tenders@mfa.is), before 16:00 Icelandic time, 15 December 2017. Proposals received after this time will not be considered.



Field itinerary for the Household Survey in Kalangala

FIELD ITINERARY FOR HOUSEHOLD SURVEY - KDDP																				
Activity	April 2018										May 2018								No. Of HH	Remarks
	Sun	Mon	Tue	Wed	Thu	Fri	Sat	Sun	Mon	Tue	Wed	Thu	Fri	Sat	Sun	Mon	Tue	Wed		
	22	23	24	25	26	27	28	29	30	1	2	3	4	5	6	7	8	9		
1) Travel to Kalangala (NE, Data Analyst, and Enumerator)																				
2) Training of Enumerators and pilot testing of Questionnaire																				
3) Conducting of HH Survey - Villages																				
<i>Buggala; Kibanga; &amp; Lutoboka</i>																			25	
<i>Kalangala ( 2 enumerators to work )</i>																			15	
<i>Kachungwa; &amp; Busindi ( 2 enumerators to work )</i>																			13	
<i>Nakibanga; Buwazi; &amp; Kisaba</i>																			39	To spend the night in Kisaba
<i>Buzingo; Buwanga; &amp; Lwenabatya</i>																			19	
<i>Kyagalanyi; Bwendero; &amp; Dajje</i>																			43	
<i>Lwabaswa; &amp; Kagoonya</i>																			17	
<i>Kibanga-Buligo; Bujumba-Buyoga; &amp; Bumangi</i>																			20	
<i>Kande; Lwazi-Bubeke; &amp; Namisoke</i>																			29	To spend the night in Namisoke
<i>Lwazi-Jaana; &amp; Kikku</i>																			20	
<i>Kasekulo-Ttubi; Kasekulo; &amp; Bbeta</i>																			39	
<i>Bugoma ( 2 enumerators )</i>																			13	
<i>Kaazi; &amp; Bufumira ( 2 enumerators )</i>																			17	
<i>Kachanga; Misonzi; &amp; Kaaya</i>																			43	
4) Institutional / Focus Group Discussion interviews																				
5) Data tabulation and Analysis																				
6) Travel back to Kampala ( Enumerator )																				
7) Travel back to Kampala (NE & Data Analyst)																				

## Annex 2: List of persons met and consulted in key interviews

**List of persons met and consulted by the Consultant in Key Interviews:**  
(persons from landing sites and schools are listed in the sequence of appearance)

Name	Position	Institution
<b>Icelandic Embassy, District and Sub-County Administrations</b>		
Ms Thordis Sigurdardottir	Director, Bilateral Development Cooperation	Directorate for International Development Cooperation ICEIDA), Ministry for Foreign Affairs, Iceland
Mr Árni Helgi Helgason	Chargé d’Affaires	Embassy of Iceland, Kampala, Uganda
Mr Pius Ichariat	Senior Programme Officer	---“---
Mr Ben Twikirize	Senior Programme Officer	---“---
Mr Willy Lugolobi	District Chairperson	Kalangala District Local Government
Mr Jackson Baguma	District Fisheries Officer	---“---
Mr Emanuel Nseko	District Education Officer	---“---
Mr Ronald Mutebi	District Inspector of Schools	---“---
Mr James Katta Luwalagga	Associate Assessor (Education)	---“---
Mr Mohammed Mukasa	Principal Human Resources Officer	---“---
Mr Godfrey Mukasa	Principal Assistant Secretary/ Ag. Dep. Chief Admin. Officer (CAO)	---“---
Mr Cyprian Kavuma	District Commercial Officer	---“---
Mr Michael Agaba Mpola	Procurement Officer	---“---
Mr Edward Bugimbi	Ass. District Health Officer	---“---
Ms Harriet Saawo	District Natural Resources Officer	---“---
Mr Abbas Miiro Kizito	District Planner	---“---
Mr Gabriel Richard Atama	Chief Administrative Officer (CAO)	---“---
Mr Francis Yiga	Senior Water Engineer	---“---
Mr Novatus Baliremwa	District Engineer	---“---
Mr Paul Kaabinga	Sub-County Chairperson	Bubeke Sub-County
Mr Gideon Mayambala	Sub-County Chief	Mazinga Sub-County
Mr Job Obore	Health Inspector	---“---
Mr Vincent Kiraga	Parish Chief	Kagoonya Parish
Ms Rosemary Takka	Executive Director	Kalangala District NGO Forum
Ms Irene Kamahaiso	Tourist Officer and Café Manager	Kalangala District Tourist Information Centre
<b>Fish Landing Sites</b>		
Ms. Reuben Mwanje	Secretary, Fish Landing Site Committee (FLSC, former BMU)	Kisaba fish landing site
Mr Kakooza Geresomu	Chairperson of FLSC	Kyagalanyi fish landing site
Mr Stephen Banadda	Former BMU Chief	---“---
Mr Asadu Kavuma	Chairman of FLSC	Namisoke Fish Landing Site
Mr Isma Kitumba	Secretary of FLSC	---“---
Ms Mibisi Namisoke	Member of FLSC	---“---
Mr Charless Makumbi	Chairman of FLSC	Kasekulo-Ttubi Fish Landing Site
Mr Patrick Kiwanuka	Vice Chairperson of FLSC	---“---
Mr Richard Katyima	Member of FLSC, water supply operator	---“---

Name	Position	Institution
Mr Ronald Ssebalamu	Trader, member of FLSC	---“---
Mr Christopher Kakembo	Chairman of FLSC	Kachungwa fish landing site (Mazinga)
Mr Muhamad Ssempala	Chairman of village	---“---
<b>Schools</b>		
Ms Innocent Maria Nadduuto	Head Teacher	Kachanga Primary School (PS)
Ms Margaret Kenshubi	Head Teacher	Mulabana PS
Mr George William Mubiru	Director of Studies	(St. Theresa) Bwendero PS
Ms Nadme Catherine Sanyu	Head Teacher	Lwabaswa PS
Mr. Fred Wasswa	Dep. Head Teacher	---“---
Mr Keneth Tuhaise	Dep. Head Teacher	Kibanga PS
Ms Annet Dambya	Dep. Head Teacher	(St. Joseph) Kinyamira PS
Mr Ignatius Muddu	Head Teacher	---“---
Ms Josephine Namutebi	Head Teacher	(St. John Baptist) Bumangi PS
Ms Milly Nannyondo	Head Teacher	Busanga PS
Mr Geoffrey Lubega	Head Teacher	Lake Victoria Education Centre
Ms Janet Namatovu	Dep. Head Teacher	---“---
Mr Livingstone Ssekitoleko	Head Teacher	Bubeke PS
Mr Martin Makombe	Head Teacher	Jaana PS
Mr Mathias Njawuzi	Teacher	---“---
Mr Aloy Vincent Kisekka	Head Teacher	Bufumira PS
Mr Godfrey Musenja	Head Teacher	Kasekulo PS
Mr Francis Kityamuweesi	Head Teacher	Bbeta PS
Ms Pauline Nalubega	Dep. Head Teacher	Bugoma Mapeera PS
Mr Isaac Okai	Director of Studies	---“---
Ms. Rebecca Namawette	Cook	Mazinga Primary School
<b>Health Centres</b>		
Ms Florence Batuusa Ngabo	Medical Doctor	Kalangala Health Centre (HC) IV
Ms Christine Nakafeero	Midwife	Mulambana HC II
Ms Ndeline Nampitia	Enrolled Nurse	Bwendero HC III
Ms Shawor Nashozi	ECN Assistant in charge	Bumangi (St. Elisabeth) HC II
Mr Nathan Kayemba	Health Information Officer	Mazinga HC III

## Annex 3: List of main documents reviewed

### List of the main documents reviewed by the Consultant:

No.	Title	Institution/(Author)	Date
1	ICEIDA's Gender Policy	ICEIDA	2004
2	Support to the implementation of Uganda FALP in Kalangala District. Second Phase – an extension from 2006-2010	MoLG, Kalangala District and ICEIDA	December 2005
3	Support to the implementation of Kalangala District Development Programme (KDDP) . Project Document	ICEIDA and Kalangala District	September 2006
4	Support to the implementation of KDDP. Plan of Operation	Kalangala District Local Government, ICEIDA	November 2006
5	Support to the implementation of KDDP. Progress Report Oct-Dec 2006	ICEIDA and Kalangala District	???
6	Support to the implementation of KDDP. Progress Report Jan-June 2007	ICEIDA and Kalangala District	???
7	Support to the implementation of KDDP. Progress Report July-Sept 2007	ICEIDA and Kalangala District	???
8	Support to the implementation of KDDP. Progress Report July-Dec 2007	ICEIDA and Kalangala District	???
9	Support to the implementation of KDDP. Progress Report Oct-Dec 2007	ICEIDA and Kalangala District	???
10	Support to the implementation of KDDP. Progress Report Jan-July 2008	ICEIDA and Kalangala District	???
11	General Agreement on F for Development Cooperation between Iceland and Uganda	ICEIDA and MoLG	September 2008
12	Support to the implementation of KDDP. Progress Report July-Dec 2008 and Annual Plan of Action 2009	ICEIDA and Kalangala District	???
13	Support to the implementation of KDDP. Progress Report Oct-Dec 2008	ICEIDA and Kalangala District	???
14	Support to the implementation of KDDP. Progress Report Jan- March 2009	ICEIDA and Kalangala District	???
15	Baseline survey in five model fishing villages of Kachungwa, Namisoke, Kisaba, Kadekulo and Kyagalanyi (Mulabana).	Inst. of Statistics and Applied Economics, Makerere University	March 2009
16	Mid-Term Review. ICEIDA's Support to the KDDP (UGA 10040008)	Windsor Consult Ltd.	October 2010
17	The ICEIDA support to KDDP. The Midterm (five year) report (2006-2010)	ICEIDA	Dec 2010
18	Revised LDDP Logframe	ICEIDA and Kalangala District	January 2011
19	Support to the implementation of KDDP. Final M&E strategy	???	February 2011
20	Assessment of the capacity of Kalangala District to manage donor funds (With a special focus on KDDP project funded by ICEIDA)	ICEIDA and Min. of Local Government (MoLG)	June-Aug 2011
21	MoU between Kalangala District Local Government and ICEIDA	Kalangala District Local Government, ICEIDA	October 2011

No.	Title	Institution/(Author)	Date
22	Kalangala Tourism Master Plan	Kalangala Distr Local Government	2011
23	Implementation Strategy for Kalangala Tourism Maser Plan	The Republic of Uganda	June 2013
24	Needs assessment report for the tourism component of KDDP	MoLG, Kalangala District and ICEIDA	November 2013
25	Kalangala District Tourism Workplan for January to December 2014 (FY 2014/15)	Programme partners	???
26	KDDP. Tourism Sector. Kalangala District Tourism Priorities	The Republic of Uganda	???
27	Report from Joint monitoring mission for the period July-December, 2012. Final report.	ICEIDA	February 2013
28	Report on KDDP field monitoring covering first quarter ending March 31, 2013. Final Report	ICEIDA	April 2013
29	Synthesis report on Analysis of KDDP Annual report for 2013, and KDDP Annual Work Plan and Budget for 2014	ICEIDA	January 2014
30	Uganda. Country Strategy Paper 2014-2017.	ICEIDA	January 2014
31	Support to the implementation of KDDP. Tracking and audit of text books provision in Kalangala Districts primary schools	Godfrey Kaboggoza	July 2014
32	The quarterly monitoring report for the period ending June 30, 2014	ICEIDA	July 2014
33	The joint monitoring mission. Monitoring Report.	ICEIDA	October 2014
34	KDDP Final Report. Internal review for partners	Greenstar International (U) Ltd	Feb-March 2015
35	Support to the implementation of KDDP. A detailed review of KDDP Education Component supported by ICEIDA. Final Report Volumes I and II	Greenstar International (U) Ltd.	August 2015
36	Kalangala-ICEIDA Development Partnership. Development in Education Sector 2016-2019. Project Document	Embassy of Iceland and KDLG Technical Teams	June 2016
37	The final report on KDDP Joint monitoring mission conducted from 15-17 December 2016	ICEIDA	December 2016
38	Support to implementation of KDDP 2006-2015. Completion Report	MoLG, Kalangala District and ICEIDA	June 2017
39	National Population and Housing Census. Kalangala District, 2014	Uganda Bureau of Statistics	2017
40	Report on Tourism Development	ICEIDA	April 2018
41	Various statistics on health, education and fisheries sectors	Various	2018

No.	Title	Institution/(Author)	Date
<b>Documents received and consulted after the Draft Evaluation Report had been submitted</b>			
42	Support to implementation of KDDP 2006-2015. The Annual Progress Report January-December 2011 and Annual Workplan and Budget January-December 2012	Kalangala District Planning Unit (M&E Desk)	15 Feb. 2012
43	Support to implementation of KDDP 2006-2015. The Annual Project Report for 2012 (Approved). Project No.: UGA 430-40-0602	Kalangala District Local Government	Feb 2013
44	Support to implementation of KDDP The Annual Progress Report	Kalangala District Local Government	20 Jan 2014
45	Support to implementation of KDDP 2006-2015. The Progress Report for Second Quarter ending June 30 2014 (Biannual Report). Final Report	Kalangala District Local Government	July 2014
46	Monitoring report on CSOs Under KDDP Small Grant Facility	Kalangala District NGO Forum (KADINGO), Monitoring Team	Aug 2010
47	Minutes from 13th PSC Meeting	ICEIDA and Min. of Local Government	13 Sept 2011
48	Minutes from 14th PSC Meeting	ICEIDA and Min. of Local Government	22 Mar 2012
49	The ICEIDA Support to Implementation of KDDP. Report of the KDDP Grant Committee on Award of grants to Civil Society Organisation (CSOs). Annex A: CSO scores and budgets	ICEIDA and Kalangala District Local Government	Aug 2011
50	Support to Implementation of KDDP. The Small Grants Facility to CSOs Request for Proposals	Kalangala District Local Government	June 2011
51	Numerous proposals for small grants from various CSOs	Various	2011





Figure 2: Locations visited during the baseline survey (2008), during the Mid-term Review (2010, only Namisoke fishing village) and during the joint Monitoring Mission in December 2016)



**Locations visited**

NNNNNN

Nnnnnnn

MMM PS

MMM HC

MMM SCO

Nnnnnnn

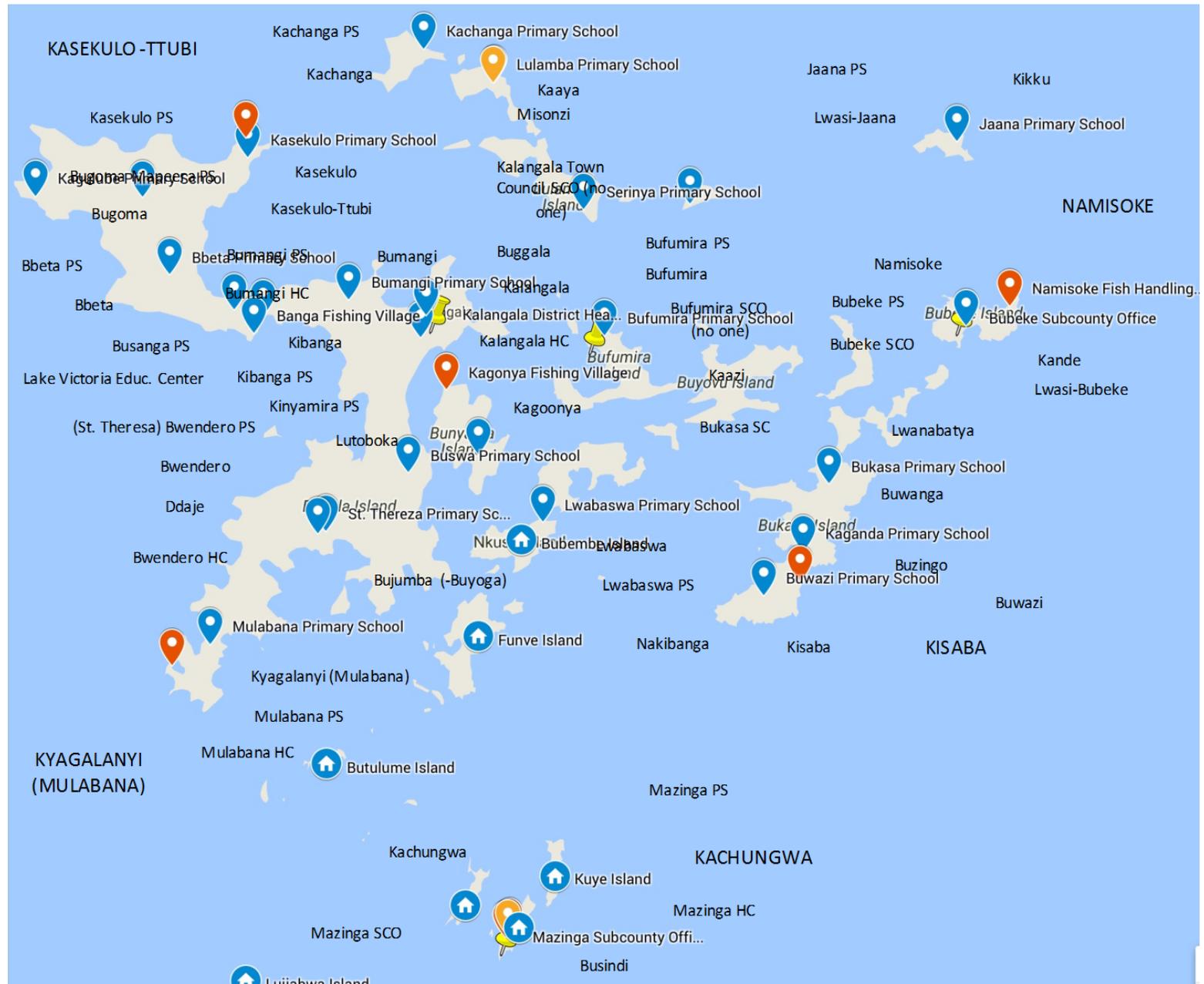


Figure 4: Locations visited during the external End Evaluation of KDDP

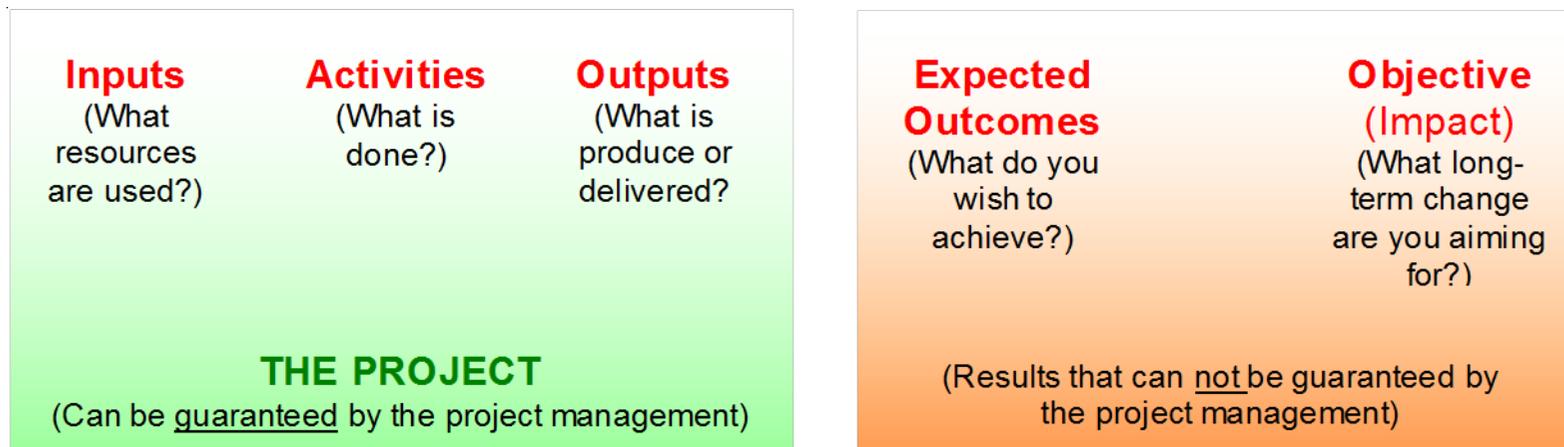


Figure 5: The Results Chain

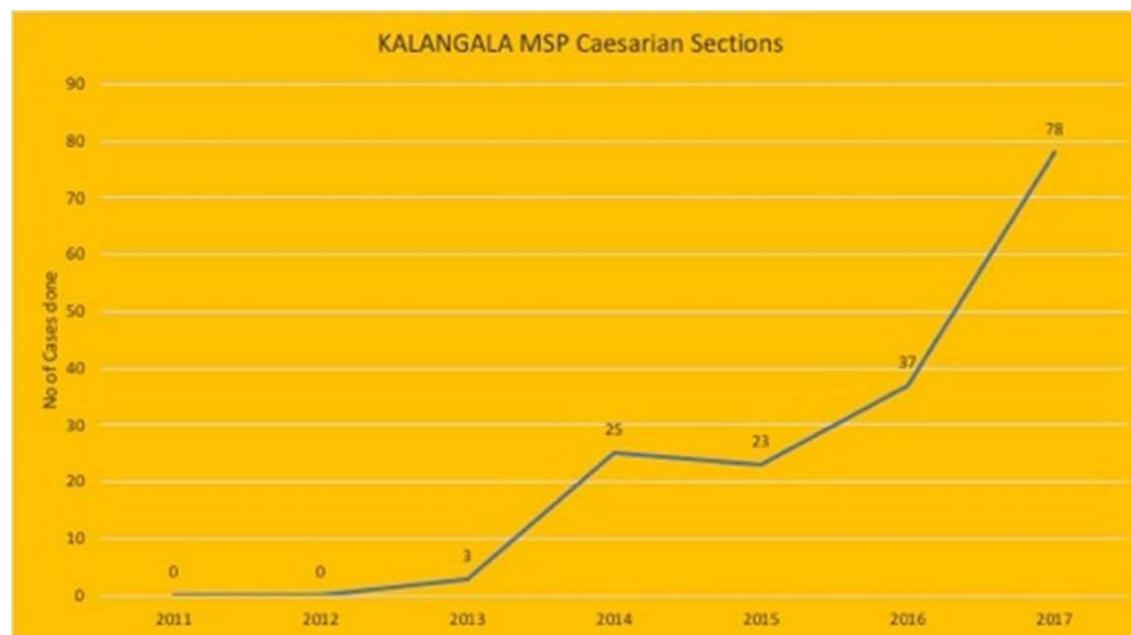


Figure 6: Number of Caesarean operations in Kalangala Health Centre (Source: Kalangala District Health Information System - DHIS)

Year	Cholera	Dysentery	Diarrhoea-Persistent	Diarrhoea-Acute	Typhoid Fever
2012	5	311	0	0	275
2013	0	1031	0	0	662
2014	2	933	0	0	942
2015	4	459	35	1094	579
2016	0	909	1307	4712	683
2017	1	687	714	4772	608

Table 1: Reported cases of waterborne-related diseases in Kalangala District (Source: Kalangala District Health Dept.)

Class	2011		2012		2013		2014		2015		2016		2017		2018	
	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F
P1	622	619	668	606	637	628	649	571	627	591	805	616	670	677	715	630
P2	401	373	394	364	407	384	427	412	435	405	404	385	437	452	279	441
P3	357	318	338	292	356	339	390	361	423	442	408	448	471	426	447	467
P4	297	344	326	332	352	307	346	331	350	327	370	442	443	396	588	427
P5	230	206	229	208	232	207	310	263	287	271	301	322	313	326	358	355
P6	181	164	151	170	168	185	172	163	241	222	236	260	256	251	255	253
P7	141	144	116	113	137	121	164	169	164	160	190	207	78	189	187	191
<b>Total</b>	<b>2229</b>	<b>2168</b>	<b>2222</b>	<b>2085</b>	<b>2289</b>	<b>2171</b>	<b>2458</b>	<b>2270</b>	<b>2527</b>	<b>2418</b>	<b>2714</b>	<b>2680</b>	<b>2668</b>	<b>2717</b>	<b>2829</b>	<b>2764</b>
<b>Total year</b>	<b>4397</b>		<b>4307</b>		<b>4460</b>		<b>4728</b>		<b>4945</b>		<b>5394</b>		<b>5385</b>		<b>5593</b>	

Table 2: Primary School enrolment from 2011 to 2018 (Source: Kalangala District Education Dept)

GRADES	2010	2011	2012	2013	2014	2015	2016	2017
% passes in Division 1	2.6	4.2	11.8	14.5	14.0	14.1	12.4	10.3
% passes in Division 2	43.0	52.2	51.5	49.0	52.5	52.6	55.4	61.5
% passes in Division 3	26.9	21.5	16.9	17.6	14.9	14.1	16.7	13.0
% passes in Division 4	9.5	9.0	7.0	6.2	8.1	9.3	9.3	8.0
<b>% passes in Division 1-4</b>	<b>82</b>	<b>86.9</b>	<b>87.2</b>	<b>87.3</b>	<b>89.5</b>	<b>90.1</b>	<b>93.8</b>	<b>92.8</b>
<b>% passes in Division 1-3</b>	<b>72.5</b>	<b>77.9</b>	<b>80.2</b>	<b>81.1</b>	<b>81.4</b>	<b>80.8</b>	<b>84.5</b>	<b>84.8</b>
<b>% passes in Division 1-2</b>	<b>45.6</b>	<b>56.4</b>	<b>63.3</b>	<b>63.5</b>	<b>66.5</b>	<b>66.7</b>	<b>67.8</b>	<b>71.8</b>

Table 3a: Kalangala primary school performance in Primary Leaving Examination (PLE) (Source: Kalangala District Education Dept)

	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015
Kalangala Index	46%	57%	54%	48%	53%	56%	65%	69.5%	67%	65%	65.3%
National Index	51%	57%	56%	50%	53%	57%	63%	66%	57%	57%	54%
Difference	-6%	0%	-1%	-2%	0%	-1%	2%	4%	10%	8%	11.3%
Kalangala Position <sup>1</sup>	NA	NA	NA	NA	34	40	25	17	12	18	11
Number of Districts					80	83	112	112	112	112	112

Table 3b: Kalangala District PLE Performance Index (from the KDDP Completion Report. Sources: Ministry of Education and Sports: Education Sector Annual Reports, and/or Education Statistical Abstracts (2005-2015))

<sup>1</sup> Kalangala position indicates the ranking of the district in the district league table of all the districts in Uganda on the PLE performance index measure

No.	Name of School	Private Teachers			Government Teachers		
		Male	Female	Total	Male	Female	Total
1	Kagulube	2	3	5	2	5	7
2	Kasekulo	1	3	4	4	4	8
3	Kibanga	1	3	4	6	6	12
4	Bukasa		2	2	6	1	7
5	Kinyamira	1	2	3	4	3	7
6	Bebeke	1	1	2	4	2	6
7	Bufumira		2	2	3	3	6
8	Jaana		2	2	5	1	6
9	Bumanji	1	1	2	4	4	8
10	Lulamba		2	2	4	3	7
11	Mulabana	3	2	5	3	4	7
12	Buwazi	1	3	4	1	2	3
13	Kibaale	2	3	5	2	5	7
14	Kachanga	1	3	4	3	3	6
15	Lwabaswa	2	1	3	2	1	3
16	Bbeta	1	2	3	5	3	8
17	Mazinga				5	1	6
18	Bwendero	1	1	2	3	4	7
19	Buswa		2	2	2	4	6
20	Kitobo				3		3
21	Kaganda		2	2	5	3	8
22	Bunyama				1	2	3
23	Busanga				2	5	7
24	Sserinya	6	2	8			
25	Lake Victoria	9	3	12			
26	Bridge	5	5	10			
		<b>38</b>	<b>50</b>	<b>88</b>	<b>79</b>	<b>69</b>	<b>148</b>

Table 4: List of teachers 2018, Kalangala District (Source: Kalangala District Education Dept)

Date	Description	ICEIDA	DISTRICT	Total	Notes
<b>KDDP-I 2006-2010</b>					
09/2006	Approved Project Contribution September 2006	5.760.000	1.240.000	7.000.000	Kalangala contribution in kind
12/2010	Total expenditure of KDDP-I	3.964.014	1.240.000	5.204.014	Kalangala district contribution all charged to KDDP-I
<b>2006-2010</b>	<b>Remaining approved funds at end of KDDP-I</b>	<b>1.795.986</b>	<b>0</b>	<b>1.795.986</b>	
<b>KDDP-II 2011-2015</b>					
2011	Balance of funds brought forward from KDDP-I to KDDP-II	1.795.986	0	1.795.986	
2011-2015	Cost of approved additional KDDP-II activities	1.454.250	60.713	1.514.963	MoU (October 25, 2011)
	<b>Total Budget Approved for 2011-2015</b>	<b>3.250.236</b>	<b>60.713</b>	<b>3.310.949</b>	<b>MoU (October 25, 2011)</b>
	<b>Additional activities approved for funding post-KDDP-II MoU</b>				
2014	procurement of Floating Barges	66.120	0	66.120	PSC /Approval Letter Min. of the 11th PSC meeting Held in April 7th, 2011
2014	For construction of New School Infrastructure	424.240	0	424.240	PSC /Approval Letter Ref:UGA14020008/430-40 dated 05/06/2014
2015	For procurement of Primary School Textbooks	289.523	0	289.523	PSC /Approval Letter Ref:UGA14020012/430-40 dated 09/12/2014
2015	Short-term consolidation July to December 2015	313.339	0	313.339	PSC /Approval Letter Ref:UGA14020008/430-40 dated 14/07/2015
2011-2015	Administrative/Overheads costs for 2011-2015 not indicated in MoU	772.941	0	772.941	Approved in principle as ICEIDA funded project cost
	Additional funding (in-kind) by Kalangala District to KDDP-II	0	0	0	Estimated increase in district's in-kind contribution

Date	Description	ICEIDA	DISTRICT	Total	Notes
<b>KDDP-I 2006-2010</b>					
	<b>Total additional funding approved</b>	<b>1.866.163</b>	<b>0</b>	<b>1.866.163</b>	
	Total approved funding KDDP-I	3.964.014	1.240.000	5.204.014	
	Total approved funding KDDP-II	5.116.399	60.713	5.177.112	
	Total approved ICEIDA funding KDDP-I and KDDPII	9.080.413	1.300.713	10.381.126	
	Figure in KDDP Completion Report	9.102.633	1.300.713	10.403.346	
	Variation	22.220	0	22.220	

*Table 5: Overview of revision of the 2006-2015 KDDP budget (Source: Icelandic Embassy in Kampala)*

Sector		Code				Year				Grand Total			
			2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	
Admini- stration	Other contracts or services	59180	0	5,695	36,462	35,801	3,767	6,543	2,601	944	0	0	91,813
	General purchases	59181	0	0	500	0	182	3,898	2,258	0	0	0	6,838
	Contributions to foreign parties	59182	0	29,010	26,098	56,374	44,354	27,913	28,931	1,958	0	0	214,637
	Contractors, buildings, building materials	59183	0	11,426	2,518	0	90,349	222,990	348,661	55,731	0	0	731,674
	Assets, vehicles, machinery, furniture etc	59184	39,980	55,304	42,590	0	2,409	910	176,228	867	0	0	318,287
	Travel costs, meetings etc	59185	0	36,396	67,428	37,126	26,927	125,664	35,231	48,974	0	0	377,747
	School fees, books etc	59186	0	0	0	0	329	0	354	0	0	0	683
	Scholarships	59187	0	2,085	0	0	250	0	2,248	0	0	0	4,583
	Direct transfers un distributed to cost Codes		0	0	0	0	0	0	0	0	36,923	0	36,923
	Total		39,980	139,915	175,596	129,302	168,566	387,917	596,511	108,475	36,923	0	1,783,186
Education	Other contracts or services	59180	17,484	3,581	26,067	9,086	12,041	10,937	11,965	43,359	39,712	0	174,233
	General purchases	59181	889	3,287	11,003	8,108	31,519	25,994	10,946	16,063	0	0	107,809
	Contributions to foreign parties	59182	9,158	3,412	1,243	13,750	0	0	0	0	0	0	27,563
	Contractors, buildings, building materials	59183	8,194	9,312	35	296,836	344,435	135,676	0	387,508	484,693	19,308	1,685,997
	Assets, vehicles, machinery, furniture etc	59184	9,752	31,043	218	0	0	13,496	1,092	0	0	0	55,600
	Travel costs, meetings etc	59185	47,524	44,462	61,906	72,158	53,941	71,613	70,620	142,600	0	0	564,824
	School fees, books etc	59186	13,075	0	0	0	0	11,178	0	0	186,100	0	210,353
	Scholarships	59187	457	0	0	0	0	0	0	0	0	0	457
	Direct transfers un distributed to cost Codes		0	0	0	0	0	0	0	0	228,077	419,265	647,342
	Total		106,532	95,097	100,472	399,939	441,935	268,895	94,623	589,530	938,581	438,573	3,474,176

Sector		Code	Year				Grand Total						
			2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	
Fisheries	Other contracts or services	59180	0	0	16,180	3,961	4,175	89	1,680	3,723	0	0	29,807
	General purchases	59181	0	198	0	0	971	3,606	0	2,608	0	0	7,383
	Contributions to foreign parties	59182	0	0	0	333	0	0	0	0	0	0	333
	Contractors, buildings, building materials	59183	0	12,920	113,555	141,868	115,473	170,535	101,455	342,996	2,458	0	1,001,261
	Assets, vehicles, machinery, furniture etc	59184	0	20,100	3,473	0	1,364	18,225	370	17,691	0	0	61,222
	Travel costs, meetings etc	59185	0	10,797	44,599	5,045	19,082	11,027	24,367	19,296	0	0	134,213
	School fees, books etc	59186	0	0	0	0	250	0	0	0	0	0	250
	Scholarships	59187	0	0	0	0	0	0	0	1,675	0	0	1,675
	Direct transfers un distributed to cost Codes		0	0	0	0	0	0	699	0	20,769	0	21,468
	Total		0	44,015	177,808	151,207	141,315	203,481	128,570	387,988	23,227	0	1,257,612
Health	Other contracts or services	59180	0	3,504	9,537	19,416	11,262	0	0	0	0	0	43,720
	General purchases	59181	0	3,154	5,291	0	1,156	0	0	0	0	0	9,601
	Contractors, buildings, building materials	59183	0	12,096	34,841	5,040	10,465	0	0	0	0	0	62,442
	Assets, vehicles, machinery, furniture etc	59184	0	31,896	24,309	6,401	27,848	0	0	0	0	0	90,454
	Travel costs, meetings etc	59185	0	18,365	42,375	24,057	26,239	339	800	500	0	0	112,675
	School fees, books etc	59186	0	0	408	1,429	0	0	0	0	0	0	1,837
	Scholarships	59187	0	0	2,353	952	4,858	4,219	0	0	0	0	12,383
	Total		0	69,015	119,114	57,296	81,828	4,558	800	500	0	0	333,111

Sector		Code	Year				Grand Total						
			2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	
Tourism	Other contracts or services	59180	0	0	0	0	0	0	0	0	0	0	0
	General purchases	59181	0	0	0	0	0	11,138	69,985	12,223	0	0	93,345
	Assets, vehicles, machinery, furniture etc	59184	0	0	0	0	0	0	3,629	0	0	0	3,629
	Travel costs, meetings etc	59185	0	0	0	0	0	0	1,233	0	0	0	1,233
	School fees, books etc	59186	0	0	0	0	0	20,440	15,866	14,805	0	0	51,112
	Total		0	0	0	0	0	31,578	90,713	27,028	0	0	149,319
Overhead Costs			149,025	371,588	374,382	201,246	228,840	162,283	112,943	105,631	99,212	292,871	2,098,023
Grand Total			295,537	719,630	947,372	938,989	1,062,485	1,058,712	1,024,161	1,219,153	1,097,943	731,444	9,095,427

Table 6: ICEIDA's direct contribution to the KDDP 2006-2015 (in USD) (Source: ICEIDA/Icelandic Embassy in Kampala)

Notes:

**The Direct transfers un distributed to cost Codes:** In 2014 Use of the Dimension 1 expenditure codes (59180-7) was dropped and dimension code 59182 was adopted as the expenditure code for projects. Simply the expenditure was recognized at transfer of funds to the District.

**Overhead Costs:** This are costs incurred in fees (consultancies), project related Studies, staff emoluments, Taxes, provident fund contributions, insurance, medical, Transport, rent, bills, utilities, communication bills, workshops and other operational costs

# Annex 5: Household Survey Questionnaire and Key Informant Questions

## KALANGALA DISTRICT LOCAL GOVERNMENT

<p><b>END OF PROGRAMME EVALUATION HOUSEHOLD SURVEY QUESTIONNAIRE</b></p>
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*Final Draft – Version 10  
(17 April 2018)*

HOUSEHOLD SURVEY CONDUCTED BY GOPA CONSULTANTS WITH SUPPORT FROM ICEIDA

Date of interview: .....

Name of Enumerator: .....

Mobile: .....

Email: .....

My name is ... I am currently working as an Enumerator for the final evaluation of the Kalangala District Development Program (KDDP), implemented by the District Local Government, supported by Iceland Development Cooperation (ICEIDA). KDDP has been implementing the programme in the sectors of fisheries, water and sanitation, education, health, and capacity building of the District Local Government Authorities; with the overall objective of contributing to sustainable livelihoods and equitable social development. The Household Survey is conducted mainly to assess programme performance, its impact and sustainability, as well as to document lessons that can be used to improve the planning of similar programmes in future. You have been selected to participate in the survey as a community member and potential beneficiary of the programme.

The evaluation report will be used by partners, though led by Iceland. The data and/or information collected during this interview will be presented in aggregate terms only, and will not be traced to individuals. Confidentiality of the data and/or information provided shall be highly respected. As such, the names of the respondents in households, or the names of the household heads will remain anonymous, and will NOT appear in any report.

**Would you mind if I asked you some questions?**

THANK YOU FOR YOUR COOPERATION!

## 1. Identification

SECTION 1: IDENTIFICATION													
1. COUNTY:													
2. SUB-COUNTY:													
3. PARISH:													
4. VILLAGE:													
5. HOUSEHOLD SR. NO.:													
6. SAMPLE NO.:													
7. HOUSEHOLD CODE:													
8. NAME OF HOUSEHOLD HEAD:													
9. AGE OF HOUSEHOLD HEAD:													
10. SEX OF HOUSEHOLD HEAD:													
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 50%;"></td> <td style="width: 25%;">Male</td> <td style="width: 25%;">Female</td> </tr> </table>												Male	Female
	Male	Female											
11. NAME OF RESPONDENT:													
12. SEX OF RESPONDENT:													
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 50%;"></td> <td style="width: 25%;">Male</td> <td style="width: 25%;">Female</td> </tr> </table>												Male	Female
	Male	Female											
13. AGE OF RESPONDENT													

## 2. Household Demographics

### 2.1 Residence

2.1.1 How long has this household stayed in this village (i.e. duration of residence)? ... (Years) ... (Months)

2.1.2 What was your previous residence? ... ..

2.1.3 Are you a Native of Kalangala District?

- Yes = 1
- No = 2

2.1.4 IF NO, what is your district of origin in Uganda or Country? .....

**2.2 Household Characteristics**

ID No.	Name	Sex • Male = 1 • Female = 2	Age (How old?)	For persons aged 10 years and above	
				What is (Name's) marital status? • Married = 1 • Single = 2 • Divorced / Separated = 3 • Widowed = 4	During the past month what was the main occupation for each member of the household? • Employer = 1 • Fisheries <sup>1</sup> = 2 • Mining & Quarrying = 3 • Manufacturing = 4, • Electricity, Gas & Water = 5 • Construction = 6 • Sales & Services = 7 • Hotels & Restaurants = 8 • Transport, Storage & Communication = 9 • Education = 10 • Health & Social Work = 11 • Pupil / Student = 12 • Others = 13
(1)	(2)	(3)	(4)	(5)	(6)

<sup>1</sup> For all persons involved in fisheries, also endeavor to answer questions in Section 4.2 below.

2.2.1 Education

ID No.	Name	What is the highest level (Name) completed? <ul style="list-style-type: none"> <li>• No schooling = 1</li> <li>• P1 - P4 = 2</li> <li>• P5 - P7 = 3</li> <li>• Junior 1 - 3 = 4</li> <li>• S1 - S3 = 5</li> <li>• S 4 = 6</li> <li>• A-Level = 7</li> <li>• Tertiary = 8</li> </ul>	Can (name), read and write in any language (those aged 10 years and above)? <ul style="list-style-type: none"> <li>• Read only = 1</li> <li>• Read and write = 2</li> <li>• Neither = 3</li> </ul>	
			English	Other
<b>(1)</b>	<b>(2)</b>	<b>(3)</b>	<b>(4)</b>	<b>(5)</b>

2.2.2 (a) How far is the nearest primary school? (..... Km) OR

2.2.2 (b) In case the school is on another Island, how long does it take to reach the primary school?  
( ... .. hours .... .. Minutes)

2.2.3 (a) How far is nearest functional adult literacy (FAL) class? (..... Km) OR

2.2.3 (b) In case the FAL class is on another Island, how long does it take to reach the class?  
( ... .. hours .... .. Minutes)

2.2.4 How many children in this household are attending PRIMARY SCHOOL? .....

2.2.5 In the last 30 days has any of the children missed attending school? Please tick (v):

- Yes = 1
- No = 2

2.2.6 If "yes" on question 2.2.5 above, what are the major REASONS for not going to school? Please tick (v):

- Scholastic materials = 1
- Household chores = 2
- Sickness = 3
- Monthly period for girls = 4
- Lack of interest = 5
- Any other (specify) = 6

2.2.7 What is your view on the quality of education the children are receiving at their school(s)?

.....  
 .....

2.2.8 *If NEVER went to school, why? Please clearly tick (v) as the respondent cites the reasons.*

- Disabled = 1
- Orphaned = 2
- Parental Inability = 3
- Discrimination / parent decision = 4
- Have to work with income generating activities = 5
- Lack of interest = 6
- Any other = 7

2.2.9 *If dropped out of school, why? Please tick (v):*

- Pregnancy = 1
- Orphaned = 2
- High school fees and/or school charges = 3
- Scholastic materials = 4
- Marriage = 5
- Any other = 6

### **3. Health**

**3.1(a) What is the distance (in Km) to the nearest government health facility where family members can get medical care? (..... Km) OR**

**3.1(b) In case the nearest government health facility is on another Island, how long does it take to reach that facility? ( ... .. hours .... .. Minutes)**

**3.2 What type of facility is it? Please tick (v).**

- None known = 1
- Health Centre (HC) II = 2
- Health Centre (HC) III = 3
- Health Centre (HC) IV = 4
- Hospital = 5

### 3.3 Health Service Encounter Experience (in the last 12 months)

List the people who fell sick in the last one (1) month (Use ID No.)	Type Illness - related to waterborne diseases / sanitation / hygiene:  • Malaria = 1, • Diarrhoea = 2 • Dysentery = 3 • Intestinal worms = 4 • Other = 5	Did you seek treatment?  • Yes = 1 • No = 2	If yes, where did you seek treatment?  • Traditional healer = 1 • HC II = 2 • HC III = 3 • HC IV = 4 • Hospital = 5 • Private facility = 6 • HOMAPAK = 7 • Self medication = 8 • Community Health Worker = 9	Were you told the name of your illness or your test results?  • Yes = 1 • No = 2	Were the prescribed drugs available?  • None = 1 • Some = 2 • All = 3	Was the patient treated?  • Yes = 1 • No = 2	Did the symptoms disappear?  • Yes = 1 • No = 2	IF NO [to Column (8) OR (9)], was the patient referred to another health unit?  • Yes = 1 • No = 2
(1)	(2)	(3)	(4)	(5)	(6)			

### 3.4 What is your view on the quality of health services provided by the nearest Government Health Unit?

.....

.....

#### **4. Income, Expenditure, Assets and welfare**

##### **4.1 What is the major source of income for this household? Please tick (v).**

- Salary and wages = 1
- Metal works / carpentry mechanic = 2
- Fishing sector = 3
- Trading = 4
- Transport = 5
- Food processing = 6
- Brewing beer/ selling = 7
- Farming = 8
- Others specify = 9

##### **4.2 If it is fishing sector, in what fishing activities is the household involved? Please tick (v).**

- Fishing (fishes and sells fresh fish)= 1
- Fish processing (fishes or buys fish, processes through sun drying or smoking) before selling = 2
- Fish trader / monger (buys and sells fish whether fresh or processed) = 3
- Fishing Gear repairer / boat maker = 4
- Fish Transportation = 5
- Others (Specify) = 6

##### *4.2.1 Infrastructure*

##### *4.2.1.1 Does the landing site have any of the following - Please tick (v):*

- Landing jetty = 1
- Weighing slab / shade / Fish Transfer Floating Barge = 2
- Ice or ice storage = 3
- Drainage = 4
- Portable water = 5
- Hand wash = 6
- Soap = 7
- Protective gear = 8
- Drying racks = 9
- Smoking kilns = 10
- Drying fish store = 11

#### 4.2.1.2 Access to Facilities and Amenities

Issue	Response		
1.) Do you have access to fish storage facilities? Please tick (✓).	Yes (...)		No (...)
2.) List the storage facilities available:	<ul style="list-style-type: none"> <li>•</li> <li>•</li> <li>•</li> <li>•</li> </ul>		
3.) How far is the nearest storage facility? OR How long does it take to reach the nearest storage facility?	<ul style="list-style-type: none"> <li>• ... .. (Km)</li> </ul> OR <ul style="list-style-type: none"> <li>• ... .. Hours ... .. Minutes</li> </ul>		
4.) How do you preserve fish?			
5.) Do you have access to ice? Please tick (✓).	Yes (...)		No (...)
6.) How often do you have access to ice in a week?	<ul style="list-style-type: none"> <li>•</li> </ul>		
7.) How far is the nearest source of ice? OR How long does it take to reach the nearest source of ice?	<ul style="list-style-type: none"> <li>• ... .. (Km)</li> </ul> OR <ul style="list-style-type: none"> <li>• ... .. Hours ... .. Minutes</li> </ul>		
8.) Do you have access to fish processing facilities?	Yes (...)		No (...)
9.) What fish processing facilities are available to you? Please tick (✓).	<ul style="list-style-type: none"> <li>• Chilling (ice, ice flakes Chillers)</li> <li>• Fish freezing (Freezers)</li> <li>• Fish smoking (Smoking Kilns)</li> <li>• Salt drying (Drying racks)</li> <li>• Sun drying racks (Drying racks)</li> </ul>		
10.) How far are the nearest fish handling and processing facilities to your landing? OR How long does it take to reach the nearest fish handling and processing facilities to your landing?	<ul style="list-style-type: none"> <li>• ... .. (Km)</li> </ul> OR <ul style="list-style-type: none"> <li>• ... .. Hours ... .. Minutes</li> </ul>		
11.) Does your landing site have portable water?	Yes (...)		No (...)
12.) Is the water supply constant all the year? Please tick (✓). IF NO, how many months in a year do you have water?	Yes (...)		No (...)
			... .. Month(s)
13.) Does the landing site have sanitation facilities (i.e. latrine or toilet)?	Yes (...)		No (...)
14.) How is solid waste managed at the landing site? Please tick (✓).	Garbage bin or Pti (...)	Thrown in lake or nearby bush (...)	Unattended to (...)

#### 4.3 Has there been ANY IMPROVEMENT in household welfare since 2011? Please tick (✓).

(NB: Improved welfare may be reflected through: quantity of food purchased; quantity of food self produced; quantity and frequency of food bought at a restaurant; quantity of non-food items purchased; assets acquisition; education and literacy; increased household expenditure; increased household amenities; and reduced malnutrition / improved nutrition etc.)

- Yes = 1
- No = 2

4.3.1 IF YES (i.e. improved welfare), what could be the major reasons for the changes in the household welfare? Please write the reasons as given by the respondent. THEN skip Questions 4.3.2 and 4.3.3; and proceed to Question 4.4.

a)	
b)	
c)	
d)	

4.3.2 a) IF THERE HAS NOT been any improvement in the household welfare, does the household consider themselves now as poor as they were in 2011? Please tick (✓).

- Yes = 1
- No = 2

4.3.2 b) Use the scale in the table below to rate how the household gauges itself (i.e. at what level was the household in 2011 and where was it at end of 2017)

Periode	□ Levels (from poorest to Richest) □										
	0	1	2	3	4	5	6	7	8	9	10
2011											
2017											

4.3.3 In your view what are the THREE major causes of poverty in this household in order of priority? Please tick (✓).

- Lack of education = 1
- Social problem like over-drinking = 2
- High dependency level = 3
- Lack of credit = 4
- Diseases = 5
- Bad governance = 6
- Other specify = 7

#### 4.4 Savings

4.4.1 Do you save some of the income? Please tick (✓).

- Yes = 1
- No = 2

4.4.2 IF YES (to 4.4.1 above), what proportion (%) do you save? ... .. %

4.4.3 Where do you MAJORLY save your money? Please tick (✓).

- Bank = 1
- SACCO = 2
- Village Saving and Loans Scheme (VSLs) = 3

- Friends = 4
- Mobile Phone = 5
- Others (mention) = 6

4.4.4 IF NO, to the question 4.4.1 above, why is it so? Please tick (v):

- High household expenditures = 1
- Lack of sufficient income = 2
- Lack of financial institution = 3
- Other = 4

#### 4.5 Household Expenditure (Estimated to obtain an estimation of household expenses)

Main Expenditure Item	Relative Amount of Expenditures			
	Rough % of expenditure	Has the Expenditure Changed Since 2011?		
		More	Unchanged	Less
Food				
Fuel				
Health				
Education (tuition fees, text books, uniforms, school operation contribution, etc.)				

4.4.5 Where ELSE did you spend money?

.....  
 .....

#### 4.6 Household and Enterprise Assets. When you compare what the household possessed in 2011 and now, has this changed?

Assets	Status of Possessions / Assets Please tick (v):			Record Reasons for the Status
	More	Unchanged	Reduced	
<b>Household Assets</b>				
1.) Improved housing structures / building				
2.) Furniture (sofas, beds...)				
3.) Electronic household appliances / equipment (e.g. kettle, flat iron, TV, radio)				
4.) Vehicles (motor bike / car)				
5.) Bicycle				
<b>Livestock / Poultry</b>				
1.) Large livestock				
2.) Small Livestock				
3.) Poultry				

Assets	Status of Possessions / Assets Please tick (✓):			Record Reasons for the Status
	More	Unchanged	Reduced	
<b>Agriculture and Fishing</b>				
1.) Land				
2.) Agricultural tools (e.g. hoes, plough, pangas, wheel barrows)				
3.) Boats				
4.) Fishing gear (nets, hooks)				
5.) Boat engine				

4.6.1 How many mobile telephones are there in the household? ... ..

## 5. Water, Sanitation, and Housing Cconditions

### 5.1 Water

#### 5.1.1 What is the household's main source of water?

Sr.	Main Use of Water	Type of Source of Water: Piped / Gravity Flow Scheme = 1 Borehole = 2 Protected Spring = 3 Unprotected springs = 4 Protected hand dug wells = 5 Unprotected hand dug wells = 6 Rainwater = 7 River = 8 Lake = 9 Others = 10	Time taken to and from source (Minutes)	Amount (litres) per day	How is the water quality? Good = 1 Average = 2 Bad = 3	How do you treat water? Boiling = 1 Chemicals = 2 Others = 3	Do you have water all the year (number of months)?
	(1)	(2)	(3)	(4)	(6)	(7)	(8)
1)	Main source for drinking water						
2)	Secondary Source drinking water						

#### 5.1.2 For sources that take less than 30 minutes, what do the household members do with saved time?

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#### 5.1.3 What is the main reason for USING UNSAFE water sources (i.e. sources 4, 6, 8, 9) for drinking? Please tick (✓):

- Protected source not available = 1
- Long distance = 2
- Unreliable = 3
- Bad Taste = 4

- Cost = 5
- Queuing Time = 6
- Used sources are ok = 7
- Others = 8

5.1.4 Does your household pay for the water? Please tick (v):

- Yes = 1
- No = 2

5.1.4.1 How much do you pay per month (in UGX)?

5.1.4.2 How do you rate the costs? Please tick (v):

- Too high = 1
- Affordable = 2
- Low = 3

5.1.4.3 Why do you have to pay for water? Please tick (v):

- Government rules = 1
- NGO rules = 2
- Maintenance = 3
- Committees / Caretakers allowance = 4
- Others (Mention) = 5: ... ..

5.1.5 Is the water source / water point satisfactorily maintained? Please tick (v):

- Yes = 1
- No = 2

## 5.2 Sanitation

5.2.1 What type of latrine do you use? Please tick (v):

- Private latrine or toilet = 1
- Public latrine or toilet = 2
- No latrine (bush or lake) = 3

IF response to 5.2.1 is OPTION 1, then ASK Questions 5.2.2 and 5.2.3. OTHERWISE GO TO question 5.2.4.

5.2.2 What type of latrine is it at household (inspect latrine)? Please tick (v):

- Simple Pit latrine = 1
- VIP latrine = 2
- Hole in ground = 3

5.2.3 Is there a hand washing facility (with WATER and SOAP) at the household latrine? Please tick (✓):

- Yes = 1
- No = 2

5.2.4 What are the most important hygiene behaviours (list as given by respondent) to retain a healthy family? The responses should not be read to the respondent. Let the respondent mention and you TICK (✓) the responses.

- Latrine use = 1
- Hand-washing = 2
- Using safe and clean water = 3
- Cooking food = 4
- Covering cooked food = 5
- Other (Mention) .....

5.2.5 If the recommended hygiene practices ARE NOT implemented, what will then happen?

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5.2.6 Who sensitises the household on hygiene and sanitation? Please tick (✓):

- Village Council = 1
- Parish Chief = 2
- Water committee = 3
- NGO = 4
- District = 5
- CDO = 6
- Health worker = 7
- Other = 8

5.2.7 Has there been any sanitation and hygiene awareness raising meetings in this village in the last six months? Please tick (✓).

- Yes = 1
- No = 2

5.2.8 Do you apply anything you heard during the meetings? Please tick (✓).

- Yes = 1
- No = 2
- Not sure = 3

5.2.9 IF YES, what exactly?

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**Observations on public latrines (by Enumerator, National Consultant, and/or Key Expert 2)**

5.2.10 Please ascertain the cleanliness of latrine / Sanitation facility. Please tick (✓):

- Clean = 1
- Satisfactory = 2
- Dirty = 3

5.2.11 Is there a hand washing facility at the PUBLIC latrine / Sanitation facility? Please tick (✓):

- Water and soap = 1
- Only water = 2
- Neither water nor soap = 3

**5.3 Housing (observations by the enumerator)**

5.3.1 Type of Material Used in House Construction (enumerator to fill in after observation)

Roof	Walls	Floor
Thatched = 1 Iron Sheets = 2 Plastic Tarp = 3 Other = 4	Grass = 1 Mud and Wattle = 2 Sunburnt bricks = 3 Burnt bricks = 4 Burnt bricks with cement mortar = 5 Timber = 6 Cement blocks = 7 Other = 8	Earth = 1 Earth with dung = 2 Cement screed = 3 Brick = 4 Concrete = 5 Other = 6
<b>(1)</b>	<b>(2)</b>	<b>(3)</b>

6. **Development Interventions and Sustainability**

6.1 **Development Interventions Undertaken and Benefits (since 2011)**

Development Intervention (since 2011)	Organisation(s) CG / KDLG = 1 KDDP / ICEIDA = 2 Other DPs (e.g. UNICEF, USAID = 3 CBOs / NGOs = 4 I DO NOT know = 5	Did village community benefit? Tick (v)		IF YES:		Did any members of this household participate in:	
		Yes = 1	No = 2	Who benefitted? • Men = 1 • Women = 2 • Boys = 3 • Girls = 4 • OVC • Elderly • PDWs • PLWHA	How?	Planning Meetings?	Implementation of the programmes / activities?
						Yes = 1 No = 2	Yes = 1 No = 2
1.) Education							
2.) Sanitation and hygiene							
3.) Fisheries / trade							
4.) Health							
5.) Others (Specify below)							
6.)							
7.)							
8.)							
9.)							
10.)							
11.)							

## 6.2 SUSTAINABILITY

6.2.1 During the past seven years (since 2011) has there been any improvements in the provision of public facilities and services here? Please tick (✓) in the table below.

Service	Response			The enumerator should record appropriate remarks by the respondent
	Yes = 1	No = 2	Not Sure = 3	
1.) Education				
2.) Water				
3.) Sanitation				
4.) Health				
5.) Fisheries / trade				
6.) Others (specify below)				
7.)				
8.)				
9.)				
10.)				
11.)				

**Ω The End Ω**

**THANK YOU SO MUCH FOR TAKING TIME TO ANSWER THE QUESTIONS.  
YOUR RESPONSES HAVE PROVIDED VERY USEFUL FEEDBACK.**

# KALANGALA DISTRICT LOCAL GOVERNMENT

## END OF PROGRAMME EVALUATION KEY INTERVIEW and FOCUS GROUP INTERVIEW GUIDE

*Final*  
*(Version 3 April 2018)*

CONDUCTED BY GOPA CONSULTANTS  
WITH SUPPORT FROM ICEIDA

Date of interview: .....

Location of Interview (District/ Sub-county/ Village/ Landing site/ School/ Health Centre):

.....  
.....  
.....

Name and position of persons interviewed: .....

Name of interviewer:.....

## **Possible introduction**

My name is ..... I am currently working on the final evaluation of the Kalangala District Development Program (KDDP), implemented by the District Authorities and funded by Iceland Development Cooperation Agency (ICEIDA).

The overall objective of the programme (as you probably know) is contributing to sustainable livelihoods and equitable social development for people in Kalangala District. The programme has been implemented in the sectors of fisheries, water and sanitation, education, and capacity building of the District Local Government Authorities. The aim of the evaluation is to assess programme performance with its effects and impacts, and how it has addressed the felt **needs and priorities** of the people. In this respect it is important also to **document lessons** that can be used to improve the planning of similar programmes in future.

We are now interviewing individuals and groups of stakeholders who have been directly involved in the implementation and/or are beneficiaries of the development interventions.

The information you provide will be treated with utmost confidentiality and aggregated with the responses from others to establish a common trend in the programme. Information given cannot be traced back to individuals.

---

### To the Interviewer/Evaluation Team (ET):

Note 1: Please remember that not all questions are relevant for everybody, so be selective!!! The questions in some cases only indicate the issues to be discussed and should not be presented directly as “questions”).

Note 2: All the physical assets provided under KDDP during the period 2006-15, are listed in Annex 5 in the Completion Report. This list must be consulted when visiting the various locations, and the assets should be inspected as far as time and opportunity allows. When assets show lack of normal operation and maintenance (O&M), or are broken down / do not function properly / need repair, the reason for the prevalent situation must be looked into.

Use the backside of the paper for longer answers.

**1. Health Centres**

1.1 As the health component in the programme ended in 2010, the main issue is to detect the trend in community health since then. We should ask for data / statistics showing reported cases of e.g. Malaria, Diarrhoea, Dysentery, Intestinal worms, Other, - meaning especially the diseases connected to water, sanitation and hygiene. (The statistics will also be compared to the statistics kept with the District authorities).

1.2 If significant changes, ask what the health personnel believe that reasons could be.

.....

1.3 In general, are there more consultations today than some 7 years back (since 2010)?

.....

IF YES, what could be the reasons?

.....

1.4 Have the cases where the patients are not treated / cured in this HC increased / reduced, and patients are referred to other health unit?

.....

.....

1.5 Any increase in verified cases of HIV/AIDS?

.....

.....

1.6 Is there adequate number of staff, properly educated and trained at the health centre? Has staff been added and trained since 2010?

.....

.....

1.7 From the list of infrastructure and equipment/materials provided by the project (found in Annex 5 in the Completion Report), **ask the staff** if all are in good operational condition and **visibly inspect and verify** as much as possible. If O&M seems to be lacking and there are needs for repair, what are the reasons for these shortcomings (financial, human capacity, etc.).

.....

.....

1.8 To the interviewer:

In case **WASH** infrastructure was funded by the project, **visibly inspect and verify** the operational condition of latrines or toilets and domestic and process water supply systems as much as possible. Especially inspect the cleanliness of the latrines and the functioning / accessibility of the water supply.

.....

.....

## 2. Schools

2.1 The Education and Sports component ended in 2015, but support from ICEIDA to the sector continued through the consolidation phase (2015-19). The main issue is to detect the trend of key indicators in the school from MTR (in 2010) until now. Such indicators are mainly with gender ratio / gender parity index for all:

- Pass rates in national primary leaving examinations (PLE)
- Gross enrolment rate (GER)
- Retention rate / survival rate in the school (survival rate to grade 5 and gender parity index.)
- Survival rate to grade 7 and gender parity index.
- Completion rate for boys and girls.
- Access to basic school infrastructure and facilities, including provision of learning and teaching materials.
- Pupil to textbook ratio.
- Pupil to teacher ratio

[Ask for reasons why the trend is pointing up or down!! The statistics will also be compared to the statistics kept with the District Authorities].

2.2 Are all teacher positions filled with qualified people?

.....

2.3 From the list of infrastructure and equipment/materials provided by the project (found in Annex 5 in the Completion Report), **ask the staff** if all are in good operational condition and **visibly inspect and verify** as much as possible.

.....

a) If O&M seems to be lacking and there are needs for repair, what are the reasons for these shortcomings (financial, human capacity, etc.).

.....

b) If pupils are involved in the O&M of WASH infrastructure (e.g. cleaning of latrines, providing water for hand washing, etc.), ask some of the pupils how this system works, and if they see the usefulness of this (questions to be asked as the interview proceeds). If there is soap available for hand washing, ask if the soap is always available (and not only put there because the evaluation team is coming), etc.

.....

c) Ask the teachers and the adolescent girls (separately, the latter may be with a female teacher present) about attendance in school when the girls have the menstrual periods. Has it increased since 2010 (or since they started in school)?

.....

2.4 To the interviewer:

In case **WASH** infrastructure was funded by the project, **visibly inspect and verify** the operational condition of latrines or toilets and domestic and process water supply systems as much as possible. Especially inspect the cleanliness of the latrines and the functioning / accessibility of the water supply.

.....

**3. Fish Management Units (BMU / Fishery Landing Sites)**

3.1 Has the population on and around the landing site increased / reduced the last 3 years?

.....

3.2 Is the BMU still operational / functional – officially or unofficially? Meeting regularly?

.....

3.3 Do all the Fish Handling Sites (FHS) with improved infrastructure work satisfactorily?

.....

In case NOT - what does not work and why?

.....

.....

3.4 Who are supporting the FHS at present and what sort of support is it?

.....

3.5 Has the **quality of the fish** improved since 2010, and even more from 2014, till today? (Ask to see Fish Health Certificates and other records).

.....

3.6 Has there been any change in **post-harvest loss** from the in 2014 till today? (Ask to see the ledger book where such is recorded).

.....

3.7 Has there been any changes in **sales of fish** the last since 2014?

.....

IF YES, how much / percentage?

.....

3.8 a) Does the water supply systems for fish processing and domestic use function properly?

.....

b) Who are operating and maintaining these and how often?

.....

c) Any major repairs undertaken/outstanding?

.....

3.9 a) Are the latrines in regular use?

.....

b) Who clean the latrines?

.....

c) Do people still use open defecation (land or lake)?

.....

3.10 a) Has there been a reduction of water / sanitation-related diseases since 2010?

.....

b) What about since 2014?

.....

3.11 Has there been any capacity building or refreshment training at the landing site since the project ended in 2015?

.....

3.12 Has the illegal fishing been reduced the last years and especially since the army started to control?

.....

.....

3.13 To the interviewer:

From the list of infrastructure and materials provided by the project (found in Annex 5 in the Completion Report), **visibly inspect and verify** the operational condition of latrines or toilets and domestic and process water supply systems as much as possible. Especially inspect the cleanliness of the latrines and the functioning of the water supply.

Note: If there are army officers on site controlling the illegal fishing, it would be useful to interview them, if allowed, especially related to the number of reported / caught illegal fishermen, confiscated boats and illegal fishing gear, etc.

THANK YOU SO MUCH FOR TAKING TIME TO ANSWER THE QUESTIONS. YOUR RESPONSES HAVE PROVIDED VERY USEFUL FEEDBACK.

# General Issues

*(Largely taken from the Consultant's Terms of Reference.*

*Most of these general questions will be discussed with the staff at the District Administration only, and/or answer will be taken from/cross-checked with the written reports.*

*The International Key Expert will in general undertake such interviews.)*

## 1. PROGRAMME RELEVANCE

1.1 Did the interventions address the critical needs and priorities of the District, Sub- County and Communities?

1.2 Did the programme address important issues in relation to priorities in the respective district and LLGs development plans?

1.3 Which assistance or services from the programme have you been most satisfied with, and why?

1.4 Which assistance or services from the programme are you least satisfied with and why?

## 2. PROGRAMME EFFECTIVENESS

(Ref. also to outputs/ results listed in the Completion Report).

2.1 To what degree have the planned immediate results / **outputs** been delivered in accordance with the plans, at the appropriate quality and quantity and at planned cost?

2.2 Have the intended/expected **effects / outcomes**, following some time after programme ended, been achieved or are they likely to be achieved– and to what degree?

2.3 To what extent has the programme contributed to:

- a) Efficient and effective leadership in the district together with **quality administration and management of public services**, along with strong private sector and civil society organisations?
- b) Improved **quality fisheries production and marketing** in the Kalangala district.
- c) Equitable access to **quality education** in Kalangala district.
- d) Equitable access for the citizens to quality **health services** at district level (2006-2010).
- e) Improved exploitation of Kalangala District **tourism potential** (2010-2013).

ASK FOR STATISTICS (preferably in advance of meeting).

2.4 What are the **main challenges** you have met during implementation of the programme?

## 3. PROGRAMME EFFICIENCY

3.1 Was the programme approach and design the most **cost-effective way** of spending the funds in order to achieve the planned results? Are there other ways as good or better? (ET's assessment).

3.2 How has the sharing of responsibility and accountability been between the various key partners and stakeholders during implementation?

3.3 To what degree has the use of inputs in implementation been efficient (money, manpower, equipment)? (ET's assessment).

- a) Construction and procurement of goods and equipment
- b) Arrangement of training
- c) Monitoring and Evaluation (related to the M&E plans)

3.4 a) How did the following organs function and perform during the implementation of the project:

- b) "Project Supervisory Committees",
- d) "Project Management Team"
- e) "Project Implementation Team"
- f) Was there a clear line of responsibilities?

3.5 Do you think the District Council had the absorption capacity to effectively manage and administer the funding and activities?

3.6 a) How transparent were the financial management aspects of the programme? (ET's assessment. Describe the system).

b) How were the procurement procedures?

3.7 Was there community participation in the planning and implementation process?

3.8 What lessons can be learned from the efficiency aspects of this programme?

#### **4. PROGRAMME IMPACT**

4.1 Has the programme and its implementation had an impact, including and **beyond the defined / planned results**, on benefitting communities / schools / health services / fishing sector activities?

4.2 Do you think that the programme has **changed the individual lives of the beneficiaries to the better** (improved livelihoods, standard of living, etc.), measurable and perceived (including indicators from the key sectors of health, education, fisheries and water and sanitation, as defined in the respective project documents and government strategies in Uganda)?

[Ask for concrete examples for various groups: women, men, elderly and people with disabilities, the chronically ill, children and any other beneficiary category]

4.3 What have been the major changes in the wider community?

4.4 Are there any un-intended positive changes that the programme has achieved?

4.5 Are there any negative changes?

4.6 What challenges have you faced during the programme implementation?

4.7 How have you addressed the above challenges?

## 5. PROGRAMME SUSTAINABILITY

- 5.1 Has the **capacity of the district local governments improved** in terms of delivering basic services to the population, including health, water and sanitation and education?
- 5.2 Is it likely that the **results can be maintained and operated** for the benefit of the population without further external programme support? (This should in particular address matters concerning operations and maintenance of infrastructure.) **IF NOT**, what further support will be needed?
- 5.3 Has the contribution from the programme been within limits of the **absorption capacity** of the district?
- 5.4 To what extent has **capacity building** of the district governments been sustainable, for instance with regard to retention of qualified/trained district staff, and has it contributed to improved sustainability of project results?
- 5.5 What factors influence or challenge sustainability of the programme?
- 5.6 What will motivate beneficiaries to continue implementing the programme -activities and outputs?
- 5.7 Was any “**Exit Strategy**” developed (to meet the challenges when the funding from Iceland phased out)? (If yes, the interviewer must ask to see it).
- 5.8 Any other external financial support in the district since the end of the programme?

## 6. CROSSCUTTING ISSUES

### 6.1 GENDER:

- a) Have both genders benefited from the programmes on equal terms?
- b) To what extent did the programme create **equal opportunities for men and women**; and boys and girls to participate in implementation?
- c) Have the programmes contributed to increased **gender equality** in the longer term?
- d) Has the programme promoted the protection of vulnerable populations – especially children and women – from exploitation and abuse?
- e) Has the programme addressed the needs of people with disabilities?

### 6.2 ENVIRONMENT:

- a) Have the programmes caused any significant environmental impact, positive or negative? Examples?
- b) Were proper environmental considerations followed during implementation of activities where applicable?
- c) To what extent have the programmes encouraged improved and sustainable use and management of natural resources here also continuing after project implementation (land, forest, wetlands, etc.)?

## **7. LESSONS LEARNED**

- 7.1 How were program assessment and design processes conducted?
- 7.2 Who participated?
- 7.3 To what extent did the partners, stakeholders and communities participate in the programme design and implementation strategies?
- 7.4. To what extent did the programme integrate / advocate strategies to address the root causes of poor sanitation and hygiene among the fishing communities?
- 7.5 What policy implications can be drawn from this Program performance?
- 7.6 To what extent did the program strategy outline clear roles and responsibilities of key partners (especially District Health and Education sector)?
- 7.7 To what extent were communities, government and other partners involved in the planning, implementation and accountability of Project core activities?
- 7.8 a) What can be learned from the program's M&E system?
  - b) Which tools were used?
  - c) Who was involved in setting and implementing the M&E system?
  - d) What role did communities and other partners (e.g. government / CBOs) play?
- 7.9 How was information generated by the program M&E system used in decision-making?
- 7.10 What were its major strengths?
- 7.11 What were its weaknesses?

## Annex 6: Programme outputs

### Outputs tables from the period 2006-2010 and 2011-2015 taken from the Programme Completion report (June 2017)

#### Project Performance against Planned Outputs for Period 2006-2010

##### Local Administration Sector Outputs

Narrative Summary	Output Indicators	Target (2006-2010)	Achievement (2006-2010)	Effectiveness (%)
<b>Immediate Objective: To achieve efficient and effective leadership, administration and management of public, civil society and private agencies in Kalangala District by 2015</b>				
Output 1: District and Lower LG Planning/ budgeting capacity strengthened	a) Number of district facilitators trained	28	69	246
	b) Number sub-county meetings held	35	21	60
	c) Number of DDP rolled (KDDP supported only)	5	4	80
	d) Number of annual BFPs produced (KDDP supported)	5	5	100
	e) Number of annual budgets and work plans produced (KDDP supported)	5	4	80
	f) Number of LLG budget produced annually (KDDP Supported)	35	21	60
Output 2: Functional District Data Bank established	a) Number of data focal point staff trained in LoGICS	73	71	97
	b) Number of LoGICS data collection tools produced	300	258	86
	c) Number of District Statistical Abstracts produced	5	1	20
Output 3: Local Revenue Enhancement Capacity built	a) Number of revenue enhancement plans developed	1	1	100
	b) Number of staff trained in revenue management	50	25	50
Output 4: Staff Capacity Building and Staff Development	a) Number of staff sponsored on short courses	12	13	108
	b) Number of 45-participant workshops in generic skills held	6	3	50
	c) Number of comprehensive CB Plans produced	1	1	100
	e) Number of district training polices formulated	1	0	0
Output 5: District Administration, Monitoring and Evaluation Capacity strengthened	a) Number of quarterly joint monitoring missions carried out	8	5	63
	b) Number of computers sets procured	13	10	77
	c) Number of Engines and Boats Procured	4	2	50
	d) Number of Motor Cycles Procured	5	4	80
	e) Number of Motor Vehicles procured	2	2	100

Narrative Summary	Output Indicators	Target (2006-2010)	Achievement (2006-2010)	Effectiveness (%)
<b>Immediate Objective: To achieve efficient and effective leadership, administration and management of public, civil society and private agencies in Kalangala District by 2015</b>				
	f) Number of Digital Camera Procured	2	2	100
	g) Number of Quarterly Audits executed	9	7	78
Output 6: Office Infrastructure and Facilities put in place	a) Number of District Administration Block constructed	1	0	0
	b) Number of New Sub-county Office Blocks constructed	2	1	50
	c) Number of Sub-county Office Blocks completed	2	1	50
	d) Number of Transient staff hostels constructed	2	0	0
Output 7: Private sector and NGOs in the district supported	a) Number of grant rounds awarded to civil society organisations (CSOs)	3	3	100
Output 8: Development Plans for Model Villages Developed	a) Number of customized planning manuals produced	250	250	100
	b) Number of villages mobilisation meetings organized	5	5	100
	c) Number of village community facilitators trained	48	60	125
	d) Number of baseline surveys/villages profiles done	5	5	100
	g) Number of model village development plans produced	5	2	40
Output 9: Village Development Master Plans (Physical Plans) Developed	a) Number of model landing sites with secured land	5	5	100
	b) Number of topographical surveys and maps produced	5	5	100
	d) Number of physical plans for model villages developed	5	2	40

## Fisheries and Water and Sanitation Outputs

Narrative Summary	Output Indicators	Target (2006-2010)	Achievement (2006-2010)	Effectiveness (%)
<b>Immediate Objective: To achieve sustainable quality fisheries production and marketing in Kalangala District, by 2015.</b>				
Output 1: Capacity Building (fish quality)	a) Number of staff training workshops held	3	1	33
	b) Number of staff trained in fish quality assurance (short course)	12	11	92
	c) Number of community workshops held	15	14	93
Output 2: Fisheries office capacity strengthened	a) Number of computers sets procured	2	2	100
	b) Number of engines and boats procured	5	5	100
	c) Number of motor cycles procured	4	4	100
	d) Number of Filling Cabinets procured and delivered	2	2	100
	c) Number of office chairs/tables procured and delivered	2	2	100
Output 3: Infrastructure and facilities	a) Number of generic designs and plans for 5 landing sites produced	2	2	100
	b) Number of fish handling facilities constructed on the main island	2	0	0
	c) Number of fish facilities constructed on other islands (Kyamuswa County)	3	2	67
	d) Number of fishing villages planted with trees and grass (greening)	5	2	40
	e) Number of Environmental Impact Assessment (EIA) done in 5 villages	5	2	40
Output 4: Capacity Building for water and sanitation (fishing villages)	a) Number of community sensitisation meetings held	5	-	-
	b) Number of water department staff trained ( short courses)	2	1	50
Output 5: Water and sanitation facilities development (fishing villages)	a) Number of generic designs and plans for 3 fishing villages produced	1	1	100
	b) Number of piped water supply systems in 3 villages constructed	3	2	67
	c) Number of Eco-friendly pit latrines constructed in 5 villages	15	6	40
	d) Number of compost and refuse sites in 5 villages constructed	5	2	40

## Education and Sports Sector Outputs

Narrative Summary	Output Indicators	Target (2006-2010)	Achievement (2006-2010)	Effectiveness (%)
<b>Immediate Objective: To increase equitable access to quality education by 2015</b>				
Output 1: Capacity building training for education officers and primary school teachers, and school management committees	a) Number of staff trained in management and administration	40	29	73
	b) Number of staff trained in curriculum interpretation	160	79	49
	c) Number of staff trained in multi grade teaching methods	80	88	110
	d) Number of staff trained in interventions for special needs	121	62	51
	e) Number of staff trained on HIV/AIDS sensitization skills	120	37	31
	f) Number of staff trained in gender analysis	102	62	61
	g) Number of school management committee members trained in leadership	23	23	100
	h) Number of staff trained through short skills courses	5	3	60
Output 2: Sensitisation meetings	a) Number of parents/guardian sensitisation meetings done	103	43	42
	b) Number of child rights sensitisation meetings conducted	75	11	15
Output 3: Building office capacity of education department through retooling	a) Number of boats and engines and procured	2	2	100
	b) Number of motorcycles for inspectors procured	3	3	100
	c) Number of computer and printer (sets) procured for education sector	1	1	100
Output 4: School feeding infrastructure constructed	Number of School kitchens (equipped with cookery kits) constructed	19	3	16
Output 5: Co-curricular activities (Games & Sports promoted in all schools)	Number of sports kits (e.g. balls) procured	46	46	100
	Number of sports competitions conducted	7	7	100
	Numbers of sports teachers trained	220	146	66
Output 6: Co-curricular activities (Performing Art) promoted	Number of teachers & leading learners trained	28	28	100
	Number of competitions in performing arts (MDD) conducted	4	3	75
	Number of equipment & instruments kits procured	98	98	100

Narrative Summary	Output Indicators	Target (2006-2010)	Achievement (2006-2010)	Effectiveness (%)
<b>Immediate Objective: To increase equitable access to quality education by 2015</b>				
Output 7: Continuous learners assessment conducted on a quarterly basis	Number of assessment stationary kits (examinations) done	228	228	100
	Number of cyclostyling machine procured	1	1	100
Output 8: Primary School dormitories constructed	Number of primary schools with completed dormitories (two blocks per school of 40 boys and 40 girls)	3	3	100

## Health Sector Outputs

Narrative Summary	Output Indicators	5 Yr. Target	Achievement (2006-2010)	Effectiveness (%)
<b>Immediate Objective: To increase equitable access to quality health services by 2015</b>				
Output 1: Health care delivery outreaches conducted in hard to reach areas (integrated health outreaches to villages and ART outreaches to Health Centre IIIs)	a) Number of quarterly integrated outreaches carried out	360	16	4
	b) Number of monthly ART outreaches to every HC III carried out	280	167	60
	c) Number of boats and outboard engines procured	5	5	100
Output 2: School Health Support	a) Number of school visits conducted by Health Centre Ivs & Health Centres IIIs	246	141	57
Output 3: Capacity building trainings conducted	a) Number of trainings for staff in gender mainstreaming and management of gender based violence.	1	0	0
	b) Number of training for staff in integrated management childhood illnesses	4	4	100
	c) Number of trainings of Midwives in Anti-Natal Care (ANC)	1	0	0
	d) Number of HC III / HC IV staff trained in HIV/AIDS care.	24	0	0
	e) Number of Health Workers trained in T.B. treatment with CB / DOTS	1	1	100
	f) Number of Health Volunteers given basic training	92	46	50
	g) Number of training for health volunteers in IMCI conducted	9	0	0
	h) Number of scholarships for Medical Students made	2	2	100
	i) Number of scholarships to attract clinical officers given	5	3	60
Output 4: Health facilities equipped and maintained	a) Number of health unit infrastructure maintained	49	23	47
	b) Number of equipment and vehicles including boats and engines maintained	5	3	60
Output 5: Health Unit Management Committees (HUMC) strengthened	a) Number HUMCs oriented in their roles	34	11	32
	b) Number of quarterl HUMC meetings held per each HC annually	188	57	30
Output 6: Public-Private Partnerships	a) Number of private sector staff trained	20	0	0
	b) Number of annual meetings with all private health providers held	2	0	0

Narrative Summary		Output Indicators	5 Yr. Target	Achievement (2006-2010)	Effectiveness (%)
<b>Immediate Objective: To increase equitable access to quality health services by 2015</b>					
Output 7: Health Facilities upgraded	a) Number of solar power facilities installed at Health Centres III and IV	7	6	86	
	b) Number of water tanks at Health Centres installed	5	5	100	
	c) Number of mortuary built (Kalangala HCIV)	1	1	100	
	d) Number of office furniture for Health Centres procured and delivered	11	11	100	
	e) Number of telephone fixed lines for Health Centres procured and delivered	12	12	100	
Output 8: Health Planning strengthened	a) Number of management courses held for all in-charge of HC III and HC IV	1	0	0	
	b) Number of quarterly management meetings for in-charges at DHHO's office	12	8	67	
	c) Number of monthly radio shows on health issues conducted on Sundays	36	20	56	
Output 9: Health Management, Coordination and M&E strengthened	a) Number of motor vehicle procured and delivered	1	1	100	
	b) Number of motorcycles delivered	2	2	100	
	c) Number of boats and engines procured	1	1	100	
	d) Number of ambulance boat and engine procured	1	0	0	
	e) Number of staff protective wear procured and delivered	5	5	100	
Output 10: Health Management Information System (HMIS) strengthened	Number of training workshops on health data management (HMIS) held	1	1	100	

## Project Performance against Planned Outputs for Period 2011-2015

S/N	Detail	Target	Total Achieved	Percentage
<b>1.0</b>	<b>Local Administration Sector</b>			
<b>1.1.0</b>	<b>Functional Capacity for LG Harmonised Participatory Bottom-up Planning strengthened</b>			
1.1.1	Conducting Capacity building workshop for DTPC & STPC in bottom-up planning	140	140	100%
1.1.2	Conducting Capacity building workshop for PDC & VCF in bottom-up planning	451	451	100%
1.1.3	Production of Village Development Plans	368	92	100%
1.1.4	Production of Parish Development Plans	68 (17)	17	100%
1.1.5	Production of LLG Development Plans	28 (1)	1	100%
1.1.6	Holding District Budget Conferences	4	4	100%
1.1.7	Production of District BFP & DDP	4 (1)	1	100%
<b>1.2.0</b>	<b>Functional District Data Bank Established</b>			
1.2.1	Conducting capacity building workshop for data collection Units	60	60	100%
1.2.2	Facilitating Data Collection exercises	4	3	75%
1.2.3	Production of District Statistical Abstracts	4	4	100%
1.2.4	Development and update of the District Website	4	2	50%
1.2.5	Production of District Population Profile	1	1	100%
<b>1.3.0</b>	<b>Local Revenue Enhancement Capacity strengthened</b>			
1.3.1	Training staff in revenue data	37	37	100%
1.3.2	Conducting census of businesses and registration of revenue sources	1	1	100%
1.3.3	Developing the software and procuring the computer server and LAN for revenue data management	1	0	0%
1.3.4	Engaging a consultant to support the enacting ordinances to collect cess tax on oil palm produce; and landing site fees	1	0	0%
1.3.5	Tax education and local revenue mobilization	4	4	100%
1.3.6	Procurement of a Fibre Glass Boat for inspection on other islands	1	1	100%
<b>1.4.0</b>	<b>Capacity Building and Staff Development</b>			
1.4.1	Training of senior LG staff in project monitoring and evaluation (short courses)	24	12	50%
1.4.2	Generic skills training for LG staff (workshops)	240	240	100%
1.4.3	Generic skills training for District politicians (orientation and training in legislative skills)	36	36	100%
1.4.4	Generic skills training for LLG politicians (orientation and training in legislative skills)	144	144	100%
1.4.5	Consultancy and training staff in gender Planning and Budgeting	1	1	100%
1.4.6	Formulation of a District Gender Strategic Plan	1	0	0%
1.4.7	Scholarships for 2 medical students	2	2	100%
1.4.8	Scholarships for 2 Clinical Officers	2	2	100%

S/N	Detail	Target	Total Achieved	Percentage
<b>1.5.0</b>	<b>Monitoring &amp; Evaluation (M&amp;), and Internal Audit Strengthened</b>			
1.5.1	Monitoring & Evaluation Desk	16	16	100%
1.5.2	Multisectoral Monitoring missions	8	8	100%
1.5.3	Quarterly Internal Audits	18	18	100%
<b>1.6.0</b>	<b>Radio Programmes aired</b>			
1.6.1	Educational talks on programme implementation and cross-cutting issues (HIV/AIDS, Gender and environment)	208	158	76%
<b>1.7.0</b>	<b>CSOs and PSOs Supported</b>			
1.7.1	CSO Grants Rounds	4	4	100%
<b>2.0</b>	<b>Fisheries and Watsan</b>			
<b>2.1.0</b>	<b>Capacity building for Fish Quality</b>			
2.1.2	Procurement of a Fibre Glass Boat for inspection on other islands	3	3	100%
2.1.3	Procurement of Inspection kit for fish inspectors	5	5	100%
2.1.4	Procurement of Protective kits (Life Jackets/overcoats/gumboot)	77	100%	
2.1.5	Procurement of Weighing scales	5	5	100%
2.1.6	Short Courses (safety on lake)	12	12	100%
2.1.7	Conduction training workshops on HIV/AIDS and Gender	15	15	100%
<b>2.2.0</b>	<b>Conduction training workshops for handlers</b>	<b>10</b>	<b>10</b>	<b>100%</b>
2.2.1	Community Sensitisation workshops	24	24	100%
2.2.2	Furnishing of BMU offices	3	3	100%
<b>2.3.0</b>	<b>Capacity building for W&amp;S facilities</b>			
2.3.1	Community Sensitisation meetings on O&M	11	11	100%
2.3.2	Training of water and sanitation committees	48	48	100%
2.3.3	Training of local artisans/technicians	20	20	100%
2.3.4	Procurement of tool kits for the local artisans	3	3	100%
<b>2.4.0</b>	<b>Environmental monitoring and audit</b>			
2.4.1	Environment impact assessment and project Management letters	3	3	100%
2.4.2	Environmental monitoring/inspection	16	16	100%
2.4.3	Production and dissemination of State of District Environment (Profile)	4	3	75%
<b>3</b>	<b>Education and Sports</b>			
3.12	Midterm exams (4,500 pupils)	13	13	100%
3.13	End of term exams (4,500 pupils)	13	13	100%
<b>3.2.1</b>	<b>Functional academic board established</b>			
3.2.2	Training members in exam setting & moderation	24	24	100%
3.2.3	Periodic setting & moderation of exams	13	13	100%
<b>3.3.0</b>	<b>Instructional materials procured</b>			
3.3.1	Procurement of text books (batched for p/schools)	2	2	100%
<b>3.4.0</b>	<b>Co-curricular activities (sports and Games) supported</b>			
3.4.1	Sports kits for Primary schools	46	46	100%
3.4.2	Sports trophies (Set)	2	2	100%
3.4.3	Competitions	27	27	100%

S/N	Detail	Target	Total Achieved	Percentage
3.4.4	Training sports teachers	46	46	100%
<b>3.5.0</b>	<b>Co-curricular activities (Performing Arts) supported</b>			
3.5.1	Equipment and instrument kits	23	23	100%
3.5.2	Holding MDD competitions	20	20	100%
3.5.3	Training of teachers in MDD	92	92	100%
3.5.4	Training of district choir (qualified school only)	5	5	100%
<b>3.6.0</b>	<b>District capacity for school inspection strengthened</b>			
3.6.1	Fibre Glass Boat	1	1	100%
3.6.2	Regular school inspection	26	26	100%
<b>3.7.0</b>	<b>Communities (Parents &amp; Guardians) sensitized</b>			
3.7.1	Holding Parents/Guardians meetings (schools catchment)	46	46	100%
<b>3.8.0</b>	<b>Capacity Building Trainings</b>			
3.8.1	School governing bodies (3 per school)	70	70	100%
3.8.2	Special needs	1	1	100%
3.8.3	Training ECD Instructors and Caregivers	26	27	104%
3.8.4	Refresher course for teachers in new curriculum	60	90	150%
3.8.5	Training of teachers in effective school management	49	48	98%
<b>Secondary &amp; Vocational Education</b>				
<b>3.9.0</b>	<b>Learners assessed</b>			
3.9.1	Termly Learners assessment	13	13	100%
<b>3.10.0</b>	<b>Secondary schools equipped &amp; retooled</b>			
3.10.1	Procurement and installation solar systems power	3	3	100%
3.10.2	Equip Libraries with text books	6	6	100%
3.10.3	Equip Laboratories	6	6	100%
<b>4</b>	<b>Tourism Development</b>			
<b>4.1.0</b>	<b>District Tourism Strategic Plan Developed</b>			
4.1.1	Engaging Consultant to facilitate the formulation of the strategy	1	1	100%
4.1.2	Stakeholders meetings	1	1	100%
4.1.3	Dissemination meetings for the District Tourism Strategy	7	7	100%
<b>4.2.0</b>	<b>District Capacity Building and awareness creation</b>			
4.2.1	Capacity building trainings (Short course for staff in Natural Resources department and Commercial Section)	5	5	100%
4.2.2	Study Tours	2	0	0%
4.2.3	Computer set for Commercial Office	1	1	100%
4.2.4	Filing Cabinet for Commercial Office	1	1	100%
<b>4.3.0</b>	<b>Tourism Sites Mapped and Gazetted</b>			
4.3.1	Engaging consultant to carry out mapping	1	1	100%
4.3.2	Holding community meetings	2	2	100%
4.3.3	Dialogue meetings with land owners	10	2	20%
<b>4.4.0</b>	<b>Ssesse Islands Tourism Products Marketed</b>			
4.4.1	Publicity and advertisement through the Media	4	1	25%
4.4.2	Documentation and dissemination	3	1	25%
4.4.3	Maintain and update Website	4	1	25%

S/N	Detail	Target	Total Achieved	Percentage
<b>4.5.0</b>	<b>Private Sector Organisation for Tourism Development Supported</b>			
4.5.1	Grant for PSOs to support capacity building and coordination	4	0	0%
<b>4.6.0</b>	<b>Unallocated funds</b>			
4.6.1	Lump sum – allocation based on four annual work plans	4	0	0%
<b>5</b>	<b>Infrastructure Development</b>			
<b>5.1.0</b>	<b>Administration Sector Infrastructure Developed</b>			
5.1.1	Completion of Mazinga Offices	1	1	100%
5.1.2	Contract for Construction of District Offices	1	1	100%
5.1.3	Contract for Construction of Bubeke Offices	1	1	100%
5.1.4	Contract for Construction of Bufumira Offices	1	1	100%
5.1.5	Contract for Construction of Transient Hostels (B ubeke & Mazinga)	2	0	0%
<b>5.2.0</b>	<b>Fisheries Sector Infrastructure Developed</b>			
5.2.1	Procurement of fish transfer floating barges (Contract)	3	3	100%
5.2.2	Mapping and Planning Model Fishing village (Contract)	3	3	100%
5.2.3	Construction of Kisaba landing site infrastructure and WATSAN facilities	1	1	100%
5.2.4	Construction of Kyagalanyi landing site infrastructure and WATSAN	1	1	100%
5.2.5	Construction of Ttubi landing site infrastructure and WATSAN	1	1	100%
5.2.6	Construction of Drying racks	50	50	100%
5.2.7	Construction of Choker Kilns	5	5	100%
5.2.8	Greening of fishing villages	3	3	100%
5.2.9	Waste management (Refuse disposal sites)	10	10	100%
<b>5.3.0</b>	<b>Education Sector Infrastructure Developed</b>			
5.3.1	Completion of Mazings primary school dormitory blocks (s) and kitchen	1	1	100%
5.3.2	Construction of primar school kitchens in other primary schools	8	0	0%
5.3.3	Construction of classroom blocks (20 classrooms and 1 office)	7	7	100%
5.3.4	Construction of semi-detached teachers' houses (two in one)	5	5	100%
5.3.5	Construction of four-stance VIP latrines with wash rooms in P/S	10	10	100%
5.3.6	Installation of water harvesting water tanks in primary	45		100%

## Annex 7: Programme Outcome Achievements

### List of outcome as defined in the renewed logframe from 2011

The achievements listed in red colour were reported upon in the Programme Completion Report (CR) by ICEIDA. With the Latter's comment in **yellow shading**. Notably some indicator formulations have been changed from the agreed logframe to the CR, which is not according to the "book", as semantics really prevail in logframe formulations. (It is fair to mention that the Icelandic Embassy does not agree with this statement and says in their comments to the Draft Evaluation Report: *"It fails to capture the essence of the improvement in the report – mean to address the weakness in the construction of the outcome indicators. Minimum conditions are defined in detail in the report as covering minimum functional capacity requirements, which does not change the meaning of the indicator. The change from "number" to "percentage" is an improved construct. Moreover, both the percentage and numbers are given e.g. 100% (8/8) of LGs met minimum conditions in 2014. (Expected result achieved)."*

The other indicators were reported upon verbally by the Kalangala District Local Government staff, to the degree possible, during the Evaluation, and were never reported upon in writing. Some statistics were also handed over to the Consultant illustrating the outcome/impact of interventions, but in a not-consistent manner.

The Icelandic Embassy also emphasised in their comments to the below table that *"there is reporting on leverage indicators for the outcomes (the indicators that were considered more of outputs, ..., were not reported on in the project completion report. Regarding the partners self-assessment (highlighted in yellow) against lack of pre-set targets, the clarification was made that comparisons were made with baseline which was reconstructed largely based on quantitative data that is verifiable, and in comparison, with national benchmarks and in some cases international benchmarks like MDG targets"*.

Immediate Objective (Outcome)	Indicator	Target Value	Reported Achievement	Comments
<b>1. Local government Administration (implemented 2006-2015)</b>				
<b>Efficient and effective leadership, administration and management of public, civil society and private agencies in Kalangala District by 2015.</b>	1. No. and coverage of district and LLG policies and ordinances/bye-laws formulated and implemented	None	No data available.	Not a well formulated outcome. Some capacity building taking place (outputs), district in <i>ordinances</i> and Sub-Counties in <i>by-laws</i>
	2. Number of LGs authorities assessed as meeting minimum functional capacity requirements in key areas <sup>1</sup>	None	100% (8/8) of LGs met minimum conditions in 2014. (Expected result achieved).	0% in baseline year. Indicator in CR: "Percentage of LGs that met minimum conditions in annual assessment"
	3. Number of LGs authorities gaining rewards after annual assessment of performance	None	71% (5/8) of LGs got a reward in performance measures in 2014. (Expected result was achieved).	0% in baseline year. Indicator in CR: "Percentage of LGs that got a reward in overall performance measures in annual assessments".
	4. Community priorities (lower councils, gender, pwds, youth, elderly, PHA) integrated in LG development plans and budgets	None	Verbal feedback that they are as per requirement	According to minimum national requirements.
	5. Proportion of activities in LG Development Plans implemented and monitored on schedule, by sector and location; & number of departments/actors producing activity and financial performance reports on schedule, by level	None	Verbal feedback "to a large extent all of them". Estimated 70% fulfilled by District.	Not a well formulated outcome
	6. Availability of data disaggregated by sector, sex, age and location	None	Verbal feedback that Planning Unit is doing this.	Not a well formulated outcome. No data submitted to the Consultant.

<sup>1</sup> The selected key areas are: development planning and management, financial management, revenue enhancement, capacity building planning and ability to meet project specific conditions.

Immediate Objective (Outcome)	Indicator	Target Value	Reported Achievement	Comments
<b>Efficient and effective leadership, administration and management of public, civil society and private agencies in Kalangala District by 2015.</b>	7. Local revenue generated, by source and location	None	a) Local revenue realization rate increased to 66% in FY 2015/2016. (Expected result was fairly achieved). b) No data	In baseline year: FY 2009/10 a) Local revenue realization rate was 24% b) Local revenue contributed 1.5% to total district revenue <u>Indicators in CR:</u> "Local revenue realisation rate". "Percentage contribution of local revenue to total district revenue".
	8. Number of active NGOs, PSOs and networks in the district, by sector	None	Verbal feedback that the Community Development Office is keeping a record of this.	Not a well formulated outcome. No info submitted to the Consultant.
	9. Administrative infrastructure and facilities in place	None	a) 100% (8/8) of LGs that had basic administrative infrastructure in 2015. (Expected result was achieved). b) 63% (5/8) of LGs administrative infrastructure was supported under KDDP as planned (Expected result was achieved).	This is an output indicator!!! a) 0% (0/8) of LGs that had basic administrative infrastructure in baseline year 2006 b) 0% of LG administrative infrastructure was supported under KDDP in baseline year 2006 <u>Indicators in CR:</u> "Percentage of LGs with basic administrative infrastructure" "Percentage of LG administrative infrastructure supported under KDDP"
	10. Evidence of Gender mainstreaming in the DDP & BFP	None	Descriptive data provided in Completion Report	Not a well formulated outcome

Immediate Objective (Outcome)	Indicator	Target Value	Reported Achievement	Comments
<b>2. Fisheries Sector and WATSAN (implemented 2006-2015)</b>				
<b>Improved quality fisheries production and marketing in Kalangala District, by 2015</b>	1. % of fish catch meeting set standards	None	Fish post-harvest losses reduced to between 1-5% by 2014. (Expected result achieved).	Fish post-harvest losses were estimated at 25-30% in baseline year 2005
	2. Proportion of fishing gears used, meeting legal requirements	None	Kalangala remained among the top three districts using illegal gillnets and hooks on Lake Victoria. (Expected result not achieved).	Baseline data was not established.
	3. District revenue from fisheries sector	None	51% contribution in FY 2015/16 from two recognisable sources of boat landing/parking fees and fish movement permits. (Expected result achieved).	40% contribution in FY 2012/13 from two recognisable sources of boat landing/ parking fees and fish movement permits.
	4. Compliance rate for the [environmental lakeshore] non-encroachment zone	None	100% (5/5) of the focal fishing villages were compliant by 2014. (Expected result achieved).	0% (0/5) of focal fishing villages were compliant in baseline year 2006
	5. No. of landing sites with functional WATSAN facilities, by gender	None	See new indicator 8 below	New indicator 8 partly capturing this "old" indicator. (Gender not reported upon)
	6. Number of reported cases of WATSAN related diseases at landing sites	None	No reported cases of cholera and dysentery disease outbreaks since 2010. (Expected result achieved)	Frequent reports of cholera and dysentery disease outbreaks at inception of KDDP
	7. Number of fisheries infrastructure in place	None	See new indicator 8 below	New indicator 8 partly capturing this (old) indicator
	<b>New indicators in CR:</b> 8. "The percentage of project focal fishing villages with access to functional improved fish handling infrastructure and water and sanitation facilities for community use"	None	100% (5/5) of focal villages had access to fish handling infrastructure and WATSAN facilities since 2014. However, only 60% (3/5) of FHS were functional. (Expected result achieved, but limited by non-functionality of some facilities).	0% (0/5) of focal villages had access to improved infrastructure for fish handling and WATSAN facilities for community use in baseline year 2006.

Immediate Objective (Outcome)	Indicator	Target Value	Reported Achievement	Comments
	<b>New indicators in CR:</b> 9. "Proportion of improved fish handling sites supported under KDDP to the overall district improved FHS"	None	56% (5/9 of the improved FHS in the district were supported under KDDP in 2015)	0% (0/2) of the improved fish handling sites were supported under KDDP in baseline year 2006
<b>3. Education and Sports Sector (implemented 2006-2015)</b>				
<b>Equitable access to quality education in Kalangala District by 2015.</b>	1. Enrolment rates by sex, age, location, and people with disabilities (pwds)	None	Gross enrolment ration (GER) increased to 86% with gender ratio of 97% by 2014. (MDG target of 100% NER by 2015 was not achieved).	GER was 73%, with a gender ratio of 94% in 2005 <u>Indicator in CR:</u> "Enrolment rates in primary education"
	2. Completion rates by sex, age, location, and pwds	None	Completion rate in 2015 was 52.8% (53% for boys and 52.7% for girls) compared to national average of 61% (Kalangala district was ranked 72 <sup>nd</sup> out of 112 districts on performance on this indicator). (Expected result fairly achieved)	Completion rate for data available in 2009 was 40% (38% for boys and 43% for girls) compared to national average of 65%. (Kalangala district was ranked 70 <sup>th</sup> out of 80 districts). <u>Indicator in CR:</u> "Completion rate in primary education"
	3. Transition rates by sex, age, location, and pwds	None	a) Transition rate for project end line year 2015 (to be analysed separately from from KIEP baseline data). b) Transition rate to post-primary education in Kalangala based institutions for final year 2015 (to be analysed separately from KIEP baseline data). (KIEP=Kalangala-ICEIDA Development Partnership, Development in Education Sector 2016-2019. Being a consolidation of KDDP).	a) Overall transition rate for baseline year 2006 was not established. b) Transition rate to post-primary education in Kalangala based institutions for baseline year 2006 was not established. <u>Indicator in CR:</u> "Transition rate from primary education to secondary education, and technical and vocational education and training BTVET".

Immediate Objective (Outcome)	Indicator	Target Value	Reported Achievement	Comments
Equitable access to quality education in Kalangala District by 2015.	4. Pass rates in national exams by sex, age, location, and pwds	None	<p>a) Passes in division I-II increased to 67% in 2015. (Expected result achieved)</p> <p>b) Overall pass rate (division I-IV) increased to 89% in 2015. (Expected result achieved).</p> <p>c) Percentage of the ungraded (failure) plus absentees reduced to 11% in 2015. (Expected result achieved).</p> <p>d) Kalangala district PLE performance index was 65.3% (68.3 for boys and 62.3% for girls) in 2015, compared to national average of 54% (District was ranked 11<sup>th</sup> out of 112 districts on this indicator). (Expected result achieved).</p>	<p>a) Passes in division I-II was 35% in 2005.</p> <p>b) Overall pass rate (division I-IV) was 71% in 2005.</p> <p>c) Percentage of the ungraded (failure) plus absentees was 29% in 2005.</p> <p>d) Kalangala PLE performance index for available data in 2009 was 53%, compared to national average of 53%.</p> <p><u>Indicator in CR:</u> "Pass rate in national primary leaving examinations (PLE)"</p>
	5. No. and type of school facilities, by location, gender, and pwds (dormitories and kitchen facilities)	None	<ul style="list-style-type: none"> <li>- 8% (7/85) of all classroom blocks or 11% (20/189) of all classrooms available for use in primary schools.</li> <li>- 43% (6/14) of dormitory blocks providing boarding facilities for boys and girls in primary schools.</li> <li>- 7% (10/151) of teachers housing units or 9% (17/180) of actual teachers accommodated in all primary schools.</li> <li>- 18% (10/56) VIP latrines or 15% (40/260) of available latrines</li> </ul>	<p>Construction of infrastructure is an output! A related outcome would be the satisfactory operation of the facilities following end of Programme.</p> <p><u>Indicator in CR:</u> "Percentage of primary schools with basic school infrastructure and facilities"</p>

Immediate Objective (Outcome)	Indicator	Target Value	Reported Achievement	Comments
			<p>stances in all primary schools and 100% (10/10) of available wash rooms.</p> <ul style="list-style-type: none"> <li>- 55% (45/82) of rain harvesting water tanks or 55% (450,000/820,000) of litres of water storage capacity in all primary schools.</li> <li>- 75% (3/4) of kitchens facilities with environmentally friendly energy saving stoves and cooking facilities in all primary schools</li> </ul>	
	6. No. of schools with functional governing bodies, by location	None	From Final Report: "all 23 schools have functional governing bodies".	These 23 schools are government schools. (In addition, there are 3 private schools in Kalangala)
	7. Teacher - Pupil Ratio	None	Figures for 2018: 117 teachers (38 private and 78 government), thus teacher/pupil ratio: 0.021	Latest government figure (Government schools only, 2016): 0.018
	8. Pupil – Textbook Ratio	None	The pupil to textbook ratio improved to 1:1 in 2014, which was above national average of 4:1 (Expected result achieved)	The pupil to textbook ratio for Kalangala primary schools was 5:1 in 2010. <u>Indicator in CR:</u> "Percentage access to school infrastructure & facilities"
	9. Number of trained teachers by sex, grade and location	None	No information given of "add-on" or new training following the outputs.	This is clearly an output indicator!! However, the education support is continuing in KIEP.
	10. Number of schools participating in co-curricular activities	None	100% (23 public primary schools)	This is clearly an output indicator (with no timeframe indicated).
	11. Number of schools with co-curricular kits by gender and location	None	100% (23 public primary schools)	This is clearly an output indicator!!

Immediate Objective (Outcome)	Indicator	Target Value	Reported Achievement	Comments
<b>Equitable access to quality education in Kalangala District by 2015.</b>	New indicator in CR: "Retention in primary education- cohort survival rates to Grade V and Final Grade VII"	None	a) Apparent survival rate to grade five in year 2015 declined to 45% of the pupil cohort enrolled in grade one in 2011, with a gender parity index of 0.95. (Expected result not achieved). b) Apparent survival rate to grade seven in year 2015 declined to 26% of pupil cohort enrolled in grade one in 2009, with a gender parity index of 1.04 (Expected result not achieved).	a) Apparent survival rate to grade five in year 2009 was 64% of the pupil cohort enrolled in grade one in 2005, with a gender parity index of 1.1. b) Apparent survival rate to grade seven in year 2011 was 36% of the pupil cohort enrolled in grade one in 2005, with a gender parity index of 1.1
<b>4. Tourism Sector (implemented 2011-2013)</b>				
<b>Improved exploitation of Kalangala District tourism potential by 2015</b>	1. Number of tourists visiting the district	None	No data available in district administration on tourists the last years!! (No database established).	Not a well formulated outcome, as it does not give the timing. When people are entering the ferry in Entebbe they are registered. Min. of Works has these records (not reported to Kalangala District)
	2. % of district population employed in the tourism sector	None	No information	Not a well formulated outcome, as no timing and no reporting to the district or anyone else on private sector involvement. There is no public involvement at present.
	3. Number of new investments in the tourism sector in the district	None	No information of such investments.	Private developers not reporting to the District.
	4. % of LG revenue generated from tourism	None	No information.	
	5. Number eco-tourism sites conservation measures formulated and implemented	None	No information.	
	6. No. of tourism sites with written regulations or codes prohibiting sexual violence	None	No information	This is hopeless indicator to measure in a district like Kalangala.

Immediate Objective (Outcome)	Indicator	Target Value	Reported Achievement	Comments
	7. No of tourism sites with measures on HIV prevention, by type	None	No information	This is hopeless indicator to measure in a district like Kalangala.
<b>5. Health Sector (implemented 2006-2010)</b>				
<b>Equitable access for the citizens to quality health services at district level</b>	1. Number of qualified health staff by sex, level, location and ownership of facility	None	No outcome indicators reported upon, neither in the Mid-term Review, the Final Report or the Completion Report  Regarding 5: It as verbally estimated that 65% of the facilities in Kalangala has “appropriate infrastructure and equipment” in 2018, versus around 15% in 2006.	None of the indicators are not well formulated: lacking timing, what is “adequate”, no registration of how far people live from the HCs, no records on outreaches, or use of health service (registration with the individual HC only.  <u>From Mid-term Review Report (2010):</u> Key outcomes include: <Consultant’s comment: these are outputs!!!> Training of health providers has increased service delivery. Equipping the health units with basic but essential facilities such as solar panels and motor cycles has improved staff morale in especially remotely located centers. The health centre now receives some PHC fund from the central government. Increased intensity for immunization and other outreach programmes at the various health centers. Improving access by more than 15,000 people to primary health care services; (1) 12% increase in children who are fully immunized
	2. Proportion of health units with adequate supplies (drugs and medical sundries)	None		
	3. Proportion of population living with in 5 km radius of health facility, by location	None		
	4. Proportion of population accessing outreach services, by sex, age and location	None		
	5. Proportion of health facilities by level and location, with appropriate infrastructure and equipment	None		
	6. No. of clients accessing VCT, PMTCT services, by sex and location	None		
	7. Proportion of the population by sex using formal health services	None		



**Annex 8: Infrastructure, materials and equipment supplied under  
the programme**

**KDDP Assets Register 2006-2015  
(The KDDP Completion Report June 2017)**

**KDDP ASSET REGISTER 2006-2016**

No	Infrastructure Description	Sector	User/location	Code	Year	Value (UGX)	Exchange Rate	Value (USD)	Asset Condition
<b>ADMINISTRATION SECTOR</b>									
1	Motor Vehicle Toyota Hilux (LG 0021 - 15)	Administration	District HQ	LG 0021 - 15	2007	73,515,303	1,700	43,244	Poor/functional
2	Computer - Laptop	Administration	District HQ - Planning	KDDP/ADM 01/06	2007	3,220,000	1,700	1,894	Written-off
3	Computer - Laptop	Administration	District HQ - Finance	KDDP/ADM 02/06	2007	4,085,000	1,700	2,403	Fair/functional
4	Computer - Laptop	Administration	District HQ - Administration	KDDP/ADM 03/06	2007	4,085,000	1,700	2,403	Fair/functional
5	Computer - Desktop	Administration	District HQ - Planning	KDDP/ADM 04/06	2007	4,085,000	1,700	2,403	Fair/functional
6	Computer - Laptop	Administration	District HQ - Information	KDDP/ADM 05/07	2007	3,127,700	1,700	1,840	Fair/functional
7	Computer - Laptop	Administration	District HQ - Audit	KDDP/ADM 06/07	2007	3,127,700	1,700	1,840	Fair/functional
8	Computer - Laptop	Administration	Kalangala TC	KDDP/ADM 07/07	2007	3,127,700	1,700	1,840	Fair/functional
9	Printer	Administration	Information, District HQ	KDDP/ADM 08/07	2007	595,000	1,700	350	Written-off
10	Printer	Administration	District HQ - Audit	KDDP/ADM 09/07	2007	595,000	1,700	350	Written-off
11	Printer	Administration	Kalangala TC	KDDP/ADM 10/07	2007	595,000	1,700	350	Written-off
12	Computer - Laptop	Administration	District HQ	KDDP/ADM 11/07	2007	3,127,700	1,700	1,840	Fair/functional
13	Digital Camera	Administration	Information, District HQ	KDDP/ADM 11/07	2007	1,600,000	1,700	941	Written-off
14	Motor Vehicle Toyota Hiace (LG 0034 - 15)	Administration	District HQ	UG 0034 - 15	2007	69,501,652	1,700	40,883	Fair/functional
15	Motorcycle TF 125 (LG 0035 - 15)	Administration	District HQ	UG 0035 - 15	2007	6,712,400	1,700	3,948	Fair/functional
16	Motorcycle TF 125 (LG 0036 - 15)	Administration	District HQ	UG 0036 - 15	2007	6,712,400	1,700	3,948	Fair/functional
17	Sub-county Offices Kyamuswa (completion)	Administration	Kyamuswa	NOT CODED	2008	45,111,915	1,700	26,536	Poor /functional
18	Yamaha Engine (40 HP)	Administration	District HQ - Finance	KDDP/ADM 17/08	2008	6,000,000	1,700	3,529	Good/functional
19	Yamaha Engine (40 HP)	Administration	District HQ - Finance	KDDP/ADM 18/08	2008	6,000,000	1,700	3,529	Good/functional
20	Boat (Wooden)	Administration	District HQ - Finance	KDDP/ADM 15/08	2008	3,700,000	1,700	2,176	Written-off
21	Boat (Wooden)	Administration	District HQ - Finance	KDDP/ADM 16/08	2008	3,700,000	1,700	2,176	Written-off
22	Sub-county Offices Mazinga	Administration	Mazinga	NOT CODED	2011	254,656,815	2,600	97,945	Fair, functional
23	Procurement of a Fibre Glass Boat for inspection	Administration	District HQ - Finance	NOT CODED	2011	19,776,000	2,600	7,606	Fair, functional

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24	Sub-county Offices Bubeke	Administration	Bubeke	NOT CODED	2012	331,437,500	2,500	132,575	Fair, functional
25	Sub county Offices Bufumira	Administration	Bufumira	NOT CODED	2012	316,822,071	2,500	126,729	Good, functional
26	Kalangala District Admin block	Administration	District HQ, Kalangala	NOT CODED	2012	1,133,984,100	2,500	453,594	Good, functional
27	Filing Cabinet for Commercial Office	Administration (Tourism)	District HQ - Tourism	NOT CODED	2011	1,365,000	2,600	525	Good, functional
28	Computer set for Commercial Office	Administration (Tourism)	District HQ - Tourism	NOT CODED	2012	3,000,000	2,500	1,200	Good, functional
29	Procurement of Digital Video Camera	Administration (Tourism)	District HQ - Tourism	NOT CODED	2012	2,500,000	2,500	1,000	Written-off
<b>Total for administration sector</b>						<b>2,315,865,956</b>		<b>969,600</b>	
<b>Percentage</b>						<b>23%</b>		<b>24%</b>	
<b>EDUCATION AND SPORTS</b>									
30	Computer Laptop	Education	District HQ	KDDP/EDU 01/06	2007	4,085,000	1,700	2,403	Fair/functional
31	Motorcycle Yamaha AG 100	Education	District HQ	KDDP/EDU 03/06	2007	6,731,269	1,700	3,960	Fair/functional
32	Helmets	Education	District HQ	KDDP/EDU 02/06	2007	95,875	1,700	56	Fair/functional
33	Printer	Education	District HQ	KDDP/EDU 04/06	2007	320,000	1,700	188	Written-off
34	Motorcycle TF 125 (LG 0038 - 15)	Education	District HQ	LG 0038 - 15	2007	6,731,269	1,700	3,960	Fair/functional
35	Cyclostyling Machine	Education	District HQ	KDDP/EDU 05/07	2007	4,750,000	1,700	2,794	Good/functional
36	Outboard Engine (Yamaha HP 40)	Education	District HQ	KDDP/EDU 06/07	2007	3,700,000	1,700	2,176	Good/functional
37	Outboard Engine (Yamaha HP 40)	Education	Kyamuswa	KDDP/EDU 07/07	2007	3,700,000	1,700	2,176	Good/functional
38	Motorcycle TF 125 (UG 0037 - 15)	Education	District HQ	KDDP/EDU 09/07	2007	6,712,400	1,700	3,948	poor/functional
39	Boat (Wooden)	Education	District HQ	KDDP/EDU 10/07	2007	3,700,000	1,700	2,176	Written-off
40	Boat (Wooden)	Education	District HQ	KDDP/EDU 11/07	2007	3,700,000	1,700	2,176	Written-off
41	Kibanga P/S Dormitories-1(Girls) and Kitchens	Education	Kalangala T/C	KDDP/EDU 15/10	2010	404,487,800	2,200	183,858	Good, functional
42	Kibanga P/S Dormitories-1 (Boys)	Education	Kalangala T/C	KDDP/EDU 16/10	2010	Part of above	Part of above	Part of above	Good, functional
42	Mazinga P/S Dormitories-1 (Girls) and Kitchen	Education	Mazinga	NOT CODED	2011	556,461,570	2,600	214,024	Good, functional
42	Mazinga P/S Dormitories-1 (Boys)	Education	Mazinga	NOT CODED	2011	Part of above	Part of above	Part of above	Good, functional

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43	Kagulube P/S Dormitories-1 (for boys and girls) and Kitchen	Education	Mugoye	KDDP/EDU 12/10	2011	364,874,500	2,600	140,336	Good, functional
43	Kagulube P/S Dormitories-1 (for boys and girls) and Kitchen	Education	Mugoye	KDDP/EDU 13/10	2011	364,874,500	2,600	140,336	Good, functional
44	Fibre Glass Boat	Education		NOT CODED	2011	19,776,000	2,600	7,606	Good, functional
45	Bufumira P/S Staff house	Education	Bufumira	NOT CODED	2013	130,570,000	2,600	50,219	Good, functional
46	Kachanga P/S Classroom Block	Education	Bufumira	NOT CODED	2013	253,628,980	2,600	97,550	Good, functional
47	Mazinga Primary School Classroom Block	Administration	Mazinga	NOT CODED	2013	229,470,923	2,600	88,258	Good, functional
48	Kachanga P/S Staff house	Education	Bufumira	NOT CODED	2014	193,588,868	2,600	74,457	Good, functional
49	Kitobo P/S Staff house	Education	Bufumira	NOT CODED	2014	193,035,568	2,600	74,244	Good, functional
50	Kitobo Primary School Classroom Block	Education	Bufumira	NOT CODED	2014	258,319,800	2,600	99,354	Good, functional
51	Lwabaswa P/S Classroom Block	Education	Bujumba	NOT CODED	2014	231,464,673	2,600	89,025	Good, functional
52	Bwendero P/S Staff house	Education	Bujumba	NOT CODED	2014	152,570,150	2,600	58,681	Good, functional
53	Mulabana P/S Staff house	Education	Bujumba	NOT CODED	2014	134,677,068	2,600	51,799	Good, functional
54	Kibanga P/S Classroom Block	Education	Kalangala T/C	NOT CODED	2014	228,192,173	2,600	87,766	Good, functional
55	Jaana P/S Classroom Block	Education	Bubeke	NOT CODED	2015	230,132,430	3,400	67,686	Good, functional
56	Two 10,000cc water tanks	Education	Mazinga primary school	NOT CODED	2015	22,350,000	3,400	6,574	Good, functional
57	Two 10,000cc water tanks	Education	Kibaale primary school - Mugoye	NOT CODED	2015	22,350,000	3,400	6,574	Good, functional
58	Two 10,000cc water tanks	Education	Buswa primary school - Bujumba	NOT CODED	2015	22,004,640	3,400	6,472	Good, functional
59	Two 10,000cc water tanks	Education	Busanga primary school - Bujumba	NOT CODED	2015	22,004,640	3,400	6,472	Good, functional
60	Two 10,000cc water tanks	Education	Kagulube primary school - Mugoye	NOT CODED	2015	21,749,406	3,400	6,397	Good, functional
61	Two 10,000cc water tanks	Education	Bumangi primary school - Mugoye	NOT CODED	2015	21,749,406	3,400	6,397	Good, functional
62	Two 10,000cc water tanks	Education	Bbeta primary school - Mugoye	NOT CODED	2015	22,306,400	3,400	6,561	Good, functional
63	Two 10,000cc water tanks	Education	Lulamba primary school	NOT CODED	2015	22,306,400	3,400	6,561	Good, functional

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64	Two 10,000cc water tanks	Education	Bufumira primary school	NOT CODED	2015	22,350,000	3,400	6,574	Good, functional
65	Two 10,000cc water tanks	Education	Bubeke primary school	NOT CODED	2015	22,350,000	3,400	6,574	Good, functional
66	Two 10,000cc water tanks	Education	Bukasa primary school	NOT CODED	2015	22,335,000	3,400	6,569	Good, functional
67	Two 10,000cc water tanks	Education	Buwazi primary school	NOT CODED	2015	22,335,000	3,400	6,569	Good, functional
68	Two 10,000cc water tanks	Education	Jaana primary school	NOT CODED	2015	21,620,550	3,400	6,359	Good, functional
69	Two 10,000cc water tanks	Education	Kaganda primary school	NOT CODED	2015	21,620,550	3,400	6,359	Good, functional
70	Two 10,000cc water tanks	Education	Kinyamira primary school - Bujumba	NOT CODED	2015	21,937,600	3,400	6,452	Good, functional
71	One 10,000cc water tanks	Education	Bridge of Hope primary school - Kalangala T/C	NOT CODED	2015	10,980,000	3,400	3,229	Good, functional
72	Two 10,000cc water tanks	Education	Kibanga primary school - Kalangala T/C	NOT CODED	2015	21,960,000	3,400	6,459	Good, functional
73	One 10,000cc water tanks	Education	Kachanga primary school - Bufumira	NOT CODED	2015	11,173,333	3,400	3,286	Good, functional
74	Two 10,000cc water tanks	Education	Sserinya primary school - Bufumira	NOT CODED	2015	22,346,667	3,400	6,573	Good, functional
75	Two 10,000cc water tanks	Education	Bwendero primary school - Mugoye	NOT CODED	2015	21,694,890	3,400	6,381	Good, functional
76	Two 10,000cc water tanks	Education	Mulabana primary school - Mugoye	NOT CODED	2015	21,694,890	3,400	6,381	Good, functional
77	Two 10,000cc water tanks	Education	Lake Victoria primary schools - Mugoye	NOT CODED	2015	21,657,472	3,400	6,370	Good, functional
78	Two 10,000cc water tanks	Education	Kasekulo primary schools - Mugoye	NOT CODED	2015	21,657,472	3,400	6,370	Good, functional
79	Four stance pit latrine with Wash Rooms	Education	Bubeke primary school - Bubeke	NOT CODED	2016	35,668,952	3,500	10,191	Good, functional
80	Four stance pit latrine with Wash Rooms	Education	Kachanga primary school - Bufumira	NOT CODED	2016	35,845,013	3,500	10,241	Good, functional
81	Four stance pit latrine with Wash Rooms	Education	Lulamba primary school - Bufumira	NOT CODED	2016	35,608,290	3,500	10,174	Good, functional
82	Four stance pit latrine with Wash Rooms	Education	Mulabana primary school - Bujumba	NOT CODED	2016	33,654,703	3,500	9,616	Good, functional

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83	Four stance pit latrine with Wash Rooms	Education	Kibanga primary school - Kalangala T/C	NOT CODED	2016	31,576,773	3,500	9,022	Good, functional
84	Four stance pit latrine with Wash Rooms	Education	Bbeta primary school - Mugoye	NOT CODED	2016	33,823,334	3,500	9,664	Good, functional
85	Four stance pit latrine with Wash Rooms	Education	Kagulube primary school - Mugoye	NOT CODED	2016	32,775,382	3,500	9,364	Good, functional
86	Four stance pit latrine with Wash Rooms	Education	Bumangi primary school - Mugoye	NOT CODED	2016	33,555,837	3,500	9,587	Good, functional
87	Four stance pit latrine with Wash Rooms	Education	Kasekulo primary school - Mugoye	NOT CODED	2016	33,248,565	3,500	9,500	Good, functional
88	Four stance pit latrine with Wash Rooms	Education	Kibaale primary school - Mugoye	NOT CODED	2016	33,855,548	3,500	9,673	Good, functional
<b>Total for Education Sector</b>						<b>4,814,497,529</b>		<b>1,790,757</b>	
<b>Percentage</b>						<b>48%</b>		<b>45%</b>	
<b>FISHERIES AND WATSAN</b>									
89	Computer Desktop	Fisheries	District HQ	KDDP/FIS 02/06	2007	4,085,000	1,700	2,403	Good, functional
90	Computer - Laptop	Fisheries	Fisheries Water Office	KDDP/FIS 04/06	2007	4,085,000	1,700	2,403	Good, functional
91	Outboard Engine (Yamaha)	Fisheries	District HQ	KDDP/FIS 05/06	2007	5,800,000	1,700	3,412	Good, functional
92	Outboard Engine (Yamaha)	Fisheries	Mazinga	KDDP/FIS 06/06	2007	5,800,000	1,700	3,412	Good, functional
93	Motorcycle Yamaha AG 100	Fisheries	Kyamuswa	KDDP/FIS 07/06	2007	6,731,269	1,700	3,960	Fair, functional
94	Outboard Engine (Yamaha)	Fisheries	Bufumira	KDDP/FIS 16/07	2007	5,800,000	1,700	3,412	Fair, functional
95	Computer - Desktop	Fisheries	Planning	KDDP/FIS 20/07	2007	3,220,000	1,700	1,894	Fair, functional
96	Helmet	Fisheries	Kyamuswa	KDDP/FIS 01/06	2007	95,875	1,700	56	Fair, functional
97	Boat (Wooden)	Fisheries	Fisheries Water Office	KDDP/FIS 03/06	2007	3,975,420	1,700	2,338	Written-off
98	Boat (Wooden)	Fisheries	District HQ	KDDP/FIS 13/07	2007	3,952,056	1700	2,325	Written-off
99	Boat (Wooden)	Fisheries	Mazinga	KDDP/FIS 14/07	2007	3,975,420	1700	2,338	Written-off
100	Boat (Wooden)	Fisheries	Bufumira	KDDP/FIS 15/07	2007	3,975,420	1700	2,338	Written-off
101	Secretarial Chairs	Fisheries	District HQ	KDDP/FIS 08/07	2007	250,000	1700	147	Fair, functional
102	Secretarial Chairs	Fisheries	District HQ	KDDP/FIS 09/07	2007	250,000	1700	147	Fair, functional
103	Filing Cabinets	Fisheries	District HQ	KDDP/FIS 10/07	2007	350,000	1700	206	Fair, functional
104	Office Table	Fisheries	District HQ	KDDP/FIS 11/07	2007	550,000	1700	324	Fair, functional
105	Printer	Fisheries	District HQ	KDDP/FIS 12/07	2007	650,000	1700	382	W/O

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106	Motorcycles TF 125 (LG 0030 - 15)	Fisheries	Kalangala TC	LG 0030 - 15	2007	6,712,400	1700	3,948	Fair, functional
107	Motorcycles TF 125 (LG 0031 - 15)	Fisheries	Bujumba	LG 0031 - 15	2007	6,712,400	1700	3,948	Fair, functional
108	Motorcycles TF 125 (LG 0032 - 15)	Fisheries	Bujumba	LG 0032 - 15	2007	6,712,400	1700	3,948	Fair, functional
109	Filling Cabinets	Fisheries	Fisheries Water Office	KDDP/FIS 100/07	2007	350,000	1700	206	Fair, functional
110	Office Tables	Fisheries	Fisheries Water Office	KDDP/FIS 21/07	2007	550,000	1700	324	Fair, functional
111	Yamaha Engine (15 HP)	Fisheries	District HQ	KDDP/FIS 22/08	2008	3,700,000	1700	2,176	Fair, functional
112	Boat (15 Seater)	Fisheries	District HQ	KDDP/FIS 21/08	2008	3,600,000	1700	2,118	W/O
113	Namisoke Fish handling infrastructure	Fisheries	Bubeke	NOT CODED	2009	100,102,200	2100	47,668	Fair/Functional
114	Kachanga Fish handling infrastructure	Fisheries	Mazinga	NOT CODED	2009	100,102,200	2100	47,668	Fair/abandoned
115	Namisoke Water and Sanitation Facilities for community	Fisheries (Water/Sanitation)	Bubeke	NOT CODED	2009	147,478,969	2100	70,228	See below
116	Kachanga Water and Sanitation Facilities for community	Fisheries (Water/Sanitation)	Mazinga	NOT CODED	2009	147,478,969	2200	67,036	See below
117	Ttubi Fish handling Infrastructure	Fisheries	Mugoye	NOT CODED	2010	539,667,135	2200	245,303	Good/functional
118	Ttubi Water and Sanitation Facilities for community*	Fisheries (Water/Sanitation)	Mugoye	NOT CODED	2010	Part of above	Part of above	Part of above	Good/Functional
119	Procurement of a Fibre Glass Boat	Fisheries	Bufumira	NOT CODED	2011	19,776,000	2600	7,606	Fair, functional
120	Procurement of a Fibre Glass Boat	Fisheries	Kalangala HQ	NOT CODED	2011	19,776,000	2600	7,606	Fair, functional
121	Procurement of Weighing scales (5 No's)	Fisheries	Kisaba, Kachanga, Namisoke, Kyagalanyi, & Ttubi	NOT CODED	2011	10,000,000	2600	3,846	Fair, functional
122	Procurement of fish transfer floating barge	Fisheries	Kachanga Landing Site	NOT CODED	2011	39,497,333	2600	15,191	Poor/Not functional
123	Procurement of fish transfer floating barges	Fisheries	Namisoke Landing Site	NOT CODED	2011	39,497,333	2600	15,191	Poor/Not functional
124	Procurement of fish transfer floating barges	Fisheries	Kisaba Landing Site	NOT CODED	2011	39,497,333	2600	15,191	Poor/Not functional
125	Mulabana Fish Handling Infrastructure	Fisheries	Bujumba	NOT CODED	2012	570,645,470	2500	228,258	Fair, functional
126	Kisaba Fish handling Infrastructure	Fisheries	Kyamuswa	NOT CODED	2012	374,199,034	2500	149,680	Fair, functional

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127	Furnishing of BMU offices (3 Nos)	Fisheries	Kisaba, Kachanga & Namisoke	NOT CODED	2012	6,000,000	2500	2,400	Good
128	Construction of Drying racks (25 Nos)	Fisheries	Kisaba, Kachanga, Namisoke, Kyagalanyi, & Ttubi	NOT CODED	2012	50,412,000	2500	20,165	Good
129	Mulabana Sanitation Facilities for community*	Fisheries (Water/Sanitation)	Bujumba	NOT CODED	2012	Part of contract fish handling infrastructure under 125#	Fair/Functional		
130	Kisaba Water and Sanitation Facilities for community*	Fisheries (Water/Sanitation)	Kyamuswa	NOT CODED	2012	Part of contract fish handling infrastructure under 126 #	Fair/Functional		
131	Procurement of fibre boat, engine and life jackets	Fisheries	Mazinga	NOT CODED	2013	22,998,000	2600	8,845	Good
132	Procurement of fibre boat, engine and life jackets	Fisheries	District Fisheries - HQ	NOT CODED	2013	22,998,000	2600	8,845	Good
133	Furnishing of BMU offices (2 Nos)	Fisheries	Kyagalanyi and Ttubi landing sites	NOT CODED	2013	4,052,000	2600	1,558	Good
134	Construction of Drying racks (35 Nos)	Fisheries	Kisaba, Kachanga, Namisoke, Kyagalanyi, & Ttubi	NOT CODED	2013	70,438,000	2600	27,092	Good
135	Namisoke Water and Sanitation Improvement	Fisheries (Water/Sanitation)	Bubeke	NOT CODED	2013	63,400,000	2600	24,385	Fair/Functional
136	Kachanga Water and Sanitation Improvement	Fisheries (Water/Sanitation)	Mazinga	NOT CODED	2013	64,420,000	2600	24,777	Fair/Functional
137	Construction of Choker Kilns (5 Nos)	Fisheries	Kisaba, Kachanga, Namisoke, Kyagalanyi, & Ttubi	NOT CODED	2014	57,660,000	2600	22,177	Fair/Functional
<b>Total for Fisheries and WATSAN</b>						<b>2,591,978,637</b>		<b>1,108,883</b>	
<b>Percentage</b>						<b>26%</b>		<b>28%</b>	

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	<b>HEALTH SECTOR</b>								
138	Boat (Wooden)	Health	Mazinga	KDDP/HEA 01/06	2007	3,952,056	1,700	2,325	Written-off
139	Boat (Wooden)	Health	District HQ	KDDP/HEA 13/07	2007	3,952,056	1,700	2,325	Written-off
140	Office Bench	Health	Mulabana	KDDP/HEA 02/07	2007	25,000	1,700	15	Good
141	Office Bench	Health	Kalangala HC III	KDDP/HEA 03/07	2007	25,000	1,700	15	Good
142	Office Chairs	Health	Mulabana	KDDP/HEA 04/07	2007	35,000	1,700	21	Good
143	Office Chairs	Health	Kalangala HC III	KDDP/HEA 05/07	2007	35,000	1,700	21	Good
144	Book Shelve	Health	Mulabana	KDDP/HEA 06/07	2007	140,000	1,700	82	Good
145	Book Shelve	Health	Kalangala HC III	KDDP/HEA 07/07	2007	140,000	1,700	82	Good
146	Office Table	Health	Mulabana	KDDP/HEA 08/07	2007	215,000	1,700	126	Good
147	Office Table	Health	Kalangala HC III	KDDP/HEA 09/07	2007	215,000	1,700	126	Good
148	Outboard Engine (Yamaha)	Health	Mazinga	KDDP/HEA 12/07	2007	3,700,000	1,700	2,176	Good
149	Ventilated Improved Pit Latrine	Health	Kalangala TC	KDDP/HEA 14/07	2007	4,224,611	1,700	2,485	Fair
150	Outboard Engine	Health	District HQ	KDDP/HEA 15/07	2007	5,900,000	1,700	3,471	Poor/Running
151	Computer - Laptop	Health	District HQ	KDDP/HEA 16/07	2007	3,127,700	1,700	1,840	Fair
152	LaserJet Printer	Health	District HQ	KDDP/HEA 17/07	2007	595,000	1,700	350	Written-off
153	Outboard Engine (Yamaha Hp 15)	Health	Lulamba HC III	KDDP/HEA 18/07	2007	3,500,000	1,700	2,059	Poor/Running
154	Outboard Engine (Yamaha Hp 15)	Health	Bufumira HC III	KDDP/HEA 19/07	2007	3,500,000	1,700	2,059	Poor/Running
155	Outboard Engine (Yamaha Hp 15)	Health	Jaana HC III	KDDP/HEA 20/07	2007	3,500,000	1,700	2,059	Poor/Running
156	Boat (for Water Office)	Health	Lulamba HC III	KDDP/HEA 23/07	2007	3,700,000	1,700	2,176	Written-off
157	Boat (Wooden)	Health	Bufumira HC III	KDDP/HEA 24/07	2007	3,700,000	1,700	2,176	Written-off
158	Boat (Wooden)	Health	Jaana HC III	KDDP/HEA 25/07	2007	3,700,000	1,700	2,176	Written-off
159	Motorcycles TF 125 (LG 0036 - 15)	Health	Lulamba HC III	LG 0036 - 15	2007	6,712,400	1,700	3,948	Poor/Running
160	Motorcycles TF 125 (LG 0035 - 15)	Health	District HQ	LG 0035 - 15	2007	6,712,400	1,700	3,948	Poor/Running
161	Motor Vehicle Toyota Hilux (LG 0041 - 15)	Health	District HQ	LG 0041 - 15	2007	76,434,286	1,700	44,961	Poor/Running
162	Placenta Pit	Health	Kalangala HC III	KDDP/HEA 10/07	2007	1,347,424	1,700	793	Written-off
163	Medical Waste Pit	Health	Kalangala HC III	KDDP/HEA 11/07	2007	1,347,424	1,700	793	Written-off
164	Doctor's House Renovation	Health	Kalangala T/C	NOT CODED	2008	42,377,500	1,700	24,928	Good
165	Desk top Phone plus Yagi antenna	Health	DHOs Office	KDDP/HEA 26/08	2008	331,854	1,700	195	Written-off
166	Desk top Phone plus Yagi antenna	Health	Kalangala HC III	KDDP/HEA 27/08	2008	331,854	1,700	195	Written-off
167	Desk top Phone plus Yagi antenna	Health	Mulabana	KDDP/HEA 28/08	2008	331,854	1,700	195	Written-off

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168	Desk top Phone plus Yagi antenna	Health	Bwendero HC III	KDDP/HEA 29/08	2008	331,854	1,700	195	Written-off
169	Desk top Phone plus Yagi antenna	Health	Mugoye HC III	KDDP/HEA 30/08	2008	331,854	1,700	195	Written-off
170	Desk top Phone plus Yagi antenna	Health	Bumangi HC III	KDDP/HEA 31/08	2008	331,854	1,700	195	Written-off
171	Desk top Phone plus Yagi antenna	Health	Jana HC	KDDP/HEA 32/08	2008	331,854	1,700	195	Written-off
172	Desk top Phone plus Yagi antenna	Health	Bukasa HC III	KDDP/HEA 33/08	2008	331,854	1,700	195	Written-off
173	Desk top Phone plus Yagi antenna	Health	Bufumira HC III	KDDP/HEA 34/08	2008	331,854	1,700	195	Written-off
174	Desk top Phone plus Yagi antenna	Health	Bubeke HC III	KDDP/HEA 35/08	2008	331,854	1,700	195	Written-off
175	Desk top Phone plus Yagi antenna	Health	Mazinga	KDDP/HEA 36/08	2008	331,854	1,700	195	Written-off
176	Desk top Phone plus Yagi antenna	Health	Lulamba HC III	KDDP/HEA 37/08	2008	331,854	1,700	195	Written-off
177	Procurement and installation solar systems power	Health	Bwendero HC III	NOT CODED	2011	21,341,333	2,600	8,208	Written-off
178	Procurement and installation solar systems power	Health	Mugoye HC III	NOT CODED	2011	21,341,333	2,600	8,208	Written-off
179	Procurement and installation solar systems power	Health	Mazinga HCIII	NOT CODED	2011	21,341,333	2,600	8,208	Written-off
180	Kalangala Health Centre IV Mortuary	Health	Kalangala T/C	KDDP/HEA 71/10	2010	17,600,000	2,600	6,769	Fair/functional
<b>Total for Health Sector</b>						<b>268,419,105</b>		<b>141,273</b>	
<b>Percentage</b>						<b>3%</b>		<b>4%</b>	
<b>Grand Total</b>						<b>9,990,761,227</b>		<b>4,010,513</b>	

## **Annex 9: Household Survey Analyses**

### **KALANGALA DISTRICT DEVELOPMENT PROGRAMME END OF PROGRAMME EVALUATION**

#### **HOUSEHOLD SURVEY REPORT**

Conducted

23rd April – 8th May 2018

Prepared by: GOPA Consultants

August 2018





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## **LIST OF ACRONYMS**

<b>AIDS</b>	Acquired Immune Deficiency Syndrome
<b>CBO</b>	Community Based Organisation
<b>CG</b>	Central Government
<b>FAL</b>	Functional Adult Literacy
<b>HC</b>	Health Centre
<b>HF</b>	Health Facility
<b>HH</b>	Household
<b>HIV</b>	Human Immunodeficiency Virus
<b>HU</b>	Health Unit
<b>ICEIDA</b>	Iceland International Development Agency
<b>KCHSP</b>	Kalangala Comprehensive Health Services Project
<b>KDDP</b>	Kalangala District Development Programme
<b>KDLG</b>	Kalangala District Local Government
<b>MDD</b>	Music, Dance, and Drama
<b>MTR</b>	Mid-Term Review
<b>NAADS</b>	National Agricultural Advisory Services
<b>NGO</b>	Non-Government Organisation
<b>O&amp;M</b>	Operation And Maintenance
<b>OVC</b>	Orphans and Other Vulnerable Children
<b>OWC</b>	Operation Wealth Creation
<b>PLE</b>	Primary Leaving Examinations
<b>PLWAs</b>	People Living With AIDS
<b>PWDs</b>	People With Disabilities
<b>SACCOs</b>	Saving and Credit Cooperative Organisations
<b>UGX</b>	Uganda Shillings
<b>VHTs</b>	Village Health Teams
<b>VIP</b>	Ventilated Improved Pit (latrine)
<b>VSLs</b>	Village Savings and Loans Society
<b>WATSAN</b>	Water and Sanitation
<b>WUC</b>	Water User Committee

### **1.1 Background**

The Kalangala District Development Programme (KDDP) was supported by ICEIDA under the project “Support to the Implementation of Kalangala District Development Programme”. The Programme support was in five main sectors, namely: Local government administration, fisheries and WATSAN, education & sports, health, and tourism, with special focus on the provision of quality services to the fishing communities on Ssesse Islands. The choice of ICEIDA to operate in fishing communities such as Kalangala District and other hard-to-reach island communities in Lake Victoria stemmed from the need for special intervention to facilitate access to community services.

Kalangala District is administratively divided into two (2) counties (i.e. Bujumba County and Kyamuswa County), seven (7) lower local governments (6 sub-counties and 1 Town Council), 15 parishes and 2 town wards, and 92 villages. Bujumba County is composed of Bujumba Sub-county, Mugoye Sub-county, and Kalangala Town Council; and Kyamuswa County is composed of the sub-counties of Bubeke, Bufumira, Kyamuswa, and Mazinga.

The pillars of the district economy are fishing and agriculture<sup>1</sup>. The majority of the islanders have heavily depended on fishing. Tourism is another potential area for generating local revenue for the district, especially if support (some of which is expected from development partners) can be provided to conduct a baseline survey, develop a district tourism strategy / policy and mapping the tourism sites<sup>2</sup>. Due to its location, its climate and its relative isolation, the district can be turned into a tourist magnet<sup>3</sup>. Palm oil processing by BIDCo Uganda is another major economic activity in the district. This private palm oil processor has a plantation in Bujumba County<sup>4</sup>; and has contracted out grower farmers to grow palm oil trees on contract and subsequently sell their produce to the processor. Livestock farming and logging are other economic activities practiced in the district.

### **1.2 Kalangala District Household Survey**

Kalangala District Household Survey was one of the key tasks undertaken for the final evaluation of the Kalangala District Development Program (KDDP). KDDP implemented the programme, with the overall objective of contributing to sustainable livelihoods and equitable social development. The Household Survey was conducted mainly to assess programme performance, its outcome / impact and sustainability, as well as to document lessons that can be used to improve the planning of similar programmes in future.

<sup>1</sup> [https://en.wikipedia.org/wiki/Kalangala\\_District](https://en.wikipedia.org/wiki/Kalangala_District)

<sup>2</sup> Kalangala District Development Programme for 2015/2016 – 2019/2020 (Page 10)

<sup>3</sup> Tourist facilities are rudimentary in most areas, although improvements in infrastructure (accommodations, road networks, communications, electricity supply, piped water etc.) are slowly improving.

<sup>4</sup> This activity has not been embarked upon much in Kyamuswa County.

### 1.2.1 Sampled Villages and Households

For the Household Survey, 34 villages were sampled in the whole district – 22 were “intervention location”<sup>5</sup> villages (**11 from each of the two counties**) and 12 were ‘control’ villages (**5 from Bujumba County and 7 from Kyamuswa County**). The control villages were included to see whether there is any significant development improvement brought about by KDDP in ‘intervention location’ villages, meaning geographical locations in which physical structures / infrastructures related to fisheries and water and sanitation (WATSAN) sectors have been rehabilitated / constructed, but also to some degree schools and health centres. However, with respect to the education and health interventions, it should be noted that the “control villages” do not carry the usual meaning of *control groups* (i.e. groups that received no benefit or a “neutral” benefit), because virtually all villages in Kalangala District benefited from KDDP interventions in varying degrees depending on the sectors, though the ‘intervention location’ villages may have benefited to a greater extent. It is therefore apparent that the distinction between the *intervention* and *control* villages is the degree of access to the service facilities (e.g. schools, health centres, improved fish handling facilities, water and sanitation facilities), mainly defined by physical distance. For example, in the education sector one primary school may serve several villages in a parish<sup>6</sup> and since *all* schools in the district were supported, the distinction between the intervention and control villages by default becomes “blurred”, whereas for sectors like fisheries and WATSAN, a clear distinction can be made between *intervention* and so-called *control* villages.

Basing on the number of households as per the 2014 Population and Housing Census – Uganda, the proportion of households was 0.49 for Bujumba County and 0.51 Kyamuswa County. Considering that the household survey planned to cover 350 households, the proportionate share for Bujumba County was **172** households, and **178** for Kyamuswa County. However, due to rounding off to the nearest digit, the number of households in Bujumba County totalled to **173** and Kyamuswa County totalled to **182**. Thus, the total sample size of households was adjusted to **355**. Refer to *Table 1.1* for the summary and *Appendix 3* for details.

**Table 1.1: Household Sample Size by County**

Category	Number of Households in County:		Total
	Bujumba	Kyamuswa	
‘Intervention Location’ Village	126	114	240
‘Control’ Village	47	68	115
<b>Total</b>	<b>173</b>	<b>182</b>	<b>355</b>

<sup>5</sup> For purposes of the HH Survey “intervention Location” villages were the villages and/or landing sites where KDDP supported projects / interventions were located. Control villages were those villages where there were no KDDP supported projects / interventions. The interventions considered exclude administrative infrastructure e.g. sub-county offices and district headquarters.

<sup>6</sup> Government of Uganda policy is to have at least one Government-aided primary school per parish.

In order to determine the proportionate number of households to be selected from each sampled village in each county, the formula below was used:

$$V_s = \frac{T_v}{T_c} \times C_s$$

**Where:**

- V<sub>s</sub>** - Number of households sampled in the selected village.
- T<sub>v</sub>** - Total Number of Households in the sampled village
- T<sub>c</sub>** - Total Number of Households in the County
- C<sub>s</sub>** - Number of Households sampled in the County

Refer to *Appendix 1* for the details of the villages and number of households sampled and covered per village.

### **1.2.2 Training of Enumerators and Data Collection**

#### **1.2.2.1 Training of Enumerators**

The training of enumerators was conducted on 23<sup>rd</sup> and 24<sup>th</sup> April 2018 at a venue provided by Kalangala District Local Government at the district headquarters.

Four (4) enumerators, and a ‘reserve’ enumerator were trained. The ‘reserve’ enumerator was to be called upon in case of any unforeseen events that would prevent any of the four enumerators to continue with the exercise. Refer to *Appendix 4* for the list of the Household Survey Team.

The training constituted a brief background of KDDP / ICEIDA interventions, role of GOPA consultants during the end of term evaluation; detailed explanation and how to administer the questionnaire; pretesting; and feedback after the pre-test. As part of the training, pretesting of the questionnaire was conducted in the nearby Kizzi village. During pre-testing, each enumerator administered the questionnaire to four households. The data analyst participated in the training.

#### **1.2.2.2 Data Collection**

The data collection exercise started on 25<sup>th</sup> April and ended on the 8<sup>th</sup> May 2018 as planned. Refer to *Appendix 3* for detailed itinerary of the fieldwork. All the sampled villages and the sampled number of households were covered. Refer to *Appendix 2* for the details of the households covered in each sampled village.

Data were collected from sampled households in Kalangala District using questionnaires administered by enumerators (see *Appendix 1*). Data were sought from each household mainly: i) Household demographics; ii) Health; iii) Income, expenditure, assets, and welfare; iv) Water, sanitation, and household conditions; and v) Development interventions and sustainability.

During the data collection exercise on the main Island, the vehicle provided by the district was utilised as well as during the transportation of the team to and from the landing site of Mweena – where the team boarded the boat provided to the various villages on other Islands of Kalangala District.

Also, due to the stormy weather on the lake, the speedboat provided by the Embassy of Iceland was utilised by the survey team to travel to Mazinga Sub-county on 8<sup>th</sup> May 2018.

### **1.2.3 Data Entry, Analysis, and Report Writing**

Data entry was embarked upon in Kalangala, but could not be completed, and was thus completed in Kampala. With the help of extra manpower (i.e. 3 more people), the work was completed on 19<sup>th</sup> May 2018. Thereafter data analysis and report writing were embarked upon.

### **1.2.4 Challenges**

The major challenges faced by the team during the household survey were the following:

- i) The weather was not good most of the time, due to heavy rains, which forced the team to travel and work during the rain much as none of the team members had a raincoat. Furthermore, the stormy weather, at times led to long travel durations on the lake resulting in late arrival in the villages on other islands. This called for the participation of the National Expert and Data Analyst in the interviewing of household respondents to ensure completion of the sampled households.
- ii) Unavailability of complete household lists in many of the villages sampled, which necessitated on-spot sampling with the help of respective village leaders.
- iii) The distances between the sampled villages on some of the islands, were rather long and required transporting the team using motorcycles (locally referred to as Boda-Boda). This was especially on Bukasa Island<sup>7</sup> and Bubeke Island<sup>8</sup>.

### **1.2.5 Logistical Support from Kalangala District Local Government and Embassy of Iceland - Uganda**

The district provided the survey team with the following:

- i) One (1) Fibre Boat with a Coxswain.
- ii) One (1) vehicle with a driver.

The Embassy of Iceland – Uganda provided the survey team with a Speed Boat.

This chapter broadly outlined the background to the household survey, its organisation, and major challenges faced by the survey team. The subsequent chapters (2 - 7) provide the summary of findings during the survey.

*Chapter Two* provides the results on the household characteristics.

*Chapter Three* contains the results on education characteristics of the members of households including highest level of education completed, and literacy. The other aspects include distance or time taken to reach the nearest Government-Aided Primary School, and FAL class, attendance of school by children of school-going age, and views of respondents on the quality of education provided by Government-Aided primary schools.

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<sup>7</sup> The team landed at Namirembe landing site, and was transported on *Boda-boda* from Buzingo through Buwanga to Lwanabatya and returned to Kisaba landing site. The team spent the night in Kisaba. On the second day, the team was transported to the villages of Buwazi and Nakibanga.

<sup>8</sup> The team landed at Lwaazi-Bubeke and some team members travelled on *Boda-boda* from Bubeke to Kande village.

*Chapter Four* has results on health, which include distance or time taken to reach the nearest Government health unit, health service experience encountered, and views of respondents on the quality of health services provided by Government health units.

*Chapter Five* summarises the findings on the major sources of income for households; changes in the welfare of households; savings; expenditure; and assets.

Chapter Six gives the results on water, sanitation, and housing conditions. On water the aspects results include the main sources of water used by households; the time taken to collect the water; whether the water is clean and safe; whether the water is free or paid for; and maintenance status of the water source. Sanitation covered sanitation facilities used by household members; state of cleanliness; sanitation practices and knowledge; and participation of household members in sanitation meetings in their villages. Housing conditions provides results on the materials used for the roof, walls, and floor for the households covered.

*Chapter Seven* summarises results on the development interventions undertaken whether by Government or development partners under the various sectors; benefits for the village communities: category of beneficiaries and how they benefitted; and participation of members of the household in the planning meetings and subsequent participation in the implementation of activities. The chapter also provides, under sustainability, results on any perceived change in the provision of public facilities and services in the various sectors.

## CHAPTER TWO: HOUSEHOLD CHARACTERISTICS

This chapter provides information collected on the *household* characteristics during the survey.

### 2.1 Households

The household survey covered 355 households – including 231 male-headed households (65.1%) and 124 female-headed households (34.9%) from KDDP ‘intervention location’ villages as well as ‘control’ villages. The figures from the MTR were: 79% male-headed and 21% female headed. In the baseline survey from 2008, covering the five fishing villages only (Kachungwa, Kasekulo, Kisaba, Kyagalanyi and Namisoke), the male-headed villages ranked between 74% and 91%, with three villages being in the range 74-76%. One reason for this change could majorly be attributed to the emigration of males from various islands of the district, who had been involved in fishing; and could no longer cope when strict enforcement of fishing regulations started.

**Table 2.1: Number of Households Covered by Sub-County / Town Council by Gender**

Sub-county / Town Council	Number of Households in:						Grand Total
	Intervention Location Villages		Control Villages		Total		
	Male	Female	Male	Female	Male	Female	
<b>Bujumba County</b>							
1) Bujumba	36	16	19	6	55	22	77
2) Kalangala Town Council	10	9	14	8	24	17	41
3) Mugoye	28	27			28	27	55
<b>Bujumba County - Total</b>	<b>74</b>	<b>52</b>	<b>33</b>	<b>14</b>	<b>107</b>	<b>66</b>	<b>173</b>
<b>Kyamuswa County</b>							
1) Bubeke	23	5	15	6	38	11	49
2) Bufumira	32	7	10	12	42	19	61
3) Kyamuswa	25	12	12	10	37	22	59
4) Mazinga	6	4	1	2	7	6	13
<b>Kyamuswa County - Total</b>	<b>86</b>	<b>28</b>	<b>38</b>	<b>30</b>	<b>124</b>	<b>58</b>	<b>182</b>
<b>Grand Total</b>	<b>160</b>	<b>80</b>	<b>71</b>	<b>44</b>	<b>231</b>	<b>124</b>	<b>355</b>

#### 2.1.1 Duration of Stay

Data were collected to establish the duration of existence of each sampled household in a particular village. The following table provides the summary of findings:

**Table 2.2: Households by Duration of Stay in the Village by Gender**

Duration of Stay in Village	Intervention Location Villages		Control Villages		Total		Grand Total
	Male	Female	Male	Female	Male	Female	
Below 1 year	1	0	0	0	1	0	1
1 – 5 years	18	7	5	5	23	12	35
6 – 10 years	39	13	18	13	57	26	83
Above 10 years	102	60	48	26	150	86	236
<b>Grand Total</b>	<b>160</b>	<b>80</b>	<b>71</b>	<b>44</b>	<b>231</b>	<b>124</b>	<b>355</b>

From *Table 2.2* above, the majority of the households (**66.5%**) were in their respective villages before and during the implementation of KDDP activities i.e. had stayed for more than 10 years. An additional **23.4%** of the households were in Kalangala District during the implementation of KDDP activities – these had reportedly stayed in their villages for 6 – 10 years.

### 2.1.2 Previous Residence of Respondents

Information was also sought on the previous residence for each of the household heads. The results (*Table 2.3*) show that the previous residences of the majority of the household heads (**67.0%**) were outside Kalangala District; **32.7%** were from within Kalangala District (either same village or other parts of the district); and only **0.3%** (1 respondent) from outside Uganda.

**Table 2.3: Respondents by Previous Residence by Gender**

Previous Residence	Number of Respondents:						Grand Total
	Intervention Location Villages		Control Villages		Total		
	Male	Female	Male	Female	Male	Female	
1) Kalangala District ( <i>within</i> )	47	34	24	11	71	45	<b>116</b>
2) Outside Kalangala ( <i>but in Uganda</i> )	113	46	46	33	159	79	<b>238</b>
3) Outside Uganda	0	0	1	0	1	0	<b>1</b>
<b>Total</b>	<b>160</b>	<b>80</b>	<b>71</b>	<b>44</b>	<b>231</b>	<b>124</b>	<b>355</b>

### 2.1.3 Place of Origin

Efforts were also made to collect information on the origin of the heads of household. The findings revealed that the majority of the household heads (**67.6%**) were migrants to Kalangala District, coming from other parts of Uganda; **32.1%** were from within Kalangala District; and only **0.3%** (1 respondent) from outside Uganda (*Table 2.4*).

**Table 2.4: Heads of Household by District or Country of Origin by Gender**

Place of Origin	Number of Respondents:						Grand Total
	Intervention Location Villages		Control Villages		Total		
	Male	Female	Male	Female	Male	Female	
1) Kalangala District ( <i>within</i> )	46	36	20	12	<b>66</b>	<b>48</b>	<b>114</b>
2) Outside Kalangala ( <i>but in Uganda</i> )	114	44	50	32	<b>164</b>	<b>76</b>	<b>240</b>
3) Outside Uganda	-	-	1	-	<b>1</b>	-	<b>1</b>
<b>Total</b>	<b>160</b>	<b>80</b>	<b>71</b>	<b>44</b>	<b>231</b>	<b>124</b>	<b>355</b>

## 2.2 Household Population

Information was collected on each of the members of the household (i.e. only members who normally live and have meals together in the household). The gender and age of each member of the household were recorded. In addition, for all members aged 10 years and above, information on their marital status and major occupation in the past 30 days was collected.

### 2.2.1 Household Size

Information on the number of people in the households has been summarised in *Table 2.4*. Notably, the number of households with 1-3 people has gone down from 45% in the MTR to 32% in the end evaluation, meaning the families have become larger during the last 8 years.

**Table 2.5: Household Size by Gender of Head of Household**

Number of People in Household / Size of Household	Number of Households in:							Grand Total	
	Intervention Location Villages		Control Villages		Total				
	Male	Female	Male	Female	Male	Female	Number	Prop. (%)	
1	14	5	4	8	18	13	31	8.7%	
2	11	12	6	6	17	18	35	9.9%	
3	20	12	10	5	30	17	47	13.2%	
4	30	16	16	14	46	30	76	21.4%	
5 - 10	80	32	33	11	113	43	156	43.9%	
11 and above	5	3	2	0	7	3	10	2.8%	
<b>Total</b>	<b>160</b>	<b>80</b>	<b>71</b>	<b>44</b>	<b>231</b>	<b>124</b>	<b>355</b>	<b>100.0%</b>	

### 2.2.2 Household Population by Age Group

The information obtained shows that there were **1,659** people in the sampled households – **790** males and **869** females. The details of the number of people in each age group has been summarised in *Table 2.6*.

**Table 2.6: Number of People by Age Group by Gender**

Age Group	Number Of People in:							Grand Total	
	Intervention Location Villages		Control Villages		Total				
	Male	Female	Male	Female	Male	Female	Number	Proportion (%)	
Below 1 year	13	5	3	4	16	9	25	1.5%	
1 – 5 years	84	91	20	48	104	139	243	14.6%	
6 – 10 years	83	97	32	29	115	126	241	14.5%	
11 – 15 years	94	65	27	32	121	97	218	13.1%	
16 – 20 years	63	51	24	23	87	74	161	9.7%	
21 – 25 years	34	53	10	27	44	80	124	7.5%	
26 – 30 years	28	53	15	28	43	81	124	7.5%	
31 – 35 years	36	35	10	23	46	58	104	6.3%	
36 – 40 years	35	43	17	21	52	64	116	7.0%	
41 – 45 years	34	29	14	20	48	49	97	5.8%	
46 – 50 years	38	26	18	11	56	37	93	5.6%	
51 – 55 years	15	9	12	6	27	15	42	2.5%	
56 – 60 years	9	13	2	4	11	17	28	1.7%	
Above 60 Years	16	16	4	7	20	23	43	2.6%	
<b>TOTAL</b>	<b>582</b>	<b>586</b>	<b>208</b>	<b>283</b>	<b>790</b>	<b>869</b>	<b>1,659</b>	<b>100.0%</b>	

### 2.2.3 Household Population by Marital Status

Information was collected from households on the marital status of people aged 10 years and above. The underlying reason was to find out whether there were still cases of early marriages, especially for girls. There was no body married for all people aged 10 – 17 years (*Table 2.7*).

**Table 2.7: Number of People by Marital Status by Gender**

Marital Status	Number of People Aged (Years):									Grand Total
	10 - 13			14 - 17			18 years and Above			
	Male	Female	Total	Male	Female	Total	Male	Female	Total	
1) Married	-	-	-	-	-	-	251	243	494	494
2) Single	110	86	196	73	64	137	135	149	284	617
3) Divorced / Separated	-	-	-	-	-	-	19	59	78	78
4) Widowed	-	-	-	-	-	-	-	21	21	21
<b>TOTAL</b>	<b>110</b>	<b>86</b>	<b>196</b>	<b>73</b>	<b>64</b>	<b>137</b>	<b>405</b>	<b>472</b>	<b>877</b>	<b>1,210</b>

### 2.2.4 Household Population by Major Occupation

Information obtained on the activity status / occupation of household members (aged 10 years and above) during the past one (1) month prior to the survey is given in *Table 2.8*. There seems to be a significant change in occupational structure since the MTR (2010), although the question asked in the MTR was somewhat different. Whereas only 13% is involved in fisheries, 24% were involved in 2010. This reduction might be a result of the palm oil production in the district, and the cracking down on illegal fishing by Government. On the other hand, 34% are now schooling whereas only 6% were students in 2010. This may be attributed to the improvement in school infrastructure in the district and the efforts made by stakeholders to sensitise parents in the district on the importance of taking their children to school. Furthermore, around 12% is occupied with “Sales & Services”, where as in 2010 the proportion was 29% (“Business”). Therefore, this could be attributed to the: i) people who own land and/or people without land but could hire, taking advantage of the new economic activity growing palm trees<sup>9</sup>; and ii) high emigration of people who could no longer cope with the fishing requirements, and as such they had to look for alternative income-generating activities on the main land. This certainly also affected the people who had been engaged in business due to the market provided by these fishing communities<sup>10</sup>.

<sup>9</sup> See also Table 5.1 (b)

<sup>10</sup> It was noted that some landing sites had actually been closed e.g. Dajje.

**Table 2.8: Population by Category of Main Occupation in the Last 30 Days by Age Category**

Category of Occupation in the Last 30 days	Number of People in Aged (Years):							
	10 – 17			18 and Above			Grand Total	
	Male	Female	Total	Male	Female	Total	Number	Proportion (%)
1) Employer	-	-	-	4	3	7	7	0.6%
2) Fisheries	-	-	-	127	30	157	157	13.0%
3) Mining & Quarrying	-	2	2	-	-	-	2	0.2%
4) Manufacturing	-	-	-	2	1	3	3	0.2%
5) Electricity, Gas & Water	-	-	-	2	4	6	6	0.5%
6) Construction	-	-	-	7	1	8	8	0.7%
7) Sales & Services	3	2	5	32	104	136	141	11.7%
8) Hotels & Restaurants	-	1	1	5	35	40	41	3.4%
9) Transport, Storage & Communication	-	-	-	8	-	8	8	0.7%
10) Education	-	-	-	2	8	10	10	0.8%
11) Health & Social Work	-	-	-	5	6	11	11	0.9%
12) Pupil / Student	174	140	314	60	35	95	409	33.8%
13) Others <sup>8</sup> (e.g. farming)	6	4	10	151	246	397	407	33.6%
<b>TOTAL</b>	<b>183</b>	<b>149</b>	<b>332</b>	<b>405</b>	<b>473</b>	<b>878</b>	<b>1,210</b>	<b>100.0%</b>

## CHAPTER THREE: EDUCATION

Data on education were collected on literacy, distance to or time taken to reach the nearest government-aided primary school as well as FAL class, primary school attendance and dropout, and views on the quality of education provided by Government-aided primary schools in the district.

Kalangala District has 26 primary schools, all of which benefitted under KDDP. Therefore, with a total of 17 parishes in the whole district, presumably each parish has at least one primary school (in line with Government Policy of one primary school per parish) and as such all villages should have benefitted from the KDDP support to the schools. This notwithstanding, given that in Uganda *distance* is one of the key barriers identified to have the most effect on learning outcomes<sup>11</sup>, the distinction between "intervention location" and "control" villages should as such be understood as the degree of access to the primary schools mainly defined by physical distance<sup>12</sup>.

### 3.1 Literacy

Information was collected on the highest level of education completed for all members of households aged 6 years and above. Information was also collected on the ability of each of these household members to read and write (in either English or any other language).

#### 3.1.1 Population by Highest Level Attained

The results obtained on the highest level of education completed for all members of households aged 6 years and above are summarised in *Table 3.1*.

**Table 3.1: Distribution of Population by Highest Level of Education Completed**

Highest Level Attained	Number of People in:									
	Intervention Location Villages				Control Villages				Grand Total	
	Male	Female	Total		Male	Female	Total		Number	Prop. (%)
			Number	Prop. (%)			Number	Prop. (%)		
1) No Schooling	13	19	32	3.5%	6	11	17	4.4%	49	3.8%
2) P1 – P4	111	102	213	23.2%	43	35	78	20.3%	291	22.3%
3) P5 – P7	159	150	309	33.6%	40	79	119	31.0%	428	32.8%
4) Junior 1 - 3	5	2	7	0.8%	-	-	-	-	7	0.5%
5) S1 – S3	67	84	151	16.4%	34	53	87	22.7%	238	18.3%
6) S4	44	56	100	10.9%	23	19	42	10.9%	142	10.9%
7) Advanced Level	29	21	50	5.4%	16	9	25	6.5%	75	5.8%
8) Tertiary	26	31	57	6.2%	11	5	16	4.2%	73	5.6%
<b>Total</b>	<b>454</b>	<b>465</b>	<b>919</b>	<b>100.0%</b>	<b>173</b>	<b>211</b>	<b>384</b>	<b>100.0%</b>	<b>1,303</b>	<b>100.0%</b>

*Note:* P → Stands for Primary and S → Stands for Senior

From *Table 3.1* above, **3.8%** have not had any schooling at all. In the intervention location villages the proportion was **3.5%**, while in the control villages it was **4.4%**.

<sup>11</sup> In many rural primary schools, absenteeism among pupils and teachers is due to failure to provide meals, forcing students to go back home during lunch hour to eat. However due to long distances to and from school, some of these pupils do not return, resulting in high rates of pupils' absenteeism in the afternoon. This also applies to teachers. This results in less time spent in constructive learning.

<sup>12</sup> So 'Intervention location' villages under education sector are those where supported primary schools are located, and control villages are those villages where there are no schools much as some of them were benefitting from the schools.

Overall, **4.9%** of the primary school going children (6 – 13 years) was not at school at all. The proportion is about the same in both intervention location and control villages (Table 3.2).

**Table 3.2: Distribution of the Population Aged 6 - 13 Years by Highest Level of Education Completed**

Highest Level Attained	Number of People in:									
	Intervention Location Villages				Control Villages				Grand Total	
	Male	Female	Total		Male	Female	Total		Number	Prop. (%)
			Number	Prop. (%)			Number	Prop. (%)		
1) No Schooling	5	7	12	4.9%	1	3	4	5.0%	16	4.9%
2) P1 – P4	68	72	140	57.4%	33	20	53	66.3%	193	59.6%
3) P5 – P7	49	43	92	37.7%	10	13	23	28.8%	115	35.5%
<b>Total</b>	<b>122</b>	<b>122</b>	<b>244</b>	<b>100.0%</b>	<b>44</b>	<b>36</b>	<b>80</b>	<b>100.0%</b>	<b>324</b>	<b>100.0%</b>

### 3.1.2 Reading and/or Writing Ability of Household Population

Information obtained on the ability of each of these household members to read and write (in either English or any other language), is as summarised in Table 3.3. The results show that 80% of the household population (10 years and above) can read and/or write in English – this is **81.3%** in intervention location villages and **76.8%** in control villages. Generally, **20%** can neither read and/or write in English – the proportion is **18.6%** in intervention location villages and **23.2%** in control villages. With respect to literacy in other languages, **82.4%** can read and/or write – the proportion is **82.9%** in intervention location villages, and **81.1%** in control villages. **17.3%** can neither read and/or write in any other language (majorly their mother languages depending on the place of origin) – in intervention location villages it is **17.1%** and **18.9%** in control villages.

**Table 3.3: Population (Aged 10 years and above) by Literacy Level by Gender**

Ability in:	Intervention Location Villages				Control Villages				Grand Total	
	Male	Female	Total		Male	Female	Total		Number	Prop. (%)
			Number	Prop. (%)			Number	Prop. (%)		
<b>English</b>										
1) Read only	78	69	147	17.5%	28	41	69	18.6%	216	17.9%
2) Read and write	269	266	535	63.8%	105	111	216	58.2%	751	62.1%
3) Neither Read Nor Write	78	78	156	18.6%	29	57	86	23.2%	242	20.0%
<b>Total</b>	<b>425</b>	<b>413</b>	<b>838</b>	<b>100.0%</b>	<b>162</b>	<b>209</b>	<b>371</b>	<b>100.0%</b>	<b>1,209</b>	<b>100.0%</b>
<b>Other Languages</b>										
1) Read only	32	21	53	6.3%	10	10	20	5.4%	73	6.1%
2) Read and write	309	331	640	76.6%	126	154	280	75.7%	920	76.3%
3) Neither Read Nor Write	82	61	143	17.1%	27	43	70	18.9%	213	17.7%
<b>Total</b>	<b>423</b>	<b>413</b>	<b>836</b>	<b>100.0%</b>	<b>163</b>	<b>207</b>	<b>370</b>	<b>100.0%</b>	<b>1,206</b>	<b>100.0%</b>

### 3.2 Distance to Or Time Taken (to Reach) the Nearest Government Primary School

Data were also collected on the distance to the nearest Government-aided primary school or time taken to reach such schools In case these are located on other Islands.

**Table 3.4 (a): Distance (Km) to the Nearest Government Primary School by Number of Households**

Distance (Km)	Number of Households in:					
	Intervention Location Villages		Control Villages		Grand Total	
	Number	Proportion (%)	Number	Proportion (%)	Number	Proportion (%)
1) Below 1 Kilometre	116	48.3%	22	19.1%	138	38.9%
2) 1 – 2 Kilometres	80	33.3%	38	33.0%	118	33.2%
3) 3 kilometres and above	41	17.1%	41	35.7%	82	23.1%
4) On another Island	3	1.3%	14	12.2%	17	4.8%
<b>TOTAL</b>	<b>240</b>	<b>100.0%</b>	<b>115</b>	<b>100.0%</b>	<b>355</b>	<b>100.0%</b>

The results [Table 3.4 (a)] show that **72.1%** of the households were within a distance of 2 kilometres to the nearest Government-Aided primary school. With respect to the same indicator, the proportion in the intervention location villages is **81.6%** and **52.1%** in the control villages.

On the other hand **23.1%** were 3 kilometres away from the schools – in intervention location villages it is **17.1%** and **35.7%** in control villages. Finally, **4.8%** of households had such primary schools on other islands. – **1.3%** in intervention location villages and **12.2%** in control villages.

Of the proportion of households with schools on other Islands, the proportion taking 1 – 2 hours to reach school was **33.3%** (1 respondent) in intervention location village, and **64.3%** in control villages. In control villages **35.7%** was taking 3 hours and above; while **66.7%** (2 respondents) in intervention location villages was not certain of the time it takes to reach school [Table 3.4 (b)]. It was learnt during the course of the survey that the unpredictable weather on the lake led to irregular attendance of school, as boat owners are reluctant to risk their boats.

**Table 3.4 (b): Time Taken (Hours) to Reach the Nearest Government Primary School by Number of Households**

Time Taken (Hours)	Households in:					
	Intervention Location Villages		Control Villages		Grand Total	
	Number	Proportion (%)	Number	Proportion (%)	Number	Proportion (%)
1) Below 1 Hour	-		-	-	-	.
2) 1 – 2 Hours	1	33.3%	9	64.3%	10	58.8%
3) 3 Hours and above	-		5	35.7%	5	29.4%
4) Not Certain	2	66.7%	-	-	2	11.8%
<b>TOTAL</b>	<b>3</b>	<b>100.0%</b>	<b>14</b>	<b>100.0%</b>	<b>17</b>	<b>100.0%</b>

**Note:** This only refers to households with primary schools on other islands.

### 3.3 Distance to Or Time Taken (to Reach) the nearest Functional Adult Literacy Class

Information was sought from households to assess accessibility to Functional Adult Literacy (FAL) classes. The findings are as summarised in [Table 3.5 (a)].

**Table 3.5 (a): Distance (Km) to the FAL Class by Number of Households**

Distance (Km)	Number of Households:					
	Intervention Villages		Control Villages		Grand Total	
	Number	Proportion (%)	Number	Proportion (%)	Number	Proportion (%)
1) Below 1 Kilometre	11	4.6%	2	1.7%	13	3.7%
2) 1 – 2 Kilometres	3	1.3%	9	7.8%	12	3.4%
3) 3 kilometres and above	2	0.8%	1	0.9%	3	0.8%
4) Not Certain	14	5.8%	1	0.9%	15	4.2%
5) Not existing anymore	209	87.1%	102	88.7%	311	87.6%
6) On other island	1	0.4%	-	0.0%	1	0.3%
<b>TOTAL</b>	<b>240</b>	<b>100.0%</b>	<b>115</b>	<b>100.0%</b>	<b>355</b>	<b>100.0%</b>

From the results in Table 3.5 (a), **6.7%** in intervention location villages indicated existence of FAL classes, and **7.9%** in control villages. Apparently, a large proportion of respondents denied existence and/or knowledge of any FAL classes – **87.1%** in intervention location villages and **88.7%** in control villages.

The only respondent, who indicated existence of a FAL class on another island, indicated that it took below 1 hour to reach the class [Table 3.5 (b)].

**Table 3.5 (b): Time Taken (Hours) to Reach the Nearest FAL Class by Number of Households**

Time Taken (Hours)	Number of Households:		Grand Total
	Intervention Location Villages	Control Villages	
1) Below 1 Hour	1	-	1
2) 1 – 2 Hours	-	-	-
3) 3 Hours and above	-	-	-
<b>TOTAL</b>	<b>1</b>	<b>-</b>	<b>1</b>

Note: This only refers to a household with FAL class on another island.

### 3.4 Primary School Attendance and Drop Out

#### 3.4.1 Primary School Attendance

The survey endeavoured to probe attendance of school by children of primary school-going age (6 – 13 years). Furthermore, information was also sought to find out whether there were any children that had missed attending school in the past 30 days prior to the survey and the major reasons for this.

**Table 3.6: Primary School Attendance by Number of Households**

Number of Primary School Children Attending (6 – 13 years)	Number of Households			
	Intervention Location Villages	Control Villages	Grand Total	Proportion (%)
1	46	25	71	20.0%
2	39	12	51	14.4%
3	32	8	40	11.3%
4	11	6	17	4.8%
5	4	1	5	1.4%
6	4	1	5	1.4%
7	2	-	2	0.6%
8	1	-	1	0.3%
9	-	-	-	-
10	1	-	1	0.3%
None	100	62	162	45.6%
<b>Total</b>	<b>240</b>	<b>115</b>	<b>355</b>	<b>100.0%</b>

From *Table 3.6* above, the proportion of households having children attending primary school was **54.4%**; and **45.6%** did not have any child attending primary school<sup>13</sup>.

**Table 3.7 (a): Major Reasons for Missing Attending Primary School (in the Last 30 Days) by Number of Households**

Major Reason for Not Attending School in Last 30 Days	Number of Households in:					
	Intervention Location Villages		Control Villages		Grand Total	
	Number	Proportion (%)	Number	Proportion (%)	Number	Proportion (%)
1) Sickness	26	49.1%	14	45.2%	40	47.6%
2) Lack of Scholastic Materials	18	34.0%	12	38.7%	30	35.7%
3) Others	8	15.1%	4	12.9%	12	14.3%
4) Household Chores	1	1.9%	1	3.2%	2	2.4%
5) Monthly Periods for Girls	-	-	-	-	-	-
6) Lack of Interest in Education	-	-	-	-	-	-
<b>TOTAL</b>	<b>53</b>	<b>100.0%</b>	<b>31</b>	<b>100.0%</b>	<b>84</b>	<b>100.0%</b>

The results obtained on the major reasons for children missing attending school in the last 30 days prior to the household survey revealed that **49.1%** (in intervention location villages) and **45.2%** (in control villages) missed attending due to sickness. **34.0%** (in intervention location villages) and **38.7%** (in control villages) was due to lack of scholastic materials supposed to be provided by parents such

<sup>13</sup> These households are without children attending school included one-person households, those with grown up children, and others with children but were unable to send them to school for a variety of reasons.

as exercise books, pens, and pencils. **15.1%** (in intervention location villages) and **12.9%** (in control villages) was due to other reasons rather than monthly periods for girls, or lack of interest in education. **1.9%** (in intervention location villages) and **3.2%** (in control villages) was due to household chores. Refer to *Table 3.7 (a)*.

When a comparison is made between the two counties in the district, **53.5%** of households in Bujumba County had children missing attending school due to sickness whereas in Kyamuswa County the proportion was **41.5%**; **34.9%** in Bujumba County missed school due to lack of scholastic materials which parents are mandated to contribute and in Kyamuswa County it was **36.6%**; and missing school for other reasons (e.g. attending burials / funeral rites, bad weather) in Bujumba County the proportion was **9.3%** and **19.5%** in Kyamuswa County [*Table 37 (b)*].

**Table 3.7 (b): Major Reasons for Missing Attending Primary School (in the Last 30 Days) by Number of Households by County**

Major Reason for Not Attending School in Last 30 Days	Number of Households in:					
	Bujumba County		Kyamuswa County		Grand Total	
	Number	Proportion (%)	Number	Proportion (%)	Number	Proportion (%)
1) Sickness	23	53.5%	17	41.5%	40	47.6%
2) Lack of Scholastic Materials	15	34.9%	15	36.6%	30	35.7%
3) Others	4	9.3%	8	19.5%	12	14.3%
4) Household Chores	1	2.3%	1	2.4%	2	2.4%
5) Monthly Periods for Girls	-	-	-	-	-	-
6) Lack of Interest in Education	-	-	-	-	-	-
<b>TOTAL</b>	<b>43</b>	<b>100.0%</b>	<b>41</b>	<b>100.0%</b>	<b>84</b>	<b>100.0%</b>

### 3.4.2 Primary School Drop Out

Information was also sought on the children that had dropped out of school and the reasons for dropping out. *Table 3.8* summarises the findings during the survey.

**Table 3.8: Major Reasons for Dropping out of Primary School by Number of Households (for Children Aged 6 – 13 years)**

Major Reason for Dropping Out of School	Number of Households:					
	Intervention Location Villages		Control Villages		Grand Total	
	Number	Proportion (%)	Number	Proportion (%)	Number	Proportion (%)
1. High School Fees and/or School Charges	3	37.5%	2	50.0%	5	41.7%
2. Orphaned	1	12.5%	1	25.0%	2	16.7%
3. Lack of scholastic materials	2	25.0%	-	-	2	16.7%
4. Others	2	25.0%	-	-	2	16.7%
5. Pregnancy	-	-	1	25.0%	1	8.3%
6. Marriage	-	-	-	-	-	-
<b>TOTAL</b>	<b>8</b>	<b>100.0%</b>	<b>4</b>	<b>100.0%</b>	<b>12</b>	<b>100.0%</b>

The major reasons cited for children dropping out of school included high school fees and/or school charges – **37.5%** (in intervention location villages) and **50.0%** (in control villages); orphaned – **12.5%** (in intervention location villages) and **25.0%** (in control villages); lack of scholastic materials supposed to be provided by parents – **25.0%** (in intervention location villages). Refer to *Table 3.8*.

### 3.4.3 Never Attended School

The survey results revealed that some people aged 6 – 18 years had never attended school. The major reasons cited included disability and orphaned in intervention location villages. In control villages the reasons included orphaned, parental inability, and discrimination / parental decision.

**Table 3.9: Major Reasons for Never Attending Primary School by Number of Households (for People Aged 6 – 18 years)**

Major Reason for Never Attending School	Number of Households:				Proportion (%)
	Intervention Location Villages	Control Villages	Grand Total		
1) Orphaned	2	1	3	37.5%	
2) Discrimination / Parental Decision	-	3	3	37.5%	
3) Disability	1	-	1	12.5%	
4) Parental Inability	-	1	1	12.5%	
5) Have to Work / Help with Income generating Activities	-	-	-	-	
6) Lack of interest	-	-	-	-	
<b>TOTAL</b>	<b>3</b>	<b>5</b>	<b>8</b>	<b>100.0%</b>	

### 3.5 Views on the Quality of Education Provided

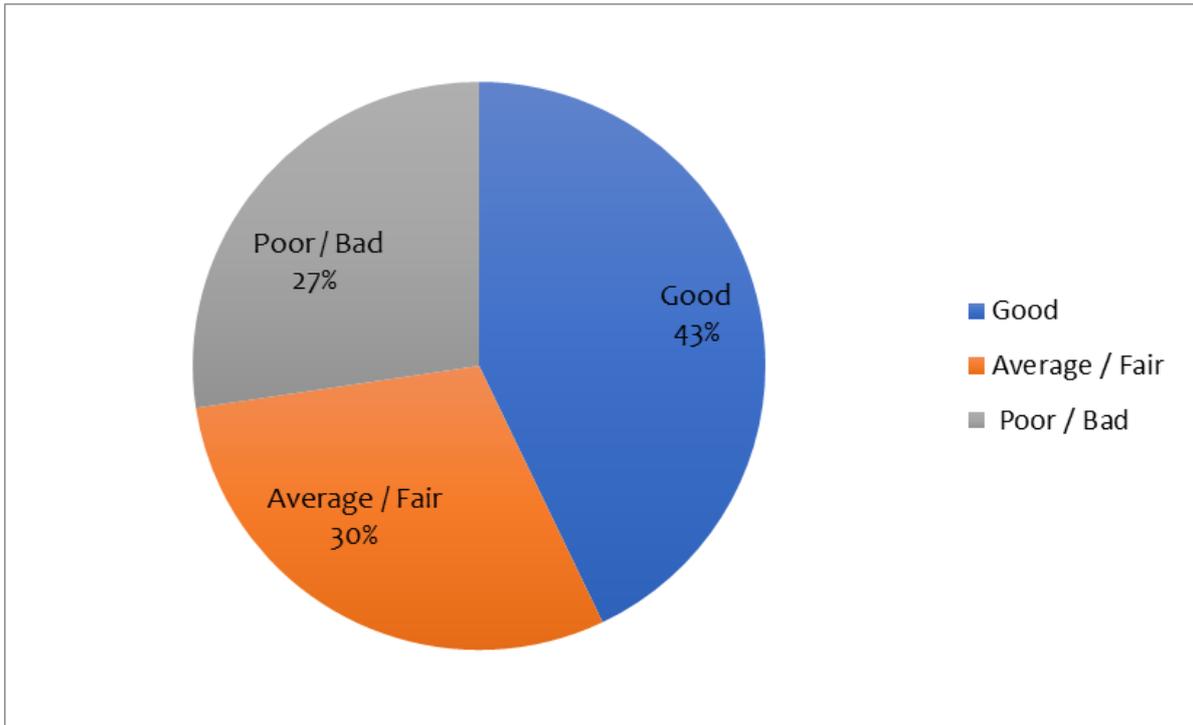
Views were solicited from the respondents on the quality of education the children in their areas were receiving at their respective Government-aided primary schools in Kalangala District. The views of the respondents are broadly categorised in *Table 3.10*.

**Table 3.10: Views of Respondent on the Quality of Education Children were Receiving at School**

Respondents' Perception on the Quality of Education	Number of Households:					
	Intervention Location Villages		Control Villages		Grand Total	
	Number	Proportion (%)	Number	Proportion (%)	Number	Proportion (%)
1) Good	89	37.1%	38	33.0%	127	35.8%
2) Average / Fair	65	27.1%	23	20.0%	88	24.8%
3) Poor / Bad	51	21.3%	30	26.1%	81	22.8%
4) Not Certain / Do not Know	35	14.6%	24	20.9%	59	16.6%
<b>TOTAL</b>	<b>240</b>	<b>100.0%</b>	<b>115</b>	<b>100.0%</b>	<b>355</b>	<b>100.0%</b>

The pie chart (*Figure 1*) below demonstrates the proportions of perceptions of household respondents on the quality of education children were receiving in Government-aided primary schools. The category that were uncertain / did not know have been excluded in the *Pie Chart (Figure 1)*.

**Figure 1: Perceptions of Household Respondents on the Quality of Education Provided by Government-Aided Primary Schools**



The major reasons for the various perceptions are summarised in *Table 3.11*.

**Table 3.11: Major Reasons for the Perceptions of Respondents on the Quality of Education**

Issue / Aspect	Perceptions of Respondents on Quality of Education and Reasons:		
	Good	Average / Fair	Poor / Bad
<b>1) Pupils</b>	<ul style="list-style-type: none"> <li>Better performance of pupils in PLE</li> <li>Improved reading and writing in both English and local language</li> <li>Pupils understand what they are taught</li> <li>Pupil absenteeism has reduced</li> </ul>	<ul style="list-style-type: none"> <li>Performance in PLE is not good enough</li> <li>Children lack necessities at school</li> <li>Improving standards although the children's English-speaking skills need to be improved</li> <li>Generally improving although the grades are still low</li> <li>Pupils walk long distances to school</li> </ul>	<ul style="list-style-type: none"> <li>Few pupils</li> <li>Poor performance</li> <li>Failure of pupils to read and write</li> <li>Poor performance at PLE</li> </ul>
<b>2) Teachers</b>	<ul style="list-style-type: none"> <li>Active and motivated</li> <li>Teach well</li> <li>Pro-active</li> <li>Teacher absenteeism reduced</li> <li>Good performance</li> <li>Teacher – pupil relationship is much better</li> <li>Staffing has improved – schools have more qualified teachers</li> <li>Improved school administration</li> </ul>	<ul style="list-style-type: none"> <li>Teachers are not enough</li> <li>Little attention is given to pupils</li> <li>Lower classes teachers are redundant and lazy</li> <li>Teachers do not want to offers service on islands outside the main Island</li> <li>Poor teacher-pupil relationship</li> <li>Teachers lack discipline</li> <li>Teacher absenteeism</li> <li>Little attention given to pupils in public schools</li> </ul>	<ul style="list-style-type: none"> <li>Teacher absenteeism</li> <li>Teachers services are unsatisfactory</li> <li>Inadequate teaching staff</li> <li>No attention is given to pupils</li> <li>Teachers are not diligent about their work</li> </ul>
<b>3) School system and infrastructure</b>	<ul style="list-style-type: none"> <li>Construction and renovation of school infrastructure</li> <li>Introduction of boarding sections in most schools</li> <li>Free access to education for all children</li> <li>Close monitoring of head teachers by DEO; and instant transfer of non-performers</li> <li>Good classroom environment</li> <li>Provision of school necessities like books</li> <li>Short distances to the school</li> </ul>	<ul style="list-style-type: none"> <li>Fairly improving school infrastructure</li> <li>School buildings / inadequate class are not enough</li> <li>Long distances to school</li> <li>Slow improvement in primary school enrolment</li> <li>Reluctance of school inspectors</li> <li>Slow extension of tap water to schools</li> </ul>	<ul style="list-style-type: none"> <li>Insufficient teachers' salaries</li> <li>Inadequate scholastic materials for pupils</li> <li>School standards are very low</li> <li>Poor / Low performance at PLE</li> <li>School is very far so the children do not regularly attend school</li> <li>There are no teachers on some islands</li> <li>Few pupils in school</li> <li>School only concentrates on music, dance, and drama (MDD).</li> <li>Not enough qualified teachers and so pupils are not taught properly</li> </ul>

Issue / Aspect	Perceptions of Respondents on Quality of Education and Reasons:		
	Good	Average / Fair	Poor / Bad
			<ul style="list-style-type: none"> <li>• Pupils spend more time doing other school chores i.e. fetching firewood</li> <li>• Parents cannot afford all the school requirements</li> <li>• High school charges that some parents cannot afford thus affecting attendance and performance</li> <li>• Not enough structures / classrooms</li> <li>• There is no nearby Secondary school</li> </ul>
4) Parents		<ul style="list-style-type: none"> <li>• Reluctance of parents</li> <li>• Parents do not provide enough scholastic materials</li> </ul>	<ul style="list-style-type: none"> <li>• Parents are not vigilant about taking their children to school</li> <li>• Negligence of duty by parents</li> <li>• Parents are unable to send their children to school</li> <li>• Some parents do not provide scholastic materials for their children at all</li> <li>• Parents take their children to other schools outside Kalangala.</li> </ul>

## CHAPTER FOUR: HEALTH

### 4.1 Distance to or Time Taken (to Reach) the nearest Government Health Unit

With respect to health, information was collected from households on the distance to the nearest Government health unit or time taken to reach such health units. In case these are located on other Islands.

**Table 4.1 (a): Distance (Km) to the Government Health Unit by Number of Households**

Distance (Km)	Number of Households:					
	Intervention Location Villages		Control Villages		Grand Total	
	Number	Proportion (%)	Number	Proportion (%)	Number	Proportion (%)
1) Below 1 Kilometre	99	41.3%	5	4.3%	104	29.3%
2) 1 – 5 Kilometres	129	53.8%	69	60.0%	198	55.8%
3) 6 Kilometres and above	5	2.1%	18	15.7%	23	6.5%
4) On another Island	7	2.9%	23	20.0%	30	8.5%
<b>TOTAL</b>	<b>240</b>	<b>100.0%</b>	<b>115</b>	<b>100.0%</b>	<b>355</b>	<b>100.0%</b>

The proportions of the households within a distance of 5 kilometres from a Government health unit are **95%** (in intervention location villages) and **64.3%** (in control villages). The proportions of households in 6 kilometres and above are **2.1%** (in intervention location villages) and **15.7%** (in control villages). **2.9%** (in intervention location villages) and **20.0%** (in control villages) indicated that health facilities are on other islands. Refer to *Table 4.1 (a)*.

For the proportion that indicated health facilities on other islands [*Table 4.1 (b)*], **57.1%** (in intervention location villages) and **60.9%** (in control villages) take between 1 – 2 hours to reach the nearest Government health facility. **42.9%** (in intervention location villages) and **30.4%** (in control villages) take 3 – 5 hours. Lastly **8.7%** (in control villages) take 6 hours and above.

**Table 4.1 (b): Time Taken (Hours) to Reach the Nearest Government Health Unit by Number of Households**

Time Taken (Hours)	Number of Households:					
	Intervention Location Villages		Control Villages		Grand Total	
	Number	Proportion (%)	Number	Proportion (%)	Number	Proportion (%)
1) Below 1 Hour	-	-	-	-	-	-
2) 1 – 2 Hours	4	57.1%	14	60.9%	18	60.0%
3) 3 – 5 Hours	3	42.9%	7	30.4%	10	33.3%
4) 6 Hours and above	-	-	2	8.7%	2	6.7%
<b>TOTAL</b>	<b>7</b>	<b>100.0%</b>	<b>23</b>	<b>100.0%</b>	<b>30</b>	<b>100.0%</b>

*Note: This only refers to the number of households with Health facilities other islands.*

**Table 4.2 (a): Distance (Km) to the Nearest Government Health Unit by Type by Number of Households**

Distance (Km)	Number of Households in Intervention Location Villages:						Number of Households in Control Villages:						Grand Total
	HC II	HC III	HC IV	Hospital	None Known	Total	HC II	HC III	HC IV	Hospital	None Known	Total	
1) Below 1 Kilometre	47	36	14	0	2	99	2	2	1	0	0	5	104
2) 1 – 5 Kilometres	32	43	54	0	0	129	18	14	35	0	2	69	198
3) 6 Kilometres and above	1	2	2	0	0	5	2	1	15	0	0	18	23
4) On another island	0	0	7	0	0	7	1	7	14	0	1	23	30
<b>TOTAL</b>	<b>80</b>	<b>81</b>	<b>77</b>	<b>0</b>	<b>2</b>	<b>240</b>	<b>23</b>	<b>24</b>	<b>65</b>	<b>0</b>	<b>3</b>	<b>115</b>	<b>355</b>

**Notes** - According to the Ugandan Government Health Policy:

- a) HC II facility should be able to treat common diseases like malaria. It runs an outpatient clinic, treating common diseases and offering antenatal care. It is supposed to be led by an enrolled nurse, working with a midwife, two nursing assistants and a health assistant. Every parish is supposed to have a HC II.
- b) HC III should have a general outpatient clinic and maternity ward. It should also have a functioning laboratory. It should have about 18 staff, led by a senior clinical officer. Every sub-county should have a HC III.
- c) HC IV should have services found at health centre III, but it should have wards for men, women, and children and should be able to admit patients. It should have a senior medical officer and another doctor as well as a theatre for carrying out emergency operations. HC IV serves a county or a parliamentary constituency.
- d) A hospital should have all the services offered at a health centre IV, plus specialised clinics (such as those for mental health and dentistry) and consultant physicians. Each district is supposed to have a hospital.

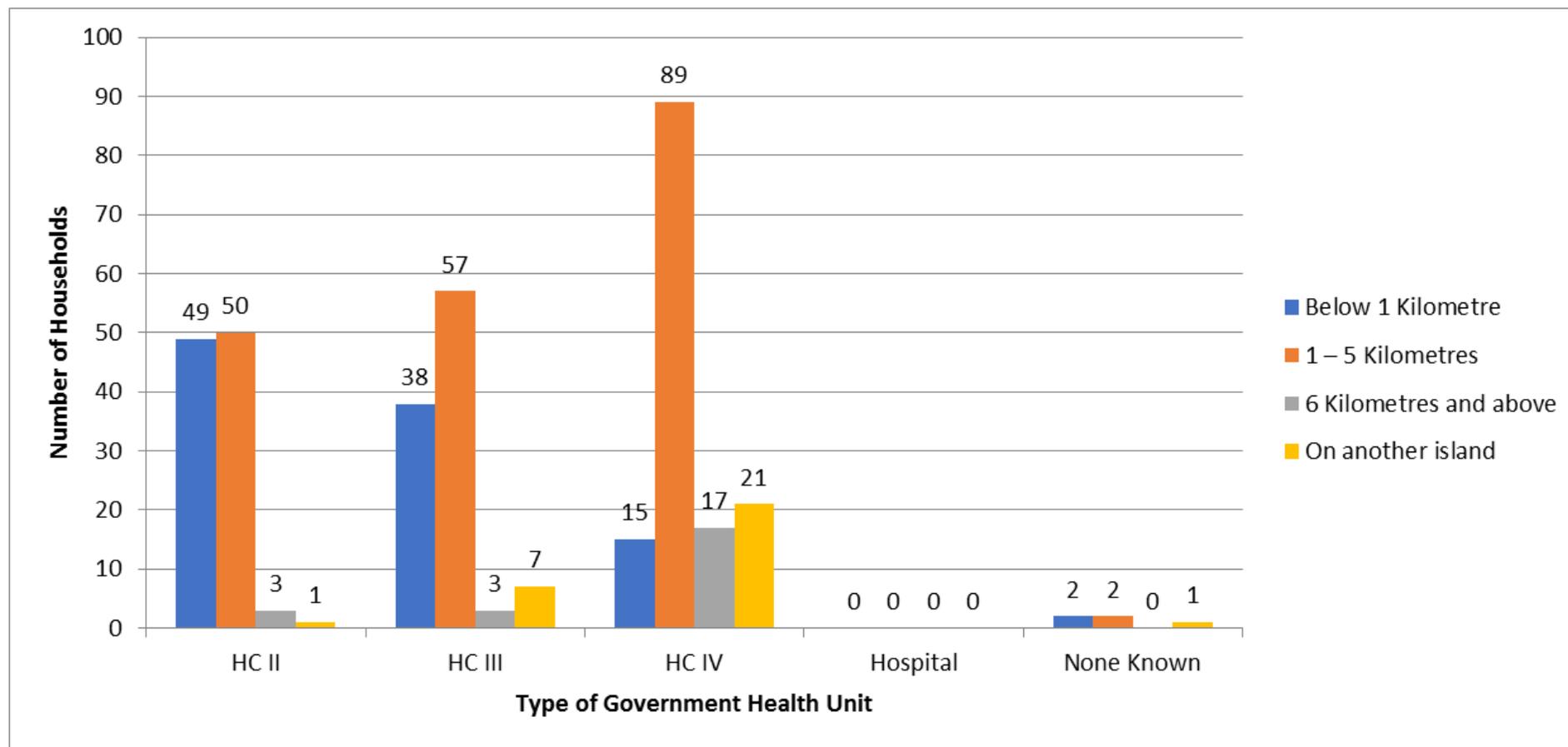
Information on the distance to the nearest Government health facility has been further disaggregated to indicate the type of facility and the number of households [Table 4.2 (a)]. On a related note, from Table 4.2 (b) the results show that (irrespective of the distance) **29.0%** have HC II as the nearest Government health facility; **29.6%** have HC III; and **40.0%** have HC IV. **1.4%** does not know the type of facility nearest to them much as it knows where to find the facility. Refer also to Figure 2 below.

**Table 4.2 (b): Distance (Km) to the Nearest Government Health Unit by Type by Number of Households (see also Figure 2)**

Distance (Km)	Number of Households Accessing:							Total	
	HC II	HC III	HC IV	Hospital	None Known	Total			
1) Below 1 Kilometre	49	38	15	0	2	104	29.3%		
2) 1 – 5 Kilometres	50	57	89	0	2	198	55.8%		
3) 6 Kilometres and above	3	3	17	0	0	23	6.5%		
On another island	1	7	21	0	1	30	8.4%		
Total	103	105	142	0	5	355	100.0%		
	29.0%	29.6%	40.0%	.	1.4%				

Furthermore, It should be noted from *Table 4.2 (b)* that **85.1%** of the households were reportedly within a radius of 5 kilometres from a government health facility irrespective of its level. This is good since a health centre should be within 5 kilometres of reach to be considered accessible to the population. Nonetheless, 6.5% was at least 6 kilometres from the nearest government health unit, and 8.4% had government facilities on other islands.

**Figure 2: Distance to the Nearest Government Health Unit by Type of Unit by Total Number of Households**



“None known” were the category of respondents who knew there was a Government health unit within a given range of distance except that they did not know the type it was.

**Table 4.2 (c): Time Taken (Hours) to Reach the Nearest Government Health Unit by Type by Total Number of Households**

Time Taken (Hours)	Number of Households in Intervention Location Villages:						Number of Households in Control Villages:						Grand Total
	HC II	HC III	HC IV	Hospital	None Known	Total	HC II	HC III	HC IV	Hospital	None Known	Total	
1) Below 1 Hour	-	-	-	-	-	-	-	-	-	-	-	-	-
2) 1 – 2 Hours	-	-	4	-	-	4	1	6	7	-	-	14	18
3) 3 – 5 Hours	-	-	3	-	-	3	-	1	5	-	1	7	10
4) 6 Hours and above	-	-	-	-	-	-	-	-	2	-	-	2	2
<b>TOTAL</b>	-	-	<b>7</b>	-	-	<b>7</b>	<b>1</b>	<b>7</b>	<b>14</b>	-	<b>1</b>	<b>23</b>	<b>30</b>

Similarly, information on the time taken to reach the nearest Government health facility has been further disaggregated to indicate the type of facility and the number of households [Table 4.2 (c)]. Relatedly, from Table 4.2 (d) the results show that (irrespective of the time taken) **3.3%** have HC II as the nearest Government health facility; **23.3%** have HC III; and **70.0%** have HC IV. **3.3%** does not know the type of facility nearest to them much as it knows where find the facility.

**Table 4.2 (d): Time Taken (Hours) to Reach the Nearest Government Health Unit by Type by Total Number of Households**

Time Taken (Hours)	Number of Households Accessing:					
	HC II	HC III	HC IV	Hospital	None Known	Total
1) Below 1 Hour	-	-	-	-	-	0
2) 1 – 2 Hours	1	6	11	-	-	18
3) 3 – 5 Hours	-	1	8	-	1	10
4) 6 Hours and above	-	-	2	-	-	2
<b>TOTAL</b>	<b>1</b>	<b>7</b>	<b>21</b>	-	<b>1</b>	<b>30</b>
	<b>3.3%</b>	<b>23.3%</b>	<b>70.0%</b>	-	<b>3.3%</b>	<b>100.0%</b>

## 4.2 Health Service Experience Encounter

This section summarises the information collected from the households on whether any member of the household fell sick during the previous 30 days prior to the household survey, and the subsequent encounter with the health service providers.

**Table 4.3 (a): Distribution of Households that Reported Having Persons Who Fell Sick in the Last 30 Days by Type of Illness and Location**

Type of Illness – Water Borne Or Related to Sanitation and Hygiene	Number of Households in:					
	Intervention Location Villages		'Control' Villages		Total	
	Number	Proportion (Out of Total HH Sampled = 240)	Number	Proportion (Out of Total HH Sampled = 115)	Number	Proportion (Out of Total HH Sampled = 355)
1) Malaria	54	22.5%	24	20.9%	78	22.0%
2) Diarrhoea	14	5.8%	3	2.6%	17	4.8%
3) Dysentery	2	0.8%	1	0.9%	3	0.8%
4) Intestinal Worms	3	1.3%	-	-	3	0.8%
5) Others	12	5.0%	7	6.1%	19	5.4%

The results obtained indicate that generally 22.0% of the total households reported having at least a person who was affected by malaria in the last 30 days prior to the survey. In the same period, only 4.8% had at least a person affected by diarrhoea; 0.8% affected by dysentery; 0.8% by intestinal worms; and 5.4% affected by other diseases related to water or hygiene and sanitation [Table 4.3 (a)]. With respect to intervention location villages, 22.5% reported having at least a person who was affected by malaria, and 12.9% reported having persons affected by diseases related to water or hygiene and sanitation. For control villages, 20.9% had at least a person who was affected by malaria, and 9.6% reported having persons affected by diseases related to water or hygiene and sanitation.

**Table 4.3 (b): Distribution of Persons Who Fell Sick in the Last 30 Days by Type of Illness and Location**

Type of Illness – Water Borne Or Related to Sanitation and Hygiene	Number of Persons who Fell Sick in:					
	'Intervention Location' Villages		'Control' Villages		Total	
	Number	Proportion (%) – Out of 1,168 people	Number	Proportion (%) – (Out of 491 people)	Number	Proportion (%) - Out of Total Sample Population = 1,659
1) Malaria	63	5.4%	33	6.7%	96	5.8%
2) Diarrhoea	30	2.6%	3	0.6%	33	2.0%
3) Dysentery	15	1.3%	1	0.2%	16	1.0%
4) Intestinal Worms	3	0.3%	-	-	3	0.2%
5) Others	14	1.2%	8	1.6%	22	1.3%

The results of the actual number of people that fell sick by category of illness are summarised in Table 4.3 (b). From the results, 5.4% (in intervention location villages) and 6.7% (in control villages) of the respective total sample populations were affected by malaria in the last 30 days prior to the household survey. 2.6% (in intervention location villages) and 0.6% (in control villages) were affected with diarrhoea. 1.3% (in intervention location villages) and 0.2% (in control villages)

were affected with dysentery. 0.3% (in intervention location villages only) was affected with intestinal worms. Lastly, 1.2% (in intervention location villages) and 1.6% (in control villages) were affected with other diseases related to water or hygiene and sanitation.

**Table 4.3 (c): Distribution of Persons Who Fell Sick and Sought Treatment in the Last 30 Days by Type of Illness and Type of Facility Accessed – ALL Sampled Villages**

Type of Illness – Water Borne Or Related to Sanitation and Hygiene	Treatment		Number of Persons in <u>ALL</u> Villages Who Sought Treatment in:									Total
	Not Sought	Sought	HC II	HC III	HC IV	Hosp.	Private	HOMA-PACK	Community Health Worker	Traditional Healer	Self-Medication	
1) Malaria	1	95	20	17	31	-	27	-	-	-	1	96
2) Diarrhoea	-	33	2	16	2	-	28	-	-	-	-	48
3) Dysentery	-	16	-	14	1	-	15	-	-	-	-	30
4) Intestinal Worms	-	3	2	-	1	-	-	-	-	-	-	3
5) Other	-	22	3	2	11	-	5	-	-	-	1	22

The results obtained show that people who fell sick sought treatment from health facilities. Refer to *Table 4.3 (c)*.

**Table 4.4: Distribution of Persons Who Sought Treatment in the Last 30 Days by Type of Illness Who Got to Know their Illnesses, Availed with Drugs, Treated, and/or Referred to Other Facilities**

Type of Illness – Water Borne Or Related to Sanitation and Hygiene	Illness or Test Results		Were Prescribed Drugs Available			Were Patients Treated		Disappearance of Symptoms:		Case Referred	
	Got to Know	Did Not Know	None	Some	All	Yes	No	Yes	No	Yes	No
1) Malaria	88	7	12	25	57	80	15	73	22	18	6
2) Diarrhoea	14	19	-	18	15	32	1	18	15	-	15
3) Dysentery	2	14	-	15	1	15	1	1	15	1	14
4) Intestinal Worms	2	1	-	2	1	1	2	2	1	2	-
5) Others	21	1	4	3	15	20	2	20	2	2	-

For the type of diseases, information was obtained on whether the patients who went for treatment got to know the illnesses that were affecting them or not; availability of prescribed drugs; whether patients were treated or not; whether symptoms of disease disappeared or not, and referrals (*Table 4.4*).

### 4.3 Views on the Quality of Services Provided by the Nearest Government Health Unit

Endeavours were made to obtain perceptions of the households about the quality of services provided by the nearest Government health unit. *Table 4.5 (a)* gives the broad perceptions of the household respondents on the quality of services provided.

**Table 4.5 (a): Views of Respondents on the Quality of Health Services provided by the Nearest Government Health Unit**

Perceptions / Views of Respondents	Number of Households in:					
	Intervention Location Villages		Control Villages		Total	
	Number	Proportion (%)	Number	Proportion (%)	Number	Proportion (%)
1) Good	94	39.2%	45	39.1%	139	39.2%
2) Average / Fair	88	36.7%	41	35.7%	129	36.3%
3) Poor / Bad	49	20.4%	24	20.9%	73	20.6%
4) Not Certain / Do not Know	9	3.8%	5	4.3%	14	3.9%
<b>TOTAL</b>	<b>240</b>	<b>100.0%</b>	<b>115</b>	<b>100.0%</b>	<b>355</b>	<b>100.0%</b>

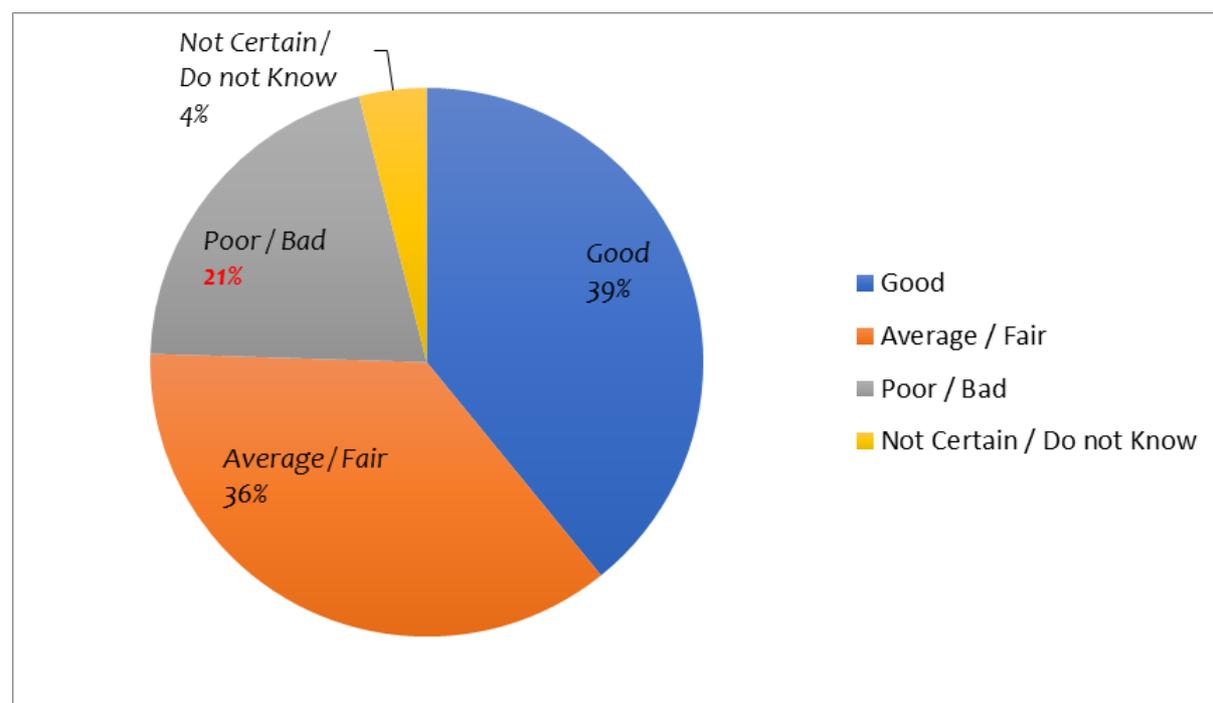
The perceptions of the respondents on the quality of health services show that **39.2%** indicated it as good; **36.3%** thought it was average / fair; **20.6%** perceived it as poor / bad; and **3.9%** were not certain. Refer to *Table 4.5 (a)*, and *Figure 3*.

With respect to the views of respondents in each of the two counties [*Table 4.5 (b)*], **48.4%** Of the respondents in Kyamuswa County rate the quality of health as good while in Bujumba County it was **29.5%**; the proportion perceiving the services as average / fair was **39.5%** in Bujumba County and **33.0%** in Kyamuswa County; and while **26.6%** in Bujumba County regarded the health services as poor / bad, the proportion was **14.8%**.

**Table 4.5 (b): Views of Respondents on the Quality of Health Services provided by the Nearest Government Health Unit**

Perceptions / Views of Respondents	Number of Households in:					
	Bujumba County		Kyamuswa County		Total	Proportion (%)
	Number	Proportion (%)	Number	Proportion (%)	Number	Proportion (%)
1) Good	51	29.5%	88	48.4%	139	39.2%
2) Average / Fair	69	39.9%	60	33.0%	129	36.3%
3) Poor / Bad	46	26.6%	27	14.8%	73	20.6%
4) Not Certain / Do not Know	7	4.0%	7	3.8%	14	3.9%
<b>TOTAL</b>	<b>173</b>	<b>100.0%</b>	<b>182</b>	<b>100.0%</b>	<b>355</b>	<b>100.0%</b>

**Figure 3: Perception of Household Respondents on the Quality of Health Services Provided by Government Health Facilities in Kalangala District**



**Table 4.5 (c): Views of Respondents on the Quality of Health Services provided by the Nearest Government Health Unit Correlated With Distance**

Distance From Health Facility	Perception On Health Services On				Total
	Good	Average / Fair	Bad / Poor	Not Sure	
1) Below 1 KM	45	33	24	2	104
	43.3%	31.7%	23.1%	1.9%	100.0%
2) 1-5 Kilometres	77	84	31	6	198
	38.9%	42.4%	15.7%	3.0%	100.0%
3) 6 And Above Kilometres	12	4	6	1	23
	52.2%	17.4%	26.1%	4.3%	100.0%
4) On Another Island	5	10	11	4	30
	16.7%	33.3%	36.7%	13.3%	100.0%
Total	139	131	72	13	355
	39.2%	36.9%	20.3%	3.7%	100.0%

With the exception where the health facilities were on other islands, the results show that the views of respondents on the quality of health services were not correlated with the distance from the health facility. The 23.1% that rated the health services as bad / poor were below 1 kilometre from the health facilities [Table 4.5 (c)].

The major reasons for the various perceptions on the quality of health services provided in Government health facilities are summarised in Table 4.6.

**Table 4.6: Major Reasons for the Perceptions of Respondents on the Quality of Health Services Provided by Government Health Units**

Issue / Aspect	Perceptions of Respondents on Quality of Education and Reasons:		
	Good	Average / Fair	Poor / Bad
<b>1) Drugs</b>	<ul style="list-style-type: none"> <li>• Availability of adequate drugs most of the time</li> <li>• There is enough medicine as per level of health facility</li> </ul>	<ul style="list-style-type: none"> <li>• There is no medicine at times</li> </ul>	<ul style="list-style-type: none"> <li>• Drugs prescribed by the health workers are not available most times, and patients are advised to buy from drug shops.</li> <li>• Drugs are not available in HU most times / inadequate drugs</li> <li>• At times drugs expire and are destroyed</li> </ul>
<b>2) Health Workers</b>	<ul style="list-style-type: none"> <li>• Health services are readily available</li> <li>• Health workers are caring, active, and reliable.</li> <li>• Health workers are diligent with their work and approachable.</li> <li>• Services of health workers are satisfactory.</li> </ul>	<ul style="list-style-type: none"> <li>• Health team has good care</li> <li>• There is enough human resource but medicine</li> <li>• Fairly performing, however, they do not work on weekends</li> <li>• Health workers only work until 3:00 p.m.</li> <li>• Health workers report occasionally</li> <li>• Reluctant health workers</li> </ul>	<ul style="list-style-type: none"> <li>• Health workers do not work on weekends</li> <li>• Health workers are not so cooperative</li> <li>• Health workers occasionally report on duty</li> </ul>
<b>3) Health System and infrastructure</b>	<ul style="list-style-type: none"> <li>• Well-equipped health centres.</li> <li>• Services are provided at the health centre.</li> <li>• Provision of free health services through community outreaches.</li> <li>• There are better facilities now with minimal irregularities with availability of medicine.</li> </ul>	<ul style="list-style-type: none"> <li>• Facility has no staff quarters</li> <li>• Inadequate drugs</li> <li>• Inadequate human resource at HU / HF</li> <li>• Staff perform to their best but there is hardly enough medicine - patients advised to buy from private clinics</li> <li>• Facility not enough for the increasing population</li> <li>• There is good care at the health facility, however, medicine is always not available</li> <li>• Enough facilities but not enough medicine</li> <li>• More HIV and AIDS sensitisation needed in the community</li> <li>• PLWHA need more care and check-ups</li> <li>• HU works on very minor diseases, it needs an upgrade / services are limited to minor cases</li> <li>• Medical services offered at the health</li> </ul>	<ul style="list-style-type: none"> <li>• No health facility at landing site</li> <li>• No health facility on the island</li> <li>• Health centre lacks medical equipment</li> <li>• HU / HF closed during weekends</li> <li>• Inadequate qualified health staff</li> <li>• Health facility is too small basing on population</li> <li>• Long distance to health facility and so people are compelled to use private clinics</li> <li>• Inappropriate handling of patients</li> <li>• Inadequate / no special attention given to mothers</li> <li>• HF charges UGX 2,000 per patient and there are no drugs</li> <li>• HU has no midwife (<i>for the past two months - one is on maternity leave and other off duty</i>), and facility closes by 1:00 p.m.</li> <li>• No antenatal services yet needed</li> <li>• Insufficient medical wards - Children are mixed</li> </ul>

Issue / Aspect	Perceptions of Respondents on Quality of Education and Reasons:		
	Good	Average / Fair	Poor / Bad
		<p>centre are not enough, health centre should be upgraded</p> <ul style="list-style-type: none"> <li>• No maternity services at the health centre thus moving long distances</li> <li>• Health workers are good to the patients but the health centre is far and has inadequate drugs</li> <li>• Fairly performing but the distance is too long, hence most people use private clinics around</li> <li>• Occasional outreaches</li> <li>• There are no lights at some health facilities during night</li> <li>• Inadequate utilities at HU</li> <li>• Sometimes HU lacks medical equipment e.g. gloves and gauze</li> </ul>	<p>with adults in the same ward</p> <ul style="list-style-type: none"> <li>• No ambulances</li> <li>• No water at HU</li> <li>• Inadequate sanitation facilities / latrines are not enough</li> </ul>

## CHAPTER FIVE: INCOME, EXPENDITURE, ASSETS, AND WELFARE

This chapter broadly gives information on the major sources of income for the household; changes in household welfare; savings; expenditure; and assets.

### 5.1 Major Sources of Income for Households

This section provides results obtained from respondents on the major sources of income of their respective households.

The three major sources of income for the households include farming – **44.2%** (in intervention location villages) and **21.7%** (in control villages); fishing activities – **23.8%** (in intervention location villages) and **34.8%** (in control villages); and others which include sawing / timber production, hair dressing / barbershop, rentals, cooked food stalls / eating joints, dry cleaning, photography, renting out boat engines, and tailoring / couture – **11.7%** (in intervention location villages) and **22.6%** (in control villages). Refer to *Table 5.1 (a)*.

In the MTR, **33.8%** got their income from fisheries and **26.4%** from farming, meaning that the two sectors have changed importance related to income during the last 8 years. Income from fishing is not so important anymore. Trading constituted **23%** in the MTR whereas only **10%** now. This is revealed by the results in *Table 5.1 (a)*.

**Table 5.1 (a): Major Sources of Income for Households by Intervention Location and Control Villages**

Major Source of Income of Household	Number of Households in:					
	Intervention Location Villages		Control Villages		Total	
	Number	Proportion (%)	Number	Proportion (%)	Number	Proportion (%)
1) Farming	106	44.2%	25	21.7%	131	36.9%
2) Fishing Activities	57	23.8%	40	34.8%	97	27.3%
3) Others <sup>14</sup>	28	11.7%	26	22.6%	54	15.2%
4) Trading	20	8.3%	15	13.0%	35	9.9%
5) Salary and Wages	12	5.0%	1	0.9%	13	3.7%
6) Brewing Beer / Selling	5	2.1%	4	3.5%	9	2.5%
7) Metal Works / Carpentry Mechanic	6	2.5%	1	0.9%	7	2.0%
8) Food Processing	3	1.3%	3	2.6%	6	1.7%
9) Transport	3	1.3%	0	0.0%	3	0.8%
<b>Total</b>	<b>240</b>	<b>100.0%</b>	<b>115</b>	<b>100.0%</b>	<b>355</b>	<b>100.0%</b>

When a comparison is made between the two counties, the results show that the majority of households in Bujumba County rely on farming (**52.0%**), fishing activities (**17.9%**), and others (**14.5%**) for income; and in Kyamuswa County it is fishing activities (**36.3%**), farming (**22.5%**) and others (**15.9%**). Refer to *Table 5.1 (b)*.

<sup>14</sup> These include hairdressing / barbershop, rentals, cooked food stalls / eating joints, dry cleaning, photography, renting out boat engines, sawing / timber production, and tailoring / couture.

**Table 5.1 (b): Major Sources of Income for Households by County**

Major Source of Income of Household	Number of Households in:					
	Bujumba County		Kyamuswa County		Total	
	Number	Proportion (%)	Number	Proportion (%)	Number	Proportion (%)
1) Farming	90	52.0%	41	22.5%	131	36.9%
2) Fishing Activities	31	17.9%	66	36.3%	97	27.3%
3) Others <sup>8</sup>	25	14.5%	29	15.9%	54	15.2%
4) Trading	11	6.4%	24	13.2%	35	9.9%
5) Salary and Wages	10	5.8%	3	1.6%	13	3.7%
6) Brewing Beer / Selling	1	0.6%	8	4.4%	9	2.5%
7) Metal Works / Carpentry Mechanic	2	1.2%	5	2.7%	7	2.0%
8) Food Processing	2	1.2%	4	2.2%	6	1.7%
9) Transport	1	0.6%	2	1.1%	3	0.8%
<b>Total</b>	<b>173</b>	<b>100.0%</b>	<b>182</b>	<b>100.0%</b>	<b>355</b>	<b>100.0%</b>

## **5.2 Fishing – Infrastructure, Facilities, and Amenities**

The information in this section was collected from respondents of households who indicated fishing as a major source of income (i.e. the 97 households in *Table 5.1* above).

### **5.2.1 Category of Fishing Activities Households are Involved in**

The information obtained on the category of fishing activities respective households were engaged in to earn a living, show that the majority are engaged in fishing (i.e. they fish and sell fresh fish) – **82.5%** (in intervention location villages) and **75.0%** (in control villages). The rest in the category are engaged in other activities such as fish trade / monger – **7.0%** (in intervention location villages) and **10.0%** (in control villages); fish processing - **3.5%** (in intervention location villages) and **7.5%** (in control villages); repair of fishing gear / boat repair – **5.3%** (in intervention location villages) and **2.5%** (in control villages); and others which exclude fish transportation – **1.8%** (in intervention location villages) and **5.0%** (in control villages). Refer to *Table 5.2*.

**Table 5.2: Number of Households With Fishing as Major Source of Income by Category of Fishing Activity**

Fishing Activity Engaged in:	Number of Households in:					
	Intervention Location Villages		Control Villages		Total	
	Number	Proportion (%)	Number	Proportion (%)	Number	Proportion (%)
1) Fishing (Fish and Sell Fresh Fish)	47	82.5%	30	75.0%	77	79.4%
2) Fish Trader / Monger (Buys and Sells Fish Whether Fresh Or Processed)	4	7.0%	4	10.0%	8	8.2%
3) Fish Processing (Fishes Or Buys Fish, Processes through Sun Drying Or Smoking) Before Selling	2	3.5%	3	7.5%	5	5.2%
4) Fishing Gear Repairer / Boat Maker	3	5.3%	1	2.5%	4	4.1%

Fishing Activity Engaged in:	Number of Households in:					
	Intervention Location Villages		Control Villages		Total	
	Number	Proportion (%)	Number	Proportion (%)	Number	Proportion (%)
5) Others (e.g. renting out nets and boat engines)	1	1.8%	2	5.0%	3	3.1%
6) Fish Transportation	-		-	-	-	
<b>Total</b>	<b>57</b>	<b>100.0%</b>	<b>40</b>		<b>97</b>	<b>100.0%</b>

### 5.2.2 Fishing Infrastructure

The results obtained on the type of fishing facilities / infrastructure available at respective landing sites are summarised in *Table 5.3 (a)*. The information of the five beneficiary landing sites (*supported under KDDP*) has been presented separately. On the whole, the intervention location landing sites have the fishing facilities as listed in the table below.

**Table 5.3 (a): Type of Fishing Facilities / Infrastructure Reported by Households at ALL Landing Sites**

Type of Facility / Infrastructure	Number of Households in ALL Landing Sites / Villages Reporting Availability of:					
	' Intervention Location' Landing Sites					Other Villages / Landing Sites <sup>15</sup> Not Supported Under KDDP
	Kisaba	Namisoke	Kasekulo - Ttubi	Kyagalanyi / Mulabana	Kachungwa	
1) Landing Jetty	4	-	3	1	-	7
2) Weighing Slab / Shade / Fish Transfer Floating Barge	3	8	4	6	3	33
3) Ice Or Ice Storage	4	8	4	4	3	51
4) Drainage	-	3	2	2	-	7
5) Portable Water	3	7	4	5	2	26
6) Hand Wash	1	3	2	2	1	8
7) Soap	-	1	3	2	-	4
8) Protective Gear	1	3	4	3	-	18
9) Drying Racks	3	7	1	5	4	35
10) Smoking Kilns	2	4	1	2	4	15
11) Drying Fish Store	1	7	2	2	2	10

Much as some households reported availability of soap on the intervention location landing sites, soap was not observed in any landing sites, except in Kasekulo-Ttubi and Kisaba.

<sup>15</sup> This is information aggregated from other sample villages and/or landing sites not supported under KDDP [*Table 5.3 (b)*].

**Table 5.3(b): Fishing Facilities / Infrastructure Reported by Households at Other Villages / Landing Sites**

Name of Village / Other Landing Site	Number of Households in Other Villages / Landing Sites Reporting Availability of:										
	Landing Jetty	Weighing Slab / Shade / Fish Transfer Floating Barge	Ice Or Ice Storage	Drainage	Portable Water	Hand Wash	Soap	Protective Gear	Drying Racks	Smoking Kilns	Drying Fish Store
1) Bbeta	-	-	-	-	-	-	-	-	-	-	-
2) Bufumira	-	-	-	-	-	-	-	-	-	-	-
3) Buggala	-	-	-	-	-	-	-	-	-	-	-
4) Bugoma	-	-	-	-	-	-	-	-	-	-	-
<b>5) Bujumba-Buyoga</b>	-	1	1	-	-	-	-	-	1	1	-
6) Bumangi	-	-	-	-	-	-	-	-	-	-	-
7) Busindi	-	-	-	-	-	-	-	-	-	-	-
8) Buwanga	-	-	-	-	-	-	-	-	-	-	-
<b>9) Buwazi</b>	-	-	1	-	-	-	-	-	-	-	-
10) Buzingo	-	-	-	-	-	-	-	-	-	-	-
11) Bwendero	-	-	-	-	-	-	-	-	-	-	-
<b>12) Dajje</b>	-	5	5	-	4	1	1	3	5	-	1
<b>13) Kaaya</b>	-	-	-	-	1	-	-	-	3	-	-
14) Kaazi	-	1	2	-	-	-	-	1	3	-	-
<b>15) Kachanga</b>	3	3	4	2	6	2	1	2	3	2	2
<b>16) Kagoonya</b>	-	-	2	-	1	1	1	1	3	2	1
17) Kalangala	-	-	-	-	-	-	-	-	-	-	-
<b>18) Kande</b>	-	1	1	-	-	-	-	-	1	-	1
<b>19) Kasekulo</b>	1	1	1	-	1	-	-	1	-	-	-
20) Kibanga	-	-	-	-	-	-	-	-	-	-	-
21) Kibanga-Buligo	-	-	-	-	-	-	-	-	-	-	-
<b>22) Kikku</b>	-	1	3	-	-	-	-	1	3	-	-
<b>23) Lutoboka</b>	-	2	4	-	2	2	-	-	2	4	-
<b>24) Lwabaswa</b>	-	2	3	2	3	-	-	1	2	-	1
<b>25) Lwanabatya</b>	-	2	5	-	4	-	-	1	3	1	1
<b>26) Lwazi-Bubeke</b>	-	2	2	-	-	1	1	2	3	-	1

Name of Village / Other Landing Site	Number of Households in Other Villages / Landing Sites Reporting Availability of:										
	Landing Jetty	Weighing Slab / Shade / Fish Transfer Floating Barge	Ice Or Ice Storage	Drainage	Portable Water	Hand Wash	Soap	Protective Gear	Drying Racks	Smoking Kilns	Drying Fish Store
27) Lwazi-Jaana	1	2	3	1	-	-	-	-	-	-	-
28) Misonzi	2	8	9	1	4	1	-	3	2	1	-
29) Nakibanga	-	2	5	1	-	-	-	2	1	4	2

### 5.2.3 Access to Fishing Facilities and Amenities

Information collected regarding amenities at the intervention location landing sites shows that there are amenities and the people engaged in the fishing sector have access to facilities such as storage, ice, and fish processing facilities [Table 5.4 (a)]. The picture in the other villages and/or landing sites is not as good – refer to [Table 5.4 (b)].

**Table 5.4 (a): Access to Fishing Facilities – Intervention Location Landing Sites**

Intervention Location Landing Sites	Frequency / Number of Respondents in:											
	Access to Fish Storage Facilities		Access to Ice		Access to Fish Processing Facilities		Portable Water at Landing Site Have		Reliability of Water Supply all the Year		Availability of Sanitation Facilities at the Landing Site (i.e. Latrine Or Toilet) <sup>16</sup>	
	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
1) Kachungwa	4	-	2	2	3	1	3	1	4	-	4	-
2) Kasekulo-Ttubi	4	-	4	-	2	2	4	-	3	1	4	-
3) Kisaba	4	-	4	-	4	-	3	1	3	1	4	-
4) Kyagalanyi / Mulabana	5	1	5	1	3	3	5	1	3	3	6	-
5) Namisoke	8	-	8	-	7	1	8	-	4	4	8	-
Grand Total	25	1	23	3	19	7	23	3	17	9	26	-

<sup>16</sup> The toilets in Kachungwa were closed when the evaluation team visited, as the Fisheries Officer was on travel and had taken the key with him.

**Table 5.4 (b): Access to Fishing Facilities – Other Landing Sites / Villages**

Other Landing Sites / Villages	Frequency / Number of Times in:												
	Access to Fish Storage Facilities		Access to Ice		Access to Fish Processing Facilities		Portable Water at Landing Site Have		Reliability of Water Supply all the Year		Availability of Sanitation Facilities at the Landing Site (i.e. Latrine Or Toilet)		
	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	
1) Bbeta	-	-	-	-	-	-	-	-	-	-	-	-	-
2) Bufumira	-	-	-	-	-	-	-	-	-	-	-	-	-
3) Buggala	-	-	-	-	-	-	-	-	-	-	-	-	-
<b>4) Bugoma</b>	-	1	-	1	-	1	-	1	1	-	1	-	-
<b>5) Bujumba-Buyoga</b>	1	1	1	1	1	1	1	1	1	1	2	-	-
6) Bumangi	-	-	-	-	-	-	-	-	-	-	-	-	-
7) Busindi	-	-	-	-	-	-	-	-	-	-	-	-	-
8) Buwanga	-	-	-	-	-	-	-	-	-	-	-	-	-
<b>9) Buwazi</b>	1	-	1	-	1	-	-	1	-	1	1	-	-
10) Buzingo	-	-	-	-	-	-	-	-	-	-	-	-	-
11) Bwendero	-	-	-	-	-	-	-	-	-	-	-	-	-
<b>12) Dajje</b>	5	-	5	-	5	-	4	1	4	1	5	-	-
<b>13) Kaaya</b>	2	2	3	1	2	2	3	1	1	3	4	-	-
<b>14) Kaazi</b>	2	1	2	1	1	2	-	3	-	3	3	-	-
<b>15) Kachanga</b>	5	1	6	-	4	2	6	-	3	3	6	-	-
<b>16) Kagoonya</b>	2	1	3	-	2	1	1	2	1	2	3	-	-
17) Kalangala	-	-	-	-	-	-	-	-	-	-	-	-	-
<b>18) Kande</b>	1	-	1	-	-	1	-	1	-	1	-	-	1
<b>19) Kasekulo</b>	2	-	2	-	2	-	2	-	2	-	-	-	2
20) Kibanga	-	-	-	-	-	-	-	-	-	-	-	-	-
21) Kibanga-Buligo	-	-	-	-	-	-	-	-	-	-	-	-	-
<b>22) Kikku</b>	3	-	3	-	3	-	-	3	-	3	3	-	-
<b>23) Lutoboka</b>	4	-	4	-	4	-	4	-	4	-	4	-	-
<b>24) Lwaswa</b>	3	-	3	-	3	-	3	-	2	1	2	-	1
<b>25) Lwanabatya</b>	4	2	6	-	4	2	4	2	4	2	5	-	1

Other Landing Sites / Villages	Frequency / Number of Times in:											
	Access to Fish Storage Facilities		Access to Ice		Access to Fish Processing Facilities		Portable Water at Landing Site Have		Reliability of Water Supply all the Year		Availability of Sanitation Facilities at the Landing Site (i.e. Latrine Or Toilet)	
	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
26) Lwazi -Bubeke	3	-	3	-	2	1	-	3	-	3	2	1
27) Lwazi-Jaana	3	-	3	-	2	1	-	3	-	3	2	1
28) Misonzi	10	1	11	-	9	2	9	2	7	4	10	1
29) Nakibanga	5	1	6	-	4	2	-	6	-	6	4	2
Grand Total	56	11	63	4	49	18	37	30	30	37	57	10

Information was also collected on the distance to the nearest storage facility, source of ice, and fish handling facility or time taken to reach such facilities In case these are located on other Islands. The results are as summarised in *Table 5.4 (c)* below.

**Table 5.4 (c): Distance (Km) or Time Taken (Hours) to Reach Specific Fishing Facilities<sup>17</sup>**

Issue	Number of Respondents:							
	Distance (Km)				Time Taken (Hours):			
	Below 50	50 - 100	Over 100	Total	0 - 1	2-5	Over 5	Total
1 (a) Distance to the nearest storage facility	46	2	0	48				
OR								
1 (b) Time taken to reach the nearest storage facility					18	13	4	35
2 (a) Distance to the nearest source of ice?	21	2	0	23				
OR								
2 (b) Time taken to reach the nearest source of ice					8	36	16	60
3 (a) Distance to the nearest fish handling and processing facilities to landing sites	5	2	0	7				
OR								
3 (b) Time taken to reach the nearest fish handling and processing facilities to the landing					12	24	13	49

<sup>17</sup> The results revealed that most of the facilities were not on the respective landing sites where fishermen stay.

Furthermore, information was collected on the storage facilities available, methods used to preserve fish, frequency of access to ice each week, and available fish processing facilities. Refer to *Table 5.4(d)* below.

**Table 5.4 (d): Access to other Facilities and Amenities**

Issue	Intervention Location Villages		Control Villages		Grand Total
	Response	Number of Households	Response	Number of Households	
<b>1) List the storage facilities available:</b>	a) Dry fish store		a) Dry fish store		
	b) Ice containers		b) Ice containers		
	c) Ice Freezers		c) Ice Freezers		
	d) Transporting Freezer cars				
<b>2) Methods used to preserve fish:</b>	a) Chilling, freezing		a) Chilling, freezing		
	b) Sun drying		b) Sun drying		
<b>3) Frequency of access to ice in a week</b>	• Daily	33		26	<b>59</b>
	• Every Two Days	3		1	<b>4</b>
	• Every Three Days	3		2	<b>5</b>
	• Every Four Days	1		0	<b>1</b>
	• Every Five Days	1		0	<b>1</b>
	• Every Six Days	4		3	<b>7</b>
	• Weekly	1		1	<b>2</b>
<b>4) Fish processing facilities Reported available</b>	a) Chilling (ice, ice flakes Chillers)	50		27	<b>77</b>
	b) Fish freezing (Freezers)	10		6	<b>16</b>
	c) Fish smoking (Smoking Kilns)	5		2	<b>7</b>
	d) Salt drying (Drying racks)	2		-	<b>2</b>
	e) Sun drying racks (Drying racks)	13		15	<b>28</b>

Information on the methods of managing garbage at the various landing sites was collected. The majority of respondents indicated there were garbage bins or pits where it was dumped - specifically **89.5%** in intervention location villages, and **90.0%** in control villages.

**Table 5.4 (e): Management of Solid Waste at Landing Sites**

Method of Managing Solid Waste at Landing Sites	Households in:					
	Intervention Location Villages		Control Villages		Grand Total	
	Number	Proportion (%)	Number	Proportion (%)	Number	Proportion (%)
1) Garbage bin or Pit	51	89.5%	36	90.0%	87	89.7%
2) Thrown in lake or nearby bush	2	3.5%	2	5.0%	4	4.1%
3) Garbage was not attended to	4	7.0%	2	5.0%	6	6.2%
<b>Total</b>	<b>57</b>	<b>100.0%</b>	<b>40</b>	<b>100.0%</b>	<b>97</b>	<b>100.0%</b>

### **5.3 Changes in Household Welfare**

Views were sought from household respondents on whether there had been improvement since 2011. Improved welfare could be reflected through: quantity of food purchased; quantity of food self-produced; quantity and frequency of food bought at a restaurant; quantity of non-food items purchased; assets acquisition; education and literacy; increased household expenditure; increased household amenities; and reduced malnutrition / improved nutrition etc.). The findings are as summarised in *Tables 5.5 (a)*.

**Table 5.5 (a): Status of Welfare in Households since 2011**

Status of Welfare	Number of Households in:					
	Intervention Location Villages		Control Villages		Grand Total	
	Number	Proportion (%)	Number	Proportion (%)	Number	Proportion (%)
1) Improvement in Household Welfare	161	67.1%	65	56.5%	226	63.7%
2) No Improvement in Household Welfare	79	32.9%	50	43.5%	129	36.3%
<b>Total</b>	<b>240</b>	<b>100.0%</b>	<b>115</b>	<b>100.0%</b>	<b>355</b>	<b>100.0%</b>

From *Table 5.5(a)*, 226 household respondents (**63.7%**), reported improvement in household welfare since 2011. The remaining 129 (**36.3%**) reported that there has not been any improvement in the household welfare since 2011. On analysing the results from intervention location and control villages, only **56.5%** of the households in the control villages had experienced improved welfare over the time, whereas **67.1%** in the intervention location villages. These are personal perceptions.

**Table 5.5 (b): Status of Welfare in Households since 2011 by County**

Status of Welfare	Number of Households in:					
	Bujumba County		Kyamuswa County		Grand Total	
	Number	Proportion (%)	Number	Proportion (%)	Number	Proportion (%)
1) Improvement in Household Welfare	110	63.6%	116	63.7%	226	63.7%
2) No Improvement in Household Welfare	63	36.4%	66	36.3%	129	36.3%
<b>Total</b>	<b>173</b>	<b>100.0%</b>	<b>182</b>	<b>100.0%</b>	<b>355</b>	<b>100.0%</b>

Considering the counties, the proportions of respondents who thought there has been Improvement in Household Welfare are almost equal - Bujumba County (63.6%) and Kyamuswa County (63.7%). Refer to Table 5.5 (b).

### 5.3.1 Improvement in Household Welfare

For respondents who reported improvement in household welfare, endeavours were made to find out the major reasons underlying the improvement.

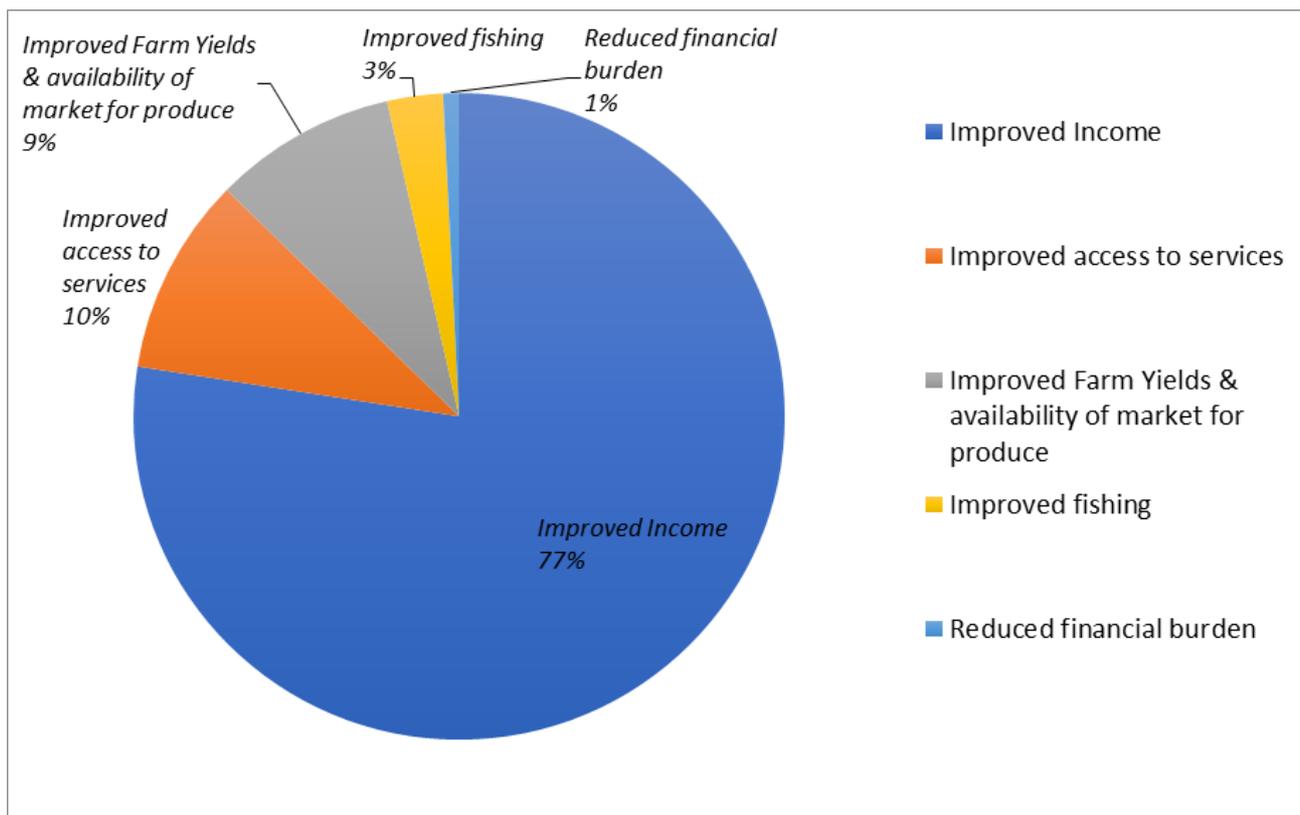
The household respondents were probed for the reasons they thought the improvements were realised. Some respondents cited more than one reason for the improvements. *Table 5.6* broadly outlines the perceived reasons for the improved welfare in respective households. Also refer to *Figure 4*.

**Table 5.6: Reasons for Improved Household Welfare<sup>18</sup>**

Reported Reasons for Improvement in Household Welfare	Frequency / Number of Times Mentioned in:		
	Intervention Location Villages	Control Villages	Grand Total
1) Improved Income	140	56	196
2) Improved access to services - Education, health, water, electricity, Roads	16	9	25
3) Improved Yields & availability of market for farm produce	17	6	23
4) Improved fishing	6	1	7
5) Reduced financial burden – fewer dependants	2	0	2
6) Not certain	77	52	129

<sup>18</sup> On this issue, some respondents gave more than one reason.

**Figure 4: Reasons for Improved Household Welfare**



**5.3.2 Lack of Improvement in Household Welfare**

For the respondents that reported lack of improvement in household welfare, their views were solicited on whether they considered their households were as poor as they were in 2011. Furthermore, these respondents were also asked what they considered the three major causes of poverty in their respective households. Refer to *Tables 5.7 and 5.8* below for the responses.

**Table 5.7 (a): Current Poverty Status - Perception of Households that Reported Lack of Improvement in Household Welfare Since 2011**

Perception of Households on Current Poverty Status	Number of Households					
	Intervention Villages		Control Villages		Grand Total	
	Number	Proportion (%)	Number	Proportion (%)	Number	Proportion (%)
Poorer	33	42.5%	17	34.7%	50	38.8%
No Change	47	57.5%	32	65.3%	79	61.2%
<b>Total</b>	<b>80</b>	<b>100.0%</b>	<b>49</b>	<b>100.0%</b>	<b>129</b>	<b>100.0%</b>

From Table 5.7 (a) above, the majority of respondents (61.2%) indicated that there had not been any change in their household welfare. In this respect, the proportion in intervention location villages was 57.5% and 65.3% in control villages. On the other hand, overall 38.8% indicated they were poorer. In relation to this, 42.5% were in intervention location villages and 34.7% in the control.

Meanwhile, when the same data [from Table 5.7 (a)] were grouped by county it showed that a proportion of 44.4% in Bujumba County considered itself poorer compared to 35.4% in Kyamuswa County. In Bujumba County, 55.6% believed the poverty levels have not changed compared to 64.6% in Kyamuswa County. Refer to Table 5.7 (b)].

**Table 5.7 (b): Current Poverty Status - Perception of Households that Reported Lack of Improvement in Household Welfare Since 2011 by County**

Perception of Households on Current Poverty Status	Number of Households					
	Bujumba County		Kyamuswa County		Grand Total	
	Number	Proportion (%)	Number	Proportion (%)	Number	Proportion (%)
Poorer	27	44.4%	23	35.4%	50	38.8%
No Change	37	55.6%	42	64.6%	79	61.2%
<b>Total</b>	<b>64</b>	<b>100.0%</b>	<b>65</b>	<b>100.0%</b>	<b>129</b>	<b>100.0%</b>

As may be deduced from *Table 5.8* below, the three major causes of poverty as given by respondents that reported lack of improvement were: i) No / low income; ii) bad governance; and iii) lack of credit. Further more, high dependency levels, and lack of education were also mentioned as additional causes of poverty.

**Table 5.8: Major Causes of Poverty<sup>19</sup>**

Causes of Poverty	Frequency / Number Mentioned in:		
	Intervention Location Villages	Control Villages	Grand Total
1) No / low income	33	25	58
2) Bad governance	33	19	52
3) Lack of credit	27	8	35
4) High dependency level	12	5	17
5) Lack of education	11	4	15
6) Diseases	7	3	10
7) Social problem like over-drinking	3	0	3
8) Limited market for agricultural produce	2	0	2
9) Depopulation	0	1	1

## **5.4 Savings by Households**

During the survey, the household respondents were asked whether they saved some of their income or not, the proportion saved, and where they kept their savings. For households that reported as not saving any income, reasons were sought as to why they were unable to save.

The survey results obtained showed that overall **64.2%** of households reported that they were saving some of their incomes. Within the intervention location villages the proportion that reported saving was **67.9%** and in the control villages it was **56.5%**. Overall **35.8%** were not saving any of their incomes. In this regard, **32.1%** were not saving in the intervention location villages and **43.5%** in the control. Refer to *Table 5.9* below.

**Table 5.9: Income Saving Status of Households**

Saving Status of Household	Number of Households					
	Intervention Location Villages		Control Villages		Grand Total	
	Number	Proportion (%)	Number	Proportion (%)	Number	Proportion (%)
1) Save	163	67.9%	65	56.5%	228	64.2%
2) Do not Save	77	32.1%	50	43.5%	127	35.8%
<b>Total</b>	<b>240</b>	<b>100.0%</b>	<b>115</b>	<b>100.0%</b>	<b>355</b>	<b>100.0%</b>

<sup>19</sup> Each respondent in this category was asked to give three major causes of poverty.

With respect to the households that reported as saving some of their incomes, the number of households and range of proportions (%) of the income saved are as summarised in *Table 5.10 (a)*. **71.9%** of the population that reported saving some of their incomes, were saving between 10% - 30%; **12.7%** were saving above **30%**; and **8.8%** were saving below **10%**. While **6.6%** of the households were not certain of the proportion they were saving. A larger percentage saved in the intervention location villages than in the control villages (68% versus **55%**).

**Table 5.10 (a): Proportion of Income Saved by Households**

Proportion (%) of Income Saved	Number of Households in:					
	Intervention Location Villages		Control Villages		Grand Total	
	Number	Proportion (%)	Number	Proportion (%)	Number	Proportion (%)
1) Below 10	14	8.6%	6	9.2%	20	8.8%
2) 10 - 30	118	72.4%	46	70.8%	164	71.9%
3) Above 30	18	11.0%	11	16.9%	29	12.7%
4) Not Certain	13	8.0%	2	3.1%	15	6.6%
<b>Total</b>	<b>163</b>	<b>100.0%</b>	<b>65</b>	<b>100.0%</b>	<b>228</b>	<b>100.0%</b>

On the issue of where households keep their savings, the results revealed that some keep money in multiple institutions / schemes [*Table 5.10(b)*].

**Table 5.10 (b): Type of 'Institutions or Location' Where Savings are kept by Number of Households**

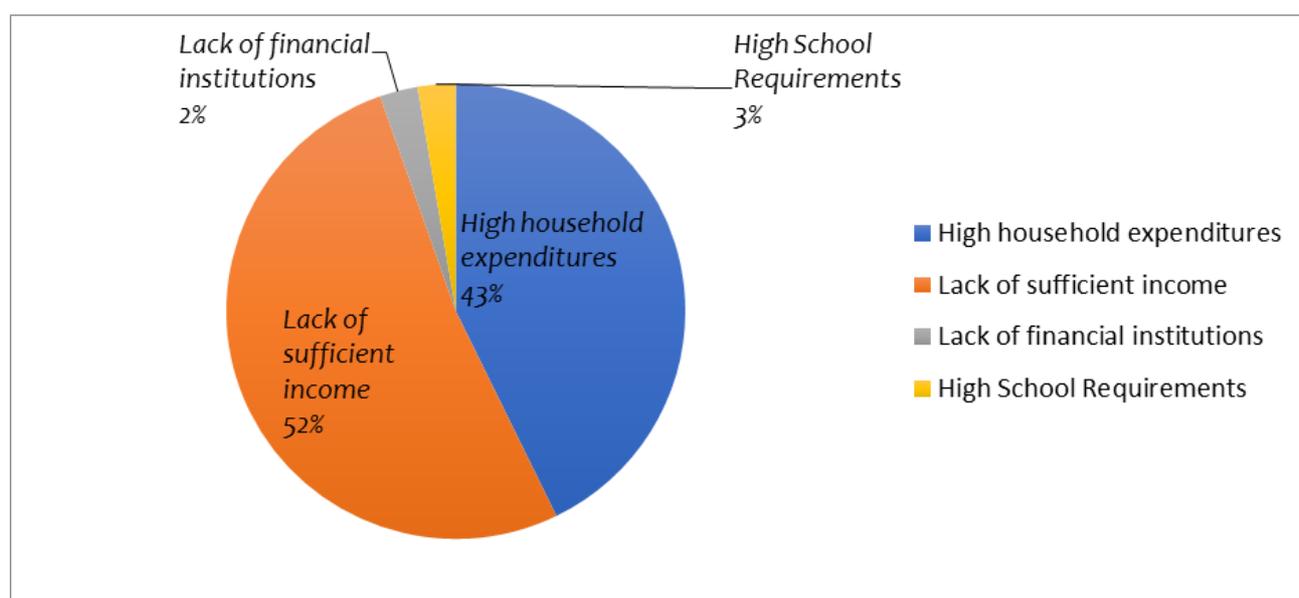
'Institutions or Location'	Number of Households in:		
	Intervention Location Villages	Control Villages	Grand Total
1) Village Saving and Loans Scheme (VLS)	50	24	74
2) Bank	45	19	64
3) SACCO	32	13	45
4) Mobile Phone	29	6	35
5) Saving Box (House)	20	9	29
6) Friends	1	1	2

For households that indicated that they were unable to save, the majority cited 'Lack of sufficient income' and 'High household expenditures' as major reasons for failing to save any portion of their incomes. Refer to *Table 5.11* and *Figure 5* below.

**Table 5.11: Major Reasons for Failure to Save by Households**

Reason for Failing to Save	Number of Households in:		
	Intervention Location Villages	Control Villages	Grand Total
1) Lack of sufficient income	57	40	97
2) High household expenditures	51	29	80
3) Lack of financial institutions	3	2	5
4) High School Requirements	3	2	5
<b>Total</b>	<b>114</b>	<b>73</b>	<b>187</b>

**Figure 5: Major Reasons Given by Households for Failure to Save**



### **5.5 Household Expenditures**

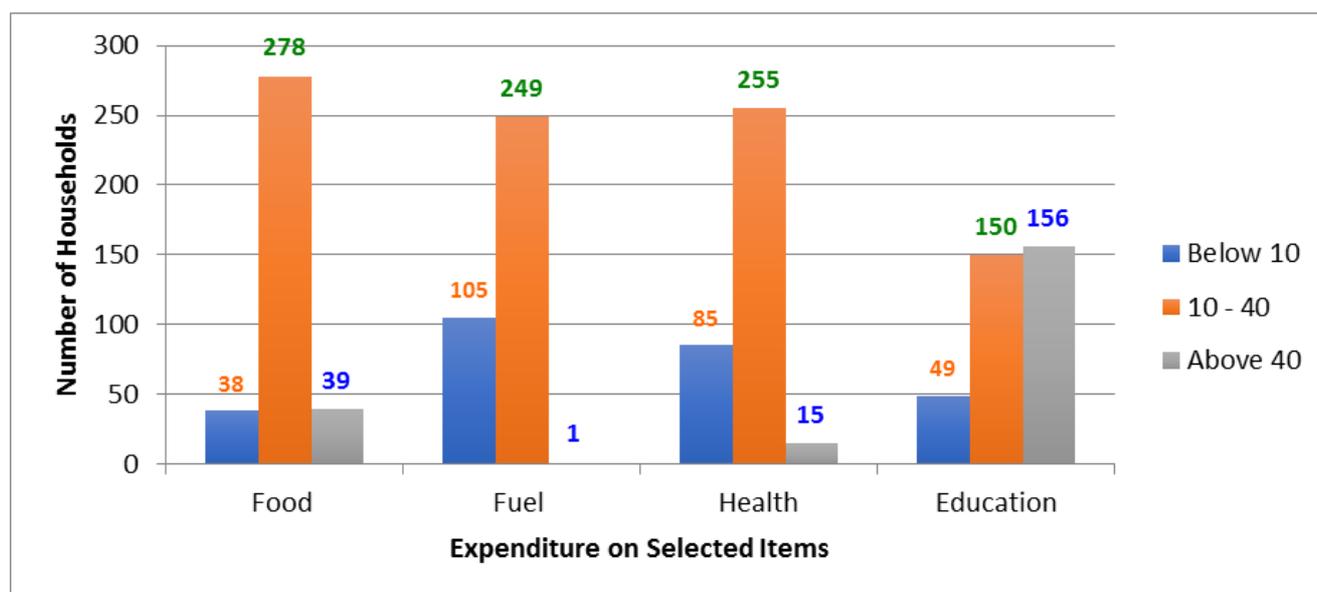
Information was sought from household respondents on whether the expenditure on the main household items and/or basic needs has changed or not. The responses are summarised in *Table 5.12 (a)*.

**Table 5.12 (a): Range of Household Expenditure by Number of Households**

Main Expenditure Item	Number and Proportion of Households in Expenditure Range (%):		
	Below 10	10 - 40	Above 40
1) Food	38 10.7%	278 78.3%	39 11.0%
2) Fuel	105 29.6%	249 70.1%	1 0.3%
3) Health	85 23.9%	255 71.8%	15 4.2%
4) Education (tuition fees, textbooks, uniforms, school operation contribution, etc.)	49 13.8%	150 42.3%	156 43.9%

With respect to food, the majority of households (78.3%) reported to be spending between 10% – 40%, 11% were spending 11.0%, and 10.7% were spending below 10%. On fuel, 70.1% of households were spending 70.1%, 29.6% were spending below 10%, and only 0.3% reported spending above 40%. Regarding health, 71.8% spend in a range of 10 – 40% of their income, 23.9% were spending below 10%, and 4.2% reported spending above 40%. Concerning education, 43.9% reportedly spent above 40%, 42.3% were spending in a range of 10 – 40%, whereas 13.8% spent below 10% of their earnings.

**Figure 6: Ranges of Household Expenditures on Selected Items**



The information collected on the changes in expenditures of households on selected items since 2011, indicates that the expenditures of most households has reportedly increased. The highest proportion of households reported more expenditure on education (**74.4%**); food (**67.6%**), health (**57.5%**), and fuel (**56.9%**).

**Table 5.12 (b): Reported Change in Household Expenditure since 2011 by Number of Households**

Main Expenditure Item	Number and Proportion (%) of Households Whose Expenditure is:		
	More	Unchanged	Less
1) Food	240	58	57
	67.6%	16.3%	16.1%
2) Fuel	202	87	66
	56.9%	24.5%	18.6%
3) Health	204	75	76
	57.5%	21.1%	21.4%
4) Education <sup>20</sup>	264	57	34
	74.4%	16.1%	9.6%

<sup>20</sup> This includes tuition / fees, textbooks, uniforms, school operation contribution, etc.

## 5.6 Household and Enterprise Assets

From the respondents, information was also sought on changes in household assets since 2011. These broadly included household assets, livestock and poultry, as well as those used in agriculture and fishing. The results are as summarised in Table 5.13 below.

**Table 5.13: Reported Change in Household and Enterprise Assets since 2011 by Number of Households**

Assets	Number and Proportion (%) of Households Whose Status of Possessions / Assets is:		
	More	Unchanged	Reduced
<b>Household Assets</b>			
1) Improved housing structures / building	186 52.4%	159 44.8%	10 2.8%
2) Furniture (sofas, beds...)	154 43.4%	192 54.1%	9 2.5%
3) Electronic household appliances / equipment (e.g. kettle, flat iron, TV, radio)	137 38.6%	206 58.0%	12 3.4%
4) Vehicles (motor bike / car)	29 8.2%	318 89.6%	8 2.3%
5) Bicycle	33 9.3%	309 87.0%	13 3.7%
<b>Livestock / Poultry</b>			
1) Large livestock	11 3.1%	328 92.4%	16 4.5%
2) Small Livestock	113 31.8%	197 55.5%	45 12.7%
3) Poultry	92 25.9%	163 45.9%	100 28.2%
<b>Agriculture and Fishing</b>			
1) Land	102 28.7%	242 68.2%	11 3.1%
2) Agricultural tools (e.g. hoes, plough, pangas, wheel barrows)	121 34.1%	225 63.4%	9 2.5%
3) Boats	40 11.3%	278 78.3%	37 10.4%
4) Fishing gear (nets, hooks)	41 11.5%	284 80.0%	30 8.5%
5) Boat engine	34 9.6%	306 86.2%	15 4.2%

**Table 5.14: Reasons for Reported Change in Household and Enterprise Assets**

Status of Possessions / Assets Since 2011	Major Reasons for the Status
1) More	<ul style="list-style-type: none"> <li>Improved incomes due to readily available market for farm produce; and diversification of income generating activities.</li> <li>Provision / Availability of electricity induced demand for electric appliances</li> <li>Livestock reproduced</li> </ul>
2) Unchanged	<ul style="list-style-type: none"> <li>Limited sources of income</li> <li>High bills for electric power</li> <li>Have not owned any assets</li> <li>Limited availability of land cannot allow more livestock</li> </ul>
3) Reduced	<ul style="list-style-type: none"> <li>Reduced earning capacity</li> <li>Sold off some assets to get school fees</li> <li>Worn out due to wear and tear</li> <li>Temporary housing got dilapidated and there was no money to construct</li> <li>Property lost to theft</li> <li>Lost livestock due to diseases, and veterinary services are poor</li> <li>Lost chicken due to chickenpox</li> <li>Boats were destroyed and/or confiscated by fisheries enforcement officials.</li> <li>Fishing gear were impounded and/or destroyed by fisheries enforcement officials.</li> </ul>

Also information was solicited on the number of mobile phones in the possession of household members. On the whole, the survey results show that **95.8%** of the households interviewed have at least a mobile telephone. Only **4.2%** of the households indicated they did not own any mobile telephone (*Table 5.15*). Intervention location and control villages have about the same distribution.

**Table 5.15: Available Number of Mobile Telephones by Number of Households**

Number of Mobile Telephones in Household	Number and Proportion (%) of Households in:			
	Intervention Villages	Location	Control Villages	Grand Total
None	8		7	15
	3.3%		6.1%	4.2%
1	68		27	95
	28.3%		23.5%	26.8%
2	108		52	160
	45.0%		45.2%	45.1%
3	31		15	46
	12.9%		13.0%	13.0%
4	12		7	19
	5.0%		6.1%	5.4%
5	10		5	15
	4.2%		4.3%	4.2%
6 and above	3		2	5
	1.3%		1.7%	1.4%
<b>Total</b>	<b>240</b>		<b>115</b>	<b>355</b>

## CHAPTER SIX: WATER, SANITATION, AND HOUSING CONDITIONS

### 6.1 WATER

Information was collected from households on their sources of water. The aim was to find out the main source of water used by each household; the time taken to collect the water; whether the water was clean and safe; whether the water was free or paid for; and maintenance status of the water source.

#### 6.1.1 Sources of Water

For every household respondent, information was solicited to establish the main source of water as well as secondary sources. *Tables 6.1 (a) and (b)* provide information on the findings.

**Table 6.1 (a): Households' Main Sources of Water by Number of Households**

Main Source of Water for Household	Number of Households in:		
	Intervention Location Villages	Control Villages	Grand Total
1) Piped / Gravity Flow Scheme	159 66.3%	34 29.6%	193 54.4%
2) Borehole	6 2.5%	20 17.4%	26 7.3%
3) Protected Spring	20 8.3%	5 4.3%	25 7.0%
4) Unprotected springs	3 1.3%	1 0.9%	4 1.1%
5) Protected hand dug wells	1 0.4%	0 0.0%	1 0.3%
6) Unprotected hand dug wells	1 0.4%	0 0.0%	1 0.3%
7) Rainwater	12 5.0%	4 3.5%	16 4.5%
8) Lake	38 15.8%	51 44.3%	89 25.1%
<b>Total</b>	<b>240</b> 100.0%	<b>115</b> 100.0%	<b>355</b> 100.0%

The survey results [Table 6.1 (a)] show that overall, **73.5%** of the households were accessing water from sources considered safe (i.e. piped / GFS, boreholes, protected spring, protected hand dug wells, and rainwater); and **26.5%** were using water from unsafe sources (lake, unprotected springs, and unprotected hand dug wells)<sup>21</sup>. However, within the intervention location villages the proportion accessing safe water sources was **82.5%** and **17.5%** were still using unsafe water sources. On the other hand, in the control villages **54.8%** of the households were accessing water from safe sources, and **45.2%** were utilising water from the unsafe water sources. Significantly, **44.5%** in the control villages still collected water from the lake compared to **15.8%** in the intervention location villages.

<sup>21</sup> According to the Uganda Population and Housing Census Results (2014), the proportions of households in the whole district accessing safe and unprotected sources of water were **46.7%** and **53.3%** respectively.

Also during the survey, respondents were asked about the secondary sources of water used. 251 out of 355 respondents indicated there were secondary sources from which their households could collect water.

**Table 6.1 (b): Households' Secondary Sources of Water by Number of Households**

Secondary Sources of Water for Household	Number and Proportion (%) of Households in:		
	Intervention Location Villages	Control Villages	Grand Total
1) Piped / Gravity Flow Scheme	14 7.7%	6 8.8%	20 8.0%
2) Borehole	2 1.1%	2 2.9%	4 1.6%
3) Protected Spring	11 6.0%	4 5.9%	15 6.0%
4) <b>Unprotected</b> springs	10 5.5%	0 0.0%	10 4.0%
5) Protected hand dug wells	9 4.9%	5 7.4%	14 5.6%
6) <b>Unprotected</b> hand dug wells	4 2.2%	1 1.5%	5 2.0%
7) Rainwater	38 20.8%	16 23.5%	54 21.5%
8) River	4 2.2%	0 0.0%	4 1.6%
9) Lake	90 49.2%	34 50.0%	124 49.4%
10) Others	1 0.5%	0 0.0%	1 0.4%
<b>Total</b>	<b>183</b> <b>100.0%</b>	<b>68</b> <b>100.0%</b>	<b>251</b> <b>100.0%</b>

As shown in *Table 6.1 (b)*, the proportion of households (in all sample villages) that resorts to unsafe sources of water (lake, unprotected springs, and unprotected hand dug wells, and river) whenever they were unable to collect it from their primary sources is **57.4%**; and **42.6%** of the households could collect water from safe secondary sources. The situation was similar in both KDDP intervention location and control villages. In intervention location villages, **59.6%** obtained water from unsafe sources, and **40.4%** from safe sources. With respect to the control villages, **57.4%** collected water from unsafe sources, whereas **42.6%** obtained it from safe sources.

### 6.1.2 Time Taken to Collect Water

During the survey, information was also collected on the time taken to collect water from the sources indicated by each household. The majority of households (89.3%) spend below 30 minutes to collect water from the main sources; and 80.9% from the respective secondary sources. Refer to Tables 6.2 (a) and (b).

**Table 6.2 (a): Time Taken to Collect Water from the Main Source by Households**

Main Source of Water for Household	Number of Households and Time Taken:			Total
	Below 30 Minutes	30 – 60 Minutes	Over 1 Hour	
1) Piped / Gravity Flow Scheme	189	3	1	<b>193</b>
2) Borehole	24	2	-	<b>26</b>
3) Protected Spring	13	11	1	<b>25</b>
<b>4) Unprotected</b> springs	-	3	1	<b>4</b>
5) Protected hand dug wells	-	-	1	<b>1</b>
<b>6) Unprotected</b> hand dug wells	1	-	-	<b>1</b>
7) Rainwater	15	1	-	<b>16</b>
8) Lake	75	11	3	<b>89</b>
<b>Total</b>	<b>317</b>	<b>31</b>	<b>7</b>	<b>355</b>
	<b>89.3%</b>	<b>8.7%</b>	<b>2.0%</b>	<b>100.0%</b>

**Table 6.2 (b): Time Taken to Collect Water from the Secondary Source by Households**

Secondary Source of Water for Household	Number of Households and Time Taken:			Total
	Below 30 Minutes	30 – 60 Minutes	Over 1 Hour	
1) Piped / Gravity Flow Scheme	19	1	-	20
2) Borehole	2	2	-	4
3) Protected Spring	5	9	1	15
<b>4) Unprotected</b> springs	7	3	-	10
5) Protected hand dug wells	5	8	1	14
<b>6) Unprotected</b> hand dug wells	4	1	-	5
7) Rainwater	54	-	-	54
8) River	3	1	-	4
9) Lake	103	17	4	124
10) Others	1	-	-	1
<b>Total</b>	<b>203</b>	<b>42</b>	<b>6</b>	<b>251</b>
	<b>80.9%</b>	<b>16.7%</b>	<b>2.4%</b>	<b>100.0%</b>

### 6.1.3 Quantity of Water Consumed by Households on Daily Basis

Consumption of water by each household on a daily basis was also collected. The majority of households (**58.6%**) were consuming between 50 – 100 litres per day (*Table 6.3*).

**Table 6.3: Quantity of Water Utilised Daily from the Main Source by Households**

Main Source of Water for Household	Quantity Utilised by Households (Litres):			Total
	Below 50	50 - 100	Above 100	
1) Piped / Gravity Flow Scheme	41	112	40	193
2) Borehole	7	16	3	26
3) Protected Spring	6	15	4	25
4) <b>Unprotected</b> springs	-	2	2	4
5) Protected hand dug wells	1	-	-	1
6) <b>Unprotected</b> hand dug wells	-	1	-	1
7) Rainwater	2	12	2	16
8) Lake	15	50	24	89
<b>Total</b>	<b>72</b>	<b>208</b>	<b>75</b>	<b>355</b>
	<b>20.3%</b>	<b>58.6%</b>	<b>21.1%</b>	<b>100.0%</b>

### 6.1.4 Quality of Water from the Main Water Sources

Perceptions were solicited on the quality of water from the main water source for each household. The findings reveal that the majority of households (**63.4%**) considered the water from their primary sources good, **16.3%** regarded it as average, and **20.3%** considered the water bad (*Table 6.4*).

**Table 6.4: Perception of Households on the Quality of Water from their Main Sources**

Main Source of Water for Household	Number and Perception of Households on the Quality of Water:			Total
	Good	Average	Bad	
1) Piped / Gravity Flow Scheme	158	33	2	193
2) Borehole	21	5	-	26
3) Protected Spring	22	2	1	25
4) <b>Unprotected</b> springs	-	1	3	4
5) Protected hand dug wells	1	-	-	1
6) <b>Unprotected</b> hand dug wells	1	-	-	1
7) Rainwater	14	2	-	16
8) Lake	8	15	66	89
<b>Total</b>	<b>225</b>	<b>58</b>	<b>72</b>	<b>355</b>
	<b>63.4%</b>	<b>16.3%</b>	<b>20.3%</b>	<b>100.0%</b>

### 6.1.5 Methods Used by Households to Treat Water

The methods used by households to treat the water collected from the stated sources before use, were also investigated. Boiling was given as the main method used by the majority of households (refer to Table 6.5). 98.0% of the households used boiling to treat water, and 2% utilised other methods such as filtration, and solar disinfection.

**Table 6.5: Methods Used by Households to Treat Water from their Main Source**

Main Source of Water for Household	Number of Households and method Used to Treat Water:			Grand Total
	Boiling	Chemicals	Others	
1) Piped / Gravity Flow Scheme	187	1	5	193
2) Borehole	26	-	-	26
3) Protected Spring	24	1	-	25
<b>4) Unprotected</b> springs	4	-	-	4
5) Protected hand dug wells	1	-	-	1
<b>6) Unprotected</b> hand dug wells	1	-	-	1
7) Rainwater	16	-	-	16
8) Lake	89	-	-	89
<b>Total</b>	<b>348</b>	<b>2</b>	<b>5</b>	<b>355</b>
	<b>98.0%</b>	<b>0.6%</b>	<b>1.4%</b>	<b>100.0%</b>

### 6.1.6 Duration of Availability of Water from the Main Sources

The survey also endeavoured to find out the number of months water from the main sources was available in a period of 12 months. On the whole, **80.3%** of the respondents reported availability of water throughout the 12 months. **9.0%** reported availability of water for a period of 9 – below 12 months, **6.5%** got water for 7 – 9 months, and the remaining **4.2%** obtained water up to 6 months only. Refer to Table 6.6 (a).

**Table 6.6 (a): Duration of Availability of Water from the Main Source – ALL Sampled Villages**

Main Source of Water for Household	Duration that Households have Water (Months):					Total Using Source	
	1 – 3	4 – 6	7 - 9	10 – below 12	12 (Whole Year)	Number	Proportion (%)
1) Piped / Gravity Flow Scheme	-	8	15	26	144	193	54.4%
2) Borehole	-	1	2	1	22	26	7.3%
3) Protected Spring	-	-	-	-	25	25	7.0%
<b>4) Unprotected</b> springs	-	-	1	-	3	4	1.1%
5) Protected hand dug wells	-	-	1	-	-	1	0.3%
<b>6) Unprotected</b> hand dug wells	-	-	-	-	1	1	0.3%
7) Rainwater	1	3	4	5	3	16	4.5%
8) Lake	-	2	-	-	87	89	25.1%
<b>Total</b>	<b>1</b>	<b>14</b>	<b>23</b>	<b>32</b>	<b>285</b>	<b>355</b>	<b>100.0%</b>
	<b>0.3%</b>	<b>3.9%</b>	<b>6.5%</b>	<b>9.0%</b>	<b>80.3%</b>	<b>100.0%</b>	

Making a county comparison on the duration of availability of water, it showed that in Bujumba County 78.6% of the county respondents reported availability of water throughout the 12 months and in Kyamuswa it was **83%**. **11.0%** (in Bujumba County) and **7.1%** (in Kyamuswa County) reported availability of water for a period of 9 – below 12 months. **6.9%** (in Bujumba County) and **5.5%** (in Kyamuswa County) got water for 7 – 9 months. The remaining **3.5%** (in Bujumba County) and **4.4%**

(in Kyamuswa County) obtained water up to 6 months only. Refer to *Table 6.6 (b-1)* and *Table 6.6 (b-2)*.

**Table 6.6 (b-1): Duration of Availability of Water from the Main Source – Bujumba County**

Main Source of Water for Household	Duration that Households have Water (Months):					Total Using Source	
	1 – 3	4 – 6	7 - 9	10 – below 12	12 (Whole Year)	Number	Proportion (%)
1) Piped / Gravity Flow Scheme	-	2	9	16	81	<b>108</b>	<b>62.4%</b>
2) Borehole	-	-	-	1	11	<b>12</b>	<b>6.9%</b>
3) Protected Spring	-	-	-	-	18	<b>18</b>	<b>10.4%</b>
<b>4) Unprotected</b> springs	-	-	-	-	1	<b>1</b>	<b>0.6%</b>
5) Protected hand dug wells	-	-	-	-	-	-	-
<b>6) Unprotected</b> hand dug wells	-	-	1	-	-	<b>1</b>	<b>0.6%</b>
7) Rainwater	1	3	2	2	2	<b>10</b>	<b>5.8%</b>
8) Lake	-	-	-	-	23	<b>23</b>	<b>13.3%</b>
<b>Total</b>	<b>1</b>	<b>5</b>	<b>12</b>	<b>19</b>	<b>136</b>	<b>173</b>	<b>100.0%</b>
	<b>0.6%</b>	<b>2.9%</b>	<b>6.9%</b>	<b>11.0%</b>	<b>78.6%</b>	<b>100.0%</b>	

**Table 6.6 (b-2): Duration of Availability of Water from the Main Source – Kyamuswa County**

Main Source of Water for Household	Duration that Households have Water (Months):					Total	
	1 – 3	4 – 6	7 - 9	10 – below 12	12 (Whole Year)	Number	Proportion (%)
1) Piped / Gravity Flow Scheme	-	6	5	10	64	<b>85</b>	<b>46.70%</b>
2) Borehole	-	1	2	-	11	<b>14</b>	<b>7.69%</b>
3) Protected Spring	-	-	-	-	7	<b>7</b>	<b>3.85%</b>
<b>4) Unprotected</b> springs	-	-	-	-	2	<b>2</b>	<b>1.10%</b>
5) Protected hand dug wells	-	-	1	-	-	<b>1</b>	<b>0.55%</b>
<b>6) Unprotected</b> hand dug wells	-	-	-	-	1	<b>1</b>	<b>0.55%</b>
7) Rainwater	-	-	2	3	1	<b>6</b>	<b>3.30%</b>
8) Lake	-	1	-	-	65	<b>66</b>	<b>36.26%</b>
<b>Total</b>	<b>0</b>	<b>8</b>	<b>10</b>	<b>13</b>	<b>151</b>	<b>182</b>	<b>100.0%</b>
	<b>0.00%</b>	<b>4.40%</b>	<b>5.49%</b>	<b>7.14%</b>	<b>82.97%</b>	<b>100.00%</b>	

### 6.1.7 Utilisation of Time

For households spending less than 30 minutes to collect water, most of them utilised the saved time for leisure, others for household chores, operating their businesses, or attending to their livestock and other agricultural activities. Some of the respondents mentioned utilised the time on more than one activity.

**Table 6.7: Utilisation of Time by Households Spending below 30 minutes to Collect Water from Source**

Activity on Which Saved Time is Utilised:	Number of Households	
	Intervention Location Villages	Control Villages
1) Operate business	53	35
2) Livestock & agriculture	35	10
3) Household chores	77	32
4) Leisure	97	47

### 6.1.8 Major Reasons for Using Water from Unsafe Sources

The major reasons why some households use water from unsafe sources<sup>22</sup> were also sought. The findings indicate that the households that indicated using water from unsafe sources, **44.7%** cited unavailability of protected sources of water in their villages; and **32.5%** cited unreliability of protected water sources. The other reasons given included long queuing duration, long distances, cost of water from the safe sources, bad taste of water, appreciation of the used sources of water, as well as others.

**Table 6.8: Major Reasons Given by Households for Using Water from UNSAFE Sources**

Major Reason for Using Water from Unsafe Source:	Number of Households		
	Intervention Location Villages	Control Villages	Grand Total
1) Protected source not available	48 37.2%	44 57.1%	92 44.7%
2) Unreliable	46 35.7%	21 27.3%	67 32.5%
3) Others	10 7.8%	6 7.8%	16 7.8%
4) Queuing Time	13 10.1%	1 1.3%	14 6.8%
5) Long distance	5 3.9%	1 1.3%	6 2.9%
6) Cost	5 3.9%	0 0.0%	5 2.4%
7) Bad Taste	0 0.0%	3 3.9%	3 1.5%
8) Used sources are ok	2 1.6%	1 1.3%	3 1.5%
<b>Total</b>	<b>129</b>	<b>77</b>	<b>206</b>

### 6.1.9 Payment for Water

Household respondents were asked whether the water collected from the main sources was paid for or free. The results in *Table 6.9* show that the situation in KDDP intervention location villages was such that **54.2%** paid for water from the primary sources, and **45.8%** were not paying. In the control villages, on the other hand, **34.8%** were paying for water from the primary sources and **65.2%** were getting it free<sup>23</sup>.

**Table 6.9: Water Cost Status by Households**

Water Cost Status	Number of Households in:		
	Intervention Location Villages	Control Villages	Grand Total
1) Pay for water	130 54.2%	40 34.8%	170 47.9%
2) Do not pay for water	110 45.8%	75 65.2%	185 52.1%
<b>Total</b>	<b>240</b> 100.0%	<b>115</b> 100.0%	<b>355</b> 100.0%

<sup>22</sup> The unsafe sources include unprotected springs and wells, and lake.

<sup>23</sup> The results should then show that as the intervention Location" villages pay, this money should ideally go to improved services / O&M (quality, quantity, availability) and improved state of repair of the infrastructure. Table 6.8 might indicate this, as 20% more households in the control villages were saying that protected sources were not available than in the 'intervention location" villages.

### 6.1.10 Monthly Cost of Water<sup>24</sup>

The survey probed to find out the amount households were paying for water every month. The results (Table 6.10) show that **38.5%** (in intervention location villages) and **32.5%** (in control villages) were paying between UGX 10,001 – 30,000 per month. Also **33.1%** (in intervention location villages) and **37.5%** (in control villages) were paying below UGX 5,000. In the range UGX 5,000 – 10,000 the proportions were **15.4%** (in intervention location villages) and **7.5%** (in control villages). Meanwhile in the range of UGX 30,001 – 60,000, the proportion of households was **11.5%** (in intervention location villages) and **20.0%** (in control villages). Only **1.5%** (in intervention location villages) and **2.5%** (in control villages) was paying above UGX 60,000.

**Table 6.10: Monthly Amount (UGX) Paid for Water Used by Households**

Amount Paid Monthly (UGX)	Number of Households in:		
	Intervention Location Villages	Control Villages	Grand Total
1) Below 5000	43 <b>33.1%</b>	15 <b>37.5%</b>	<b>58</b> <b>34.1%</b>
2) 5,000 – 10,000	20 <b>15.4%</b>	3 <b>7.5%</b>	<b>23</b> <b>13.5%</b>
3) 10,001 – 30,000	50 <b>38.5%</b>	13 <b>32.5%</b>	<b>63</b> <b>37.1%</b>
4) 30,001 – 60,000	15 <b>11.5%</b>	8 <b>20.0%</b>	<b>23</b> <b>13.5%</b>
5) Above 60,000	2 <b>1.5%</b>	1 <b>2.5%</b>	<b>3</b> <b>1.8%</b>
<b>Total</b>	<b>130</b> <b>100.0%</b>	<b>40</b> <b>100.0%</b>	<b>170</b> <b>100.0%</b>

### 6.1.11 Perception of Households on the Cost of Water

The perception of household respondents on the cost of water, the majority indicated that it was low and/or affordable - **52.3%** (in intervention location villages) and **67.5%** (in control villages). While **47.7%** (in intervention location villages) and **32.5%** (in control villages) indicated that the monthly cost was too high. This means that the control village inhabitants are in fact more satisfied with cost of water (quality of services not included), but this reflects what is already shown in Table 6.9.

**Table 6.11: Perception of Households on the Monthly Cost of Water**

Households Views on the Amount Paid Monthly	Number of Households in:		
	Intervention Location Villages	Control Villages	Grand Total
1) Too high	62 <b>47.7%</b>	13 <b>32.5%</b>	<b>75</b> <b>44.1%</b>
2) Affordable	59 <b>45.4%</b>	17 <b>42.5%</b>	<b>76</b> <b>44.7%</b>
3) Low	9 <b>6.9%</b>	10 <b>25.0%</b>	<b>19</b> <b>11.2%</b>
<b>Total</b>	<b>130</b>	<b>40</b>	<b>170</b>

<sup>24</sup> This highly depended on the consumption (see table 6.3 and the household size. Furthermore it also depended on the modality adopted in particular villages e.g. in Kisaba Landing site, each adult of 18 years and above had to pay UGX 1,000 monthly to cater for general cleaning, water and sanitation.

### 6.1.12 Reasons for Payment for Water

The respondents of the households who pay for water were asked for reasons why water was paid for. **56.9%** (in intervention location villages) and **37.5%** (in control villages) stated government rules as the reason; **16.2%** (in intervention location villages) and **37.5%** (in control villages) stated maintenance of water sources; another **24.6%** (in intervention location villages) and **10.0%** (in control villages) perceived it as allowances for water user committees (**WUCs**) and/or caretakers, and **2.3%** (in intervention location villages) and **15.0%** (in control villages) considered it for other purposes other than what has already been mentioned.

**Table 6.12: Reasons Given for Payment for Water by Households**

Reason for Payment	Number of Households in:		
	Intervention Location Villages	Control Villages	Grand Total
1) Government rules	74 56.9%	15 37.5%	89 52.4%
2) Maintenance	21 16.2%	15 37.5%	36 21.2%
3) Committees / Caretakers allowances	32 24.6%	4 10.0%	36 21.2%
4) Others	3 2.3%	6 15.0%	9 5.3%
<b>Total</b>	<b>130</b> <b>100.0%</b>	<b>40</b> <b>100.0%</b>	<b>170</b> <b>100.0%</b>

Obviously, the district and sub-counties need to carry out more awareness raising in this case, as to the reasons why people have to pay. It is not Government rules per se, but the need for operation and maintenance (O&M). However, the beneficiaries obviously have misunderstood this. It is noted that the households in the control villages understand this better than in the intervention location villages, which is difficult to comprehend.

### 6.1.13 Maintenance of Water Sources

The views of the respondents on how the primary water sources were being maintained were also sought.

**Table 6.13: Views of Households on How Water Sources are maintained**

Maintenance of Water Source	Number of Households in:		
	Intervention Location Villages	Control Villages	Grand Total
1) Satisfactorily Maintained	173 72.1%	54 47.0%	227 63.9%
2) Not Satisfactorily Maintained	67 27.9%	61 53.0%	128 36.1%
<b>Total</b>	<b>240</b> <b>100.0%</b>	<b>115</b> <b>100.0%</b>	<b>355</b> <b>100.0%</b>

From *Table 6.13*, **72.1%** (in intervention location villages) and **47.0%** (in control villages) of households considered the water sources satisfactorily maintained; whereas **27.9%** (in intervention location villages) and **53.0%** (in control villages) were not satisfied with the way their primary water sources were maintained. 25% more households in the intervention location villages believe that the infrastructure is satisfactorily maintained, which at least is encouraging. In view of this, however, it is

difficult to comprehend the answers given in Table 6.12. This may be an indicator of inadequate sensitisation to enable beneficiaries relate the payments made to the O&M of water sources.

## 6.2 SANITATION

During the survey, endeavours were made to find out the sanitation facilities used by the household members; their state of cleanliness; sanitation practices and knowledge by households; and participation of household members in sanitation meetings in their respective villages.

### 6.2.1 Sanitation Facilities Used by Households

On the aspect of sanitation facilities used by households, **52.1%** (in intervention location villages) and **40.0%** (in control villages) were using private latrines or toilets. Also **45.4%** (in intervention location villages) and **59.1%** (in control villages) reported using public latrines or toilets. Furthermore, **2.5%** (in intervention location villages) and **0.9%** (in control villages) did not have any latrines and were thus using nearby bushes or the lake (*Table 6.14*). More people were using private latrines in the intervention location villages than in the control villages. On the other hand, slightly more people had no latrine in the intervention location villages.

**Table 6.14: Category of Sanitation Facility Utilised by Households**

Type of Sanitation Facility	Number of Households in:		
	Intervention Location Villages	Control Villages	Grand Total
1) Private latrine or toilet	125 <b>52.1%</b>	46 <b>40.0%</b>	<b>171</b> <b>48.2%</b>
2) Public latrine or toilet	109 <b>45.4%</b>	68 <b>59.1%</b>	<b>177</b> <b>49.9%</b>
3) No latrine (bush or lake)	6 <b>2.5%</b>	1 <b>0.9%</b>	<b>7</b> <b>2.0%</b>
<b>Total</b>	<b>240</b> <b>100.0%</b>	<b>115</b> <b>100.0%</b>	<b>355</b> <b>100.0%</b>

### 6.2.2 Type of Private Sanitation Facilities Utilised by Households

Of the households that reported using private latrines / toilets, **84.0%** (in intervention location villages) and **80.4%** (in control villages) were simple pit latrines; **14.4%** (in intervention location villages) and **19.6%** (in control villages) were VIP latrines; and **1.6%** (in intervention location villages) were holes in the ground. Refer to *Table 6.15 (a)*.

**Table 6.15 (a): Type of Private Sanitation Facility Utilised by Households**

Type of Private Sanitation Facility	Number of Households		
	Intervention Location Villages	Control Villages	Total
1) Simple Pit latrine	105 <b>84.0%</b>	37 <b>80.4%</b>	<b>142</b> <b>83.0%</b>
2) VIP latrine	18 <b>14.4%</b>	9 <b>19.6%</b>	<b>27</b> <b>15.8%</b>
3) Hole in ground	2 <b>1.6%</b>	. <b>-</b>	<b>2</b> <b>1.2%</b>
<b>Total</b>	<b>100.0%</b>	<b>100.0%</b>	<b>171</b> <b>100.0%</b>

With respect to availability of water and soap at these sanitation facilities, only **32.2%** (in intervention location villages) and **34.8%** (in control, villages) of the private sanitation facilities were compliant. The remaining **67.2%** (in intervention location villages) and **65.2%** (in control, villages) did not have water and soap at all. Refer to *Table 6.15 (b)*.

**Table 6.15 (b): Availability of Water and Soap at the Private Sanitation Facilities**

Type of Private Sanitation Facility	Availability of Water and Soap at Sanitation Facility in:								
	Intervention Location Villages			Control Villages			TOTAL		
	Yes	No	Total	Yes	No	Total	Yes	No	Total
1) Simple Pit latrine	30	75	105	9	28	37	39	103	142
	28.6%	71.4%	100.0%	24.3%	75.7%	100.0%	27.5%	72.5%	100.0%
2) VIP latrine	11	7	18	7	2	9	18	9	27
	61.1%	38.9%	100.0%	77.8%	22.2%	100.0%	66.7%	33.3%	100.0%
3) Hole in ground	-	2	2	-	-	-	-	2	2
	-	100.0%	100.0%	-	-	-	-	100.0%	100.0%
Total	41	84	125	16	30	46	57	114	171
	32.8%	67.2%	100.00%	34.8%	65.2%	100.0%	33.3%	66.7%	100.0%

### 6.2.3 Level of Cleanliness of Public Sanitation Facilities Utilised by Households

The enumerators ascertained the level of cleanliness of public sanitation facilities during the survey. The results indicate that **16.7%** of the households were accessing clean public sanitation facilities, **62.8%** were using satisfactory public sanitation facilities, and **20.6%** were accessing dirty facilities (*Table 6.16*).

**Table 6.16: Level of Cleanliness of Public Sanitation Facilities Utilised by Some Households and Availability of Water and Soap**

Level of Cleanliness of Public Sanitation Facility	Number of Households	Availability of:		
		Soap and Water	Only Water	Neither Water Nor Soap
1) Clean	30	11	8	11
2) Satisfactory	113	24	40	44
3) Dirty	37	0	3	34
Total	180	35	51	89

Furthermore, the enumerators also had to establish the availability of water and soap at these public sanitation facilities. The findings reveal that only **20.0%** of the facilities had both soap and water, **29.1%** had only water, and **50.9%** neither had water nor soap (*Table 6.16*). This means that more awareness raising is required as to the importance of personal hygiene, e.g. hand washing after visits to the toilet.

## 6.2.4 Knowledge Levels of Respondents on the Most Important Hygiene Behaviours

The survey probed respondents on what they considered the most important hygiene behaviours and practices in order to ensure good health for all family members.

**Table 6.17: Most Important Hygiene Behaviours to Retain Healthy Families**

Important Hygiene Behaviours identified by Households	Number of Households in:					
	Intervention Location Villages		Control Villages		Grand Total	
	Number	Proportion (%)	Number	Proportion (%)	Number	Proportion (%)
1) Latrine use	190	79.2%	92	80.0%	282	79.4%
2) Others <sup>25</sup>	164	68.3%	77	67.0%	241	67.9%
3) Using safe and clean water	158	65.8%	70	60.9%	228	64.2%
4) Hand-washing	127	52.9%	56	48.7%	183	51.5%
5) Cooking food	88	36.7%	39	33.9%	127	35.8%
6) Covering cooked food	41	17.1%	17	14.8%	58	16.3%

Note: Each of the row proportions (%) intervention location, control, and grand total have been computed out of 240, 115, and 355 as bases respectively.

The three most mentioned behaviours and practices were: i) latrine use; ii) use of safe and clean water, and iii) others (e.g. washing utensils, keeping clean environment inside and outside houses, good personal hygiene including wearing clean clothes, bathing and brushing teeth). Refer to Table 6.17.

When the respondents were asked about the consequences of failing to maintain the mentioned behaviours and practices, 340 out of 355 (95.8%) household respondents were certain that family members would fall sick. Only 15 out 355 (4.2%) were uncertain of the consequences (Table 6.18). This was indeed a positive experience.

**Table 6.18: Consequences of Failure to Practice the Most Important Hygiene Behaviours**

Consequences of Failure to Practice Most Important Hygiene Behaviours	Number of Households in:					
	Intervention Location Villages		Control Villages		Grand Total	
	Number	Proportion (%)	Number	Proportion (%)	Number	Proportion (%)
1) Family members getting sick	226	94.2%	114	99.1%	340	95.8%
2) Not Certain	14	5.8%	1	0.9%	15	4.2%
<b>Total</b>	<b>240</b>	<b>100.0%</b>	<b>115</b>	<b>100.0%</b>	<b>355</b>	<b>100.0%</b>

<sup>25</sup> These include practices such as washing utensils, keeping clean environment inside and outside houses, good personal hygiene such as wearing clean clothes, bathing and brushing teeth.

### 6.2.5 Sensitisation of Households and Village Communities on Hygiene and Sanitation

Information was sought from the respondents on whether there have been any sensitisations at household level on sanitation and hygiene on the one hand, and village community meetings on the other.

**Table 6.19: Sensitisation of Individual Households on Hygiene and Sanitation**

Organisation / Office Undertaking Sensitisation	Number of Households in:					
	Intervention Villages		Control Villages		Grand Total	
	Number	Proportion (%)	Number	Proportion (%)	Number	Proportion (%)
1) Health worker	151	62.9%	65	56.5%	216	60.8%
2) Others (e.g. village hygiene and sanitation committees)	68	28.3%	28	24.3%	96	27.0%
3) Village Council	56	23.3%	23	20.0%	79	22.3%
4) Non-Government Organisation	26	10.8%	17	14.8%	43	12.1%
5) District	13	5.4%	9	7.8%	22	6.2%
6) Water User committee	1	0.4%	0	0.0%	1	0.3%
7) Community Development Officer	0	0.0%	1	0.9%	1	0.3%

The results obtained indicate that health workers were the most mentioned category in sensitising individual households on hygiene and sensitisation. Others mentioned include village councils and others (e.g. village hygiene and sanitation committees). Refer to *Table 6.19*.

With respect to the sensitisation of village communities on hygiene and sanitation, **63.8%** (in intervention location villages) and **64.3%** (in control villages) of the households affirmed that such meetings were conducted. On the other hand, **36.3%** in intervention location villages and **35.7%** in control villages stated there were no such meetings [*Table 6.20 (a-1)*]. Apparently, there is no significant difference between intervention location and control villages on this indicator.

**Table 6.20 (a-1): Holding of Sensitisation Meetings in the Villages on Hygiene and Sanitation**

Category of Villages	Respondents Indicating;					
	Yes		No		Grand Total	
	Number	Proportion (%)	Number	Proportion (%)	Number	Proportion (%)
1) Intervention Location	153	63.8%	87	36.3%	240	100.0%
2) Control	74	64.3%	41	35.7%	115	100.0%
<b>Total</b>	<b>227</b>		<b>128</b>		<b>355</b>	

Rating this indicator at county level, **49.1%** in Bujumba County were positive about the meetings having been held, and **78%** in Kyamuswa County. The proportions that said there were no meetings were **50.9%** in Bujumba County, and **22%** in Kyamuswa County. Refer to *Table 6.20 (a-2)*.

**Table 6.20 (a-2): Holding of Sensitisation Meetings in the Villages on Hygiene and Sanitation by County**

County	Have Sensitisation Meetings been held:				
	Yes		No		Total
	Number	Proportion	Number	Proportion	
1) Bujumba	85	49.1%	88	50.9%	173
2) Kyamuswa	142	78.0%	40	22.0%	182

When asked whether the knowledge obtained from the village meetings was ever applied, 248 out of 355 (69.9%) respondents attested to applying the knowledge acquired; 8 out of 355 (2.3%) were not applying it; and 99 out of 355 (27.9%) were not [Table 6.20 (b-1)].

**Table 6.21 (a): Responses on Application of knowledge Acquired from Village Meetings on Hygiene and Sanitation**

Application of Knowledge from Meetings	Number of Households
1) Yes	248
2) No	8
3) Not Sure	99
<b>Total</b>	<b>355</b>

The application of knowledge acquired was also analysed at county level – Table 6.21 (b). In Bujumba County 61.3% stated they applied the knowledge acquired and in Kyamuswa County the proportion was 78.0%. This cause of such a variance between the two counties is not clear.

**Table 6.21 (b): Responses on Application of knowledge Acquired from Village Meetings on Hygiene and Sanitation by County**

County	Responses of HH on Application of knowledge Acquired:						Total
	Yes		No		Not Sure		
	Number	Proportion (%)	Number	Proportion (%)	Number	Proportion (%)	
1) Bujumba	106	61.3%	4	2.3%	63	36.4%	173
2) Kyamuswa	142	78.0%	4	2.2%	36	19.8%	182
<b>Total</b>	<b>248</b>		<b>8</b>		<b>99</b>		<b>355</b>

For the respondents who attested to applying the knowledge acquired from the village meetings on hygiene and sanitation, they were asked to state the aspects on which they applied the knowledge. The aspects on which knowledge was applied (Table 6.22) include: Managing waste well; boiling water for drinking, keeping clean environment inside and outside the house, good personal hygiene practices; sleeping under mosquito nets; taking bilharzia drugs; and taking children for immunization and seeking medication at Health Centres.

**Table 6.22: Aspects on Which Households Applied the Knowledge Obtained from Village Sensitisation Meetings on Hygiene and Sanitation**

Aspect on Which Knowledge is Applied	Number of Households					
	Intervention Villages		Control Villages		Grand Total	
	Number	Proportion	Number	Proportion	Number	Proportion
1) Managing waste well - Latrine use, clearing garbage, & maintaining clean environment	108	45.0%	48	41.7%	156	43.9%
2) Boiling water for drinking, cleaning utensils, washing hands after using toilet, covering food and possession of a drying rack for utensil, and practicing good personal hygiene.	98	40.8%	50	43.5%	148	41.7%
3) Sleeping under a mosquito nets	7	2.9%	6	5.2%	13	3.7%

Aspect on Which Knowledge is Applied	Number of Households					
	Intervention Villages	Location	Control Villages		Grand Total	
4) Taking Bilharzia drugs	2	0.8%	-	-	2	0.6%
5) Taking children for immunization and seeking medication at Health Centres	-	-	4	3.5%	4	1.1%
6) Not certain	76	31.7%	29	25.2%	105	29.6%

Note: Each of the row proportions (%) intervention location, control, and grand total have been computed out of 240, 115, and 355 as bases respectively.

### 6.3 HOUSING CONDITIONS

Information on the housing conditions was through observations by the enumerators, who noted the materials used for the roof, walls, and floor. The results obtained reveal that 127 houses 355 (35.8%) were categorised as permanent structures; 219 out of 355 (61.7%) as semi-permanent structures; and 9 out of 355 (2.5%) as temporary structures.

Table 6.23: Category of Houses

Type of House (Roof and Wall)	Number of Houses with Type of Floor:						Grand Total	Proportion (%)
	Earth	Earth with dung	Cement screed	Concrete	Other			
1) Permanent Structure (Iron sheets or tiles, and burnt bricks)	10	1	109	7	0	127	35.8%	
2) Semi-Permanent Structure (iron sheets, and sunburnt bricks or mud and wattle)	135	22	57	3	2	219	61.7%	
3) Temporary Structure (any roofing material, and wood etc.)	7	1	1	0	0	9	2.5%	
Grand Total	152	24	167	10	2	355	100.0%	
	42.8%	6.8%	47.0%	2.8%	0.6%	100%		

It is noted that in the 2008 Baseline Survey in the five fishing communities, the reported number of houses with cement screed varied between 1.2% and 10.5%. The figures are not directly comparable with those of the End Evaluation, as the latter also included other villages. However, the figures are a rather good indication of the increase in housing standard the last 10 years.

Table 6.24: Respondents who Reported 'No Improvement in Household Welfare' Correlated With Category of Housing Structure

Category	Number of Respondents in:			Total
	Permanent Structure	Semi-Permanent Structure	Temporary structure	
Poor	37	88	4	129
	28.7%	68.2%	3.1%	

When the categories of houses were correlated with the category of respondents who reported that there had been 'No Improvement in Household Welfare' (i.e. 129 respondents) the information revealed that 28.7% (i.e. 37 out of 129) was in permanent structures; 68.2% (i.e. 88 out of 129) was in semi-permanent structures; and 3.1% (i.e. 4 out of 129) was in temporary structures. Refer to Table 6.23.

## CHAPTER SEVEN: DEVELOPMENT INTERVENTIONS AND SUSTAINABILITY

### **7.1 DEVELOPMENT INTERVENTIONS UNDERTAKEN AND BENEFITS**

In this section, the desire was to find out from respondents any development interventions undertaken in the various sectors (whether by Government or development partners) in their areas; benefits to the village communities: category of beneficiaries; and participation of members of the households in the planning meetings and subsequent participation in the implementation of activities<sup>26</sup>.

#### ***7.1.1 Knowledge of Sector Development Interventions***

Information was solicited from respondents regarding development interventions undertaken in their villages since 2011. The results show that most respondents were aware of development interventions that have been undertaken in their villages and have some knowledge of the organisations responsible for the interventions. The interventions acknowledged by the respondents are in education, hygiene and sanitation, fisheries / trade, health, and other sectors such as electricity, roads, and banking. The major organisations cited as responsible for most interventions are Government (Central Government and Kalangala District Local Government), and KDDP / ICEIDA. Other development partners and NGOs / CBOs were also mentioned. It was also noted that some few respondents acknowledged interventions in some sectors, but did not know the organisations responsible (*Table 7.1*).

***Table 7.1: Knowledge of Sector Development Interventions in the Village Since 2011 and Organisations Responsible***

Development Intervention	Number of Households Acknowledging Interventions and Organisations Responsible:				
	CG / KDLG	KDDP / ICEIDA	Other Development Partners	NGOs / CBOs	Do Not Know
1) Education	142	114	17	24	17
2) Sanitation and Hygiene	99	38	12	7	20
3) Fisheries / Trade	60	19	3	5	8
4) Health	84	16	10	7	14
<b>Others</b>					
5) Electricity, Roads & SACCOs	130	1	13	7	12

Although ICEIDA is by far the most prominent supporter in education, they might not be recognised as such, as they are not mentioned on any signboard in any of the primary schools. The funder is often mentioned to be Kalangala District Local Government.

<sup>26</sup> The questions in the MTR were differently formulated so it is not possible to compare the answers below directly with the MTR answers. The MTR asked: "Have you ever heard of ICEIDA?" and "to what extent has ICEIDA supported critical needs."

### 7.1.2 Views on Benefits from Sector Development Interventions<sup>27</sup>

The respondents, who acknowledged development interventions in their villages, affirmed that village communities had benefitted (Table 7.2).

**Table 7.2: Views on Whether the Village Communities Benefitted from the Sector Development Interventions**

Sector Development Interventions	Views Whether Village Communities Benefitted from Interventions in:		
	Yes	Proportion (%)	No
1) Education	211	59.4%	0
2) Sanitation and Hygiene	163	45.9%	0
3) Fisheries / Trade	91	25.6%	1
4) Health	116	32.7%	0
<b>Others</b>			
5) Electricity, Roads & SACCOS	152	42.8%	0

Notably, the MTR asked whether people were satisfied with the KDDP interventions in fisheries, and 58% answered “yes” (with 42% answering “no”). The reason for this relatively low yes-percentage might be that sector improvements, especially construction of infrastructure was still under implementation. However, as the question in the MTR were not equal to the questions now, a *direct* comparison is not possible.

### 7.1.3 Categories of Beneficiaries from Sector Development Interventions

For interventions that were undertaken in the villages, respondents were asked the categories of beneficiaries. The broad perceptions by the respondents were that all people in these villages had benefitted (Table 7.3).

**Table 7.3: Category of Beneficiaries from the Sector Development Interventions in the Villages Since 2011**

Sector Development Interventions	Perceived Beneficiaries of Sector Development Interventions:								
	All	Men	Women	Boys	Girls	Orphan & Other Vulnerable Children	Elderly	People With Disabilities	People Living With HIV & AIDS
1) Education	193	8	10	32	32	18	0	1	2
2) Sanitation and Hygiene	161	2	2	2	2	0	0	1	0
3) Fisheries / Trade	82	10	8	2	2	0	0	0	0
4) Health	104	1	4	3	3	0	0	0	5
5) Electricity, Roads & SACCOS	149	2	3	0	0	0	0	0	0

<sup>27</sup> This section gives information from respondents who gave information on development interventions in their areas the specified sectors. The difference between the total sample households and those who responded is the number that said they did not know.

### 7.1.4 Participation of Village Community Members in Planning Meetings and Implementation of Activities

Information was also solicited to establish participation of members of households in planning meetings and subsequent participation in the implementation of activities. The results [Table 7.4 (a)] show that there have been efforts to involve community members in planning meetings of the various development interventions.

**Table 7.4 (a): Participation of Community Members in the Planning of Programmes / Activities in the Villages since 2011**

Sector Development Interventions	Participation in Planning Meeting of Programmes / Activities:					
	Intervention Location Villages		Control Villages		Total	
	Yes	No	Yes	No	Yes	No
1) Education	89	72	27	26	<b>116</b>	<b>98</b>
2) Sanitation and Hygiene	76	48	27	13	<b>103</b>	<b>61</b>
3) Fisheries / Trade	35	34	16	7	<b>51</b>	<b>41</b>
4) Health	40	39	12	25	<b>52</b>	<b>64</b>
5) Electricity, Roads & Banks	49	72	17	16	<b>66</b>	<b>88</b>

However, with respect to participation of community members during implementation of activities, most of the community members felt left out [Table 7.4 (b)] show.

**Table 7.4 (b): Participation of Community Members in the Implementation of Programmes / Activities in the Villages since 2011**

Sector Development Interventions	Participation in Implementation of Programmes / Activities:					
	Intervention Location Villages		Control Villages		Total	
	Yes	No	Yes	No	Yes	No
1) Education	38	123	13	40	<b>51</b>	<b>163</b>
2) Sanitation and Hygiene	43	81	14	26	<b>57</b>	<b>107</b>
3) Fisheries / Trade	16	53	14	9	<b>30</b>	<b>62</b>
4) Health	16	63	6	31	<b>22</b>	<b>94</b>
5) Electricity, Roads & Banks	16	105	9	24	<b>25</b>	<b>129</b>

## 7.2 SUSTAINABILITY DEVELOPMENT INTERVENTIONS UNDERTAKEN AND BENEFITS

Respondents were probed to find out whether there has been any change in the provision of public facilities and services in the various sectors in their respective areas. The proportions of respondents who had views that there have been positive changes in the education sector were **57.9%** in intervention location villages and **45.2%** in control villages. **17.9%** in intervention location villages and **24.3%** in control villages said there was no positive change. **24.2%** in intervention location villages and **30.4%** in control villages were not sure about the changes. Under health, **50.0%** in intervention location villages and **49.6%** in control villages believed there were positive changes. Meanwhile, **23.8%** in intervention location villages and **21.7%** in control

villages did not perceive any changes in this sector. The proportions that were not sure were **26.3%** in intervention location villages and **28.7%** in control villages.

In the remaining sectors, the proportion of respondents who thought there have been positive changes is below 50% - water (**45.8%** in intervention location villages and **19.1%** in control villages), sanitation (**27.1%** in intervention location villages and **27.0%** in control villages); and fisheries / trade (**30.0%** in intervention location villages and **27.0%** in control villages).

The answers indicate that improvements in the education sector are most clearly recognised by the population amongst the sector, which to a large extent could be attributed to the ICEIDA support. Refer to *Table 7.5 (a)*. The relatively high perception in the health sector is most likely due to other support than from KDDP, for example through the last years' comprehensive support to many health centres under the Kalangala Comprehensive Health Services Project (KCHSP).

**Table 7.5 (a): Perceptions of Households on the Changes in the Provision of Public Facilities and Services Since 2011**

Service Sector	Perception Household Respondents on Changes:								
	Intervention Location Villages			Control Villages			Total Villages		
	Yes	No	Not Sure	Yes	No	Not Sure	Yes	No	Not Sure
1) Education	139	43	58	52	28	35	191	71	93
	<b>57.9%</b>	<b>17.9%</b>	<b>24.2%</b>	<b>45.2%</b>	<b>24.3%</b>	<b>30.4%</b>	<b>53.8%</b>	<b>20.0%</b>	<b>26.2%</b>
2) Water	110	60	70	22	48	45	132	108	115
	<b>45.8%</b>	<b>25.0%</b>	<b>29.2%</b>	<b>19.1%</b>	<b>41.7%</b>	<b>39.1%</b>	<b>37.2%</b>	<b>30.4%</b>	<b>32.4%</b>
3) Sanitation	65	54	121	31	25	59	96	79	180
	<b>27.1%</b>	<b>22.5%</b>	<b>50.4%</b>	<b>27.0%</b>	<b>21.7%</b>	<b>51.3%</b>	<b>27.0%</b>	<b>22.3%</b>	<b>50.7%</b>
4) Health	120	57	63	57	25	33	177	82	96
	<b>50.0%</b>	<b>23.8%</b>	<b>26.3%</b>	<b>49.6%</b>	<b>21.7%</b>	<b>28.7%</b>	<b>49.9%</b>	<b>23.1%</b>	<b>27.0%</b>
5) Fisheries / trade	72	41	127	31	24	60	103	65	187
	<b>30.0%</b>	<b>17.1%</b>	<b>52.9%</b>	<b>27.0%</b>	<b>20.9%</b>	<b>52.2%</b>	<b>29.0%</b>	<b>18.3%</b>	<b>52.7%</b>
6) Electricity & Roads	36	9	195	7	7	101	43	16	296
	<b>15.0%</b>	<b>3.8%</b>	<b>81.3%</b>	<b>6.1%</b>	<b>6.1%</b>	<b>87.8%</b>	<b>12.1%</b>	<b>4.5%</b>	<b>83.4%</b>
7) Agriculture & SACCOs	29	8	203	4	3	108	33	11	311
	<b>12.1%</b>	<b>3.3%</b>	<b>84.6%</b>	<b>3.5%</b>	<b>2.6%</b>	<b>93.9%</b>	<b>9.3%</b>	<b>3.1%</b>	<b>87.6%</b>

Note: Each of the row proportions (%) intervention location, control, and grand total have been computed out of 240, 115, and 355 as bases respectively.

Comparing the two counties in Kalangala district, 88 out of 173 (**50.9%**) respondents in Bujumba County and 103 out of 182 (**56.6%**) in Kyamuswa County intimated that there have been positive changes in the education sector; **21.4%** in Bujumba County and **18.7%** in Kyamuswa County said there was no positive change; and **27.7%** in Bujumba County and **24.7%** in Kyamuswa County were not sure of any changes.

**Table 7.5(b-1): Perceptions of Households on the Changes in the Provision of Public Facilities and Services Since 2011 – Bujumba County**

Service Sector	Perception Household Respondents on Changes:			Grand Total
	Yes	No	Not Sure	
1) Education	88	37	48	173
	50.9%	21.4%	27.7%	100.0%
2) Water	85	32	56	173
	49.1%	18.5%	32.4%	100.0%
3) Sanitation	44	34	95	173
	25.4%	19.7%	54.9%	100.0%
4) Health	74	44	55	173
	42.8%	25.4%	31.8%	100.0%
5) Fisheries / trade	47	26	100	173
	27.2%	15.0%	57.8%	100.0%
6) Electricity & Roads	36	5	132	173
	20.8%	2.9%	76.3%	100.0%
7) Agriculture & SACCOs	19	5	149	173
	11.0%	2.9%	86.1%	100.0%

**Table 7.5(b-2): Perceptions of Households on the Changes in the Provision of Public Facilities and Services Since 2011 – Kyamuswa County**

Service Sector	Perception Household Respondents on Changes:			Grand Total
	Yes	No	Not Sure	
1) Education	103	34	45	182
	56.6%	18.7%	24.7%	100.0%
2) Water	47	75	60	182
	25.8%	41.2%	33.0%	100.0%
3) Sanitation	52	44	86	182
	28.6%	24.2%	47.3%	100.0%
4) Health	103	37	42	182
	56.6%	20.3%	23.1%	100.0%
5) Fisheries / trade	56	39	87	182
	30.8%	21.4%	47.8%	100.0%
6) Electricity & Roads	7	11	164	182
	3.8%	6.0%	90.1%	100.0%
7) Agriculture & SACCOs	14	6	162	182
	7.7%	3.3%	89.0%	100.0%

With respect to other sectors, the proportions of respondents who thought there have been positive changes were below 50% in Bujumba County - water (49-1%), sanitation (25-4%); health (42.8%), fisheries / trade (27.2%), electricity and roads (20.8%), and agriculture and SACCOs (11.0%); and in Kyamuswa County the corresponding proportions of respondents were - water (25.8%), sanitation (28.6%); health (56.6%), fisheries / trade (30.8%), electricity and roads (3.8%),

and agriculture and SACCOs (**7.7%**). Notably in Kyamuswa County positive changes have been recognised in the health sector.

The answers indicate that improvements in the education sector are most clearly recognised by the population amongst the sector, which to a large extent could be attributed to the ICEIDA support. Notably also positive changes have been recognised in the health sector in Kyamuswa County.

**Table 7.6: Reasons Given by Respondents for the Perceptions on the Changes in the Provision of Public Facilities and Services Since 2011**

Perception of Changes	Perceptions on the Changes						
	Education	Water	Hygiene and Sanitation	Health	Fisheries / trade	Others	
						Electricity & Roads	Agriculture & SACCOs
1) Positive	<ul style="list-style-type: none"> <li>Children having lunch at school</li> <li>Construction of boarding sections in primary schools</li> <li>Free access to education for all</li> <li>Improved education system and administration</li> <li>Improved performance in PLE and grades</li> <li>Improved performance of schools in academics</li> <li>Improved supervision of schools by Government officials</li> <li>More qualified teachers have been deployed in schools</li> <li>More sensitization about the need to educate children</li> <li>Provision of books to school children</li> <li>Provision of solar panels to schools</li> </ul>	<ul style="list-style-type: none"> <li>Increased access to piped water, and distribution on-going</li> <li>Frequent water quality checks</li> <li>Increased access to clean and safe water – protected springs bore holes etc.</li> <li>Water is treated with chemicals</li> <li>Village tanks provided</li> <li>Good maintenance of water points</li> <li>Improved water services</li> </ul>	<ul style="list-style-type: none"> <li>Acquisition of public latrines and/or toilets</li> <li>Constructed public latrines and/or toilets</li> <li>Elimination of poor fishing methods</li> <li>Engaged in sensitisation programmes</li> <li>Improved hygiene &amp; sanitation</li> <li>Increased monitoring by responsible officials</li> <li>Increased sensitization of community on hygiene and sanitation</li> <li>Morbidity in the community has reduced</li> <li>More latrines are available</li> <li>Public latrines are available and accessible</li> <li>Regular garbage</li> </ul>	<ul style="list-style-type: none"> <li>Acquired Health centre II</li> <li>Acquired solar at the health centre.</li> <li>Active health workers / medical staff</li> <li>Availability of adequate drugs</li> <li>Availability of ambulance</li> <li>Construction and renovation of health facilities</li> <li>De-worming children</li> <li>Distribution of mosquito nets</li> <li>Deworming of children</li> <li>Follow ups and distribution of medicine to PLWHA</li> <li>Free medical care</li> <li>Good health workers - diligent about their work</li> <li>Health outreaches</li> <li>Improved</li> </ul>	<ul style="list-style-type: none"> <li>Access to fish stores</li> <li>Acquired a weighing scale, and built a weighing shade</li> <li>Acquired weighing slab</li> <li>As a result of strict enforcement of fishing regulation there has been improvement in fishing practices</li> <li>Enforcement of the fishing regulations by UPDF has reduced illegal fishing practices</li> <li>Enforcement of the fishing regulations has been helpful to the community</li> <li>Government has provided fishing nets to improve livelihoods</li> <li>Improved fishing as a result of fishing policy regulation enforcement</li> <li>Improved fishing activities</li> <li>Improved services on monitoring and regulation of laws in the fishing sector</li> <li>Increased enforcement of fishing regulation</li> <li>Provision of fishing nets</li> </ul>	<ul style="list-style-type: none"> <li>Provision of more ferries on the lake</li> <li>Peoples' livelihoods, school preparations, and businesses have been boosted due to availability of electricity</li> <li>Improved transport network both on water and roads</li> <li>Provision of electricity and access at household though bills are high</li> <li>Transport-provided with a boat and engine</li> <li>Solar electricity was provided</li> <li>There is improved road network - constructed and regularly maintained</li> </ul>	<ul style="list-style-type: none"> <li>Improvement in the agricultural sector where seedlings have been given to people under NAADS / Operation Wealth Creation.</li> <li>Banking - provision of loans &amp; saving schemes</li> <li>Banks offer credit to people</li> <li>Improved extension services in agriculture and improved security in the area.</li> <li>Improved income from agriculture</li> <li>Improved security at village level</li> <li>Increased monitoring by agricultural extension workers</li> <li>Loans &amp; Saving schemes to youth</li> <li>Improvement oil palm farming</li> <li>There is improved security in the district</li> </ul>

Perception of Changes	Perceptions on the Changes						
	Education	Water	Hygiene and Sanitation	Health	Fisheries / trade	Others	
						Electricity & Roads	Agriculture & SACCOs
	<i>in the district</i> <ul style="list-style-type: none"> <li>• Provision of water tanks at schools</li> <li>• Pupils are given academic bursaries</li> <li>• Reduced absenteeism by teachers – they are available at school and teach the pupils</li> <li>• Reduced absenteeism of teachers</li> <li>• Salaries to teachers paid timely</li> <li>• School buildings are in good condition - Schools have been constructed / renovated</li> <li>• Teachers are diligent and pupils perform well</li> <li>• Teachers are motivated</li> </ul>		<i>collection</i> <ul style="list-style-type: none"> <li>• There is proper garbage management</li> </ul>	<i>supervision by the district officials</i> <ul style="list-style-type: none"> <li>• Increased HIV &amp; AIDS outreaches &amp; distribution of drugs</li> <li>• Increased monitoring of People Living With HIV &amp; AIDS</li> <li>• Provision of ambulances – vehicle and boat ambulances</li> <li>• Provision of water tanks to health facilities</li> <li>• There is improved health service delivery</li> <li>• Upgrading of some health facilities</li> <li>• VHTs are now active</li> </ul>			

Perception of Changes	Perceptions on the Changes						
	Education	Water	Hygiene and Sanitation	Health	Fisheries / trade	Others	
						Electricity & Roads	Agriculture & SACCOs
2) None	<ul style="list-style-type: none"> <li>High school charges in Government-Aided schools</li> <li>Inadequate classroom space</li> <li>Inadequate teaching staff</li> <li>Lack of scholastic materials such as books</li> <li>Little attention is given to teachers by Government</li> <li>Long distances to school</li> <li>Low grades at PLE - Grades and performance are bad</li> <li>Many children of school-going age are not attending school and responsible officials have neglected that.</li> <li>Not enough qualified teacher</li> <li>Schools are far and some islands lack primary schools</li> <li>Teachers are not diligent enough</li> </ul>	<ul style="list-style-type: none"> <li>Boreholes which get spoilt are never repaired</li> <li>No access to clean water in the households</li> <li>No clean water source nearby</li> <li>No piped water</li> <li>Piped water is expensive</li> <li>Piped Water is not sufficient and unreliable</li> <li>Water system is poorly maintained</li> <li>Taps were destroyed during road construction and were never repaired</li> <li>Water pipes and taps are rusty, they need to be changed</li> </ul>	<ul style="list-style-type: none"> <li>Buildings at the facility are old, with poor latrines and faulty solar system</li> <li>Collapse of latrine and not helped</li> <li>Drainages are needed along the roads</li> <li>Health workers take long to visit the community</li> <li>High water table thus flooded pit latrines leading to overflow</li> <li>Inadequate sensitisation on hygiene and sanitation</li> <li>Limited inspection of homes by health workers</li> <li>Public latrine charges are high for the community</li> <li>Public latrines (some) are not</li> </ul>	<ul style="list-style-type: none"> <li>No Government hospital in the district / Government hospital is very far</li> <li>Health facilities still lack adequate drugs and medical equipment</li> <li>Medical personnel occasionally report on duty / Health workers are absent sometimes.</li> <li>High mortality of pregnant mothers</li> <li>Poor attitude of some health workers</li> <li>Limited staff</li> <li>Medical personnel I not available on weekends</li> <li>Inadequate health workers in health facilities</li> <li>No follow-up of mothers on issues relating to</li> </ul>	<ul style="list-style-type: none"> <li>Barges and drying racks are spoilt</li> <li>Low catches of fish due to 'discriminative' enforcement of fishing regulations, hence illegal fishing practices still occur</li> <li>Enforcement of the fishing regulations has negatively affected the income for some people as they have been rendered jobless</li> <li>Implementation of the fishing regulation is affecting peoples livelihoods</li> <li>No fish handling facilities</li> <li>Enforcement officials on the lake are too cruel / Unprofessional behaviour among the fisheries staff</li> <li>The fishing tools are expensive</li> <li>Unfulfilled promise by the government to provide fishing tools i.e. fishing nets</li> <li>Village councils no longer receive the 25% (a mandatory share as per Local Governments</li> </ul>	<ul style="list-style-type: none"> <li>Bad roads yet education and health facilities are far away</li> <li>Electricity is expensive</li> <li>Hard to reach island yet no ferry</li> <li>No access to electricity</li> </ul>	<ul style="list-style-type: none"> <li>Poor quality inputs such as seeds</li> <li>Sensitisation on income-generating activity diversification especially amongst fishing folks-</li> </ul>

Perception of Changes	Perceptions on the Changes						
	Education	Water	Hygiene and Sanitation	Health	Fisheries / trade	Others	
						Electricity & Roads	Agriculture & SACCOs
	<ul style="list-style-type: none"> <li>The children cannot read and write</li> <li>There is no secondary school in the area</li> </ul>	<ul style="list-style-type: none"> <li>Water supplied is not treated</li> </ul>	<p><i>in good condition and need rehabilitation</i></p> <ul style="list-style-type: none"> <li>Public latrines are filled up and need to be drained</li> <li>Public latrines are not enough</li> <li>Public latrines got filled up, there are no safe alternatives</li> <li>Public pit latrines not sufficient</li> <li>Toilets are blocked</li> <li>Water drainages are lacking</li> <li>Water supplied in some areas is not treated</li> </ul>	<p><i>family planning</i></p> <ul style="list-style-type: none"> <li>Low morale of health workers</li> </ul>	<p><i>Act – CAP 243) of locally raised revenue for development</i></p>		
3) Not Sure	<ul style="list-style-type: none"> <li>Children attending school outside Kalangala District</li> <li>We use private schools</li> <li>No child attending school currently</li> </ul>	<ul style="list-style-type: none"> <li>Nil</li> </ul>	<ul style="list-style-type: none"> <li>Nil</li> </ul>	<ul style="list-style-type: none"> <li>Nil</li> </ul>	<ul style="list-style-type: none"> <li>Nil</li> </ul>	<ul style="list-style-type: none"> <li>Nil</li> </ul>	<ul style="list-style-type: none"> <li>Nil</li> </ul>

**Appendix 1: Sampled Villages and Number of Households by County, Sub-county / Town Council, and Parish**

County / Sub-county / Town Council	Parish	Sampled Villages during End of Term Evaluation:		Number of Households:	
		Control Villages	Beneficiary Villages	Sampled	Covered
<b>Bujumba County</b>					
1) Bujumba	Bwendero		Bwendero	14	14
		Ddajje		9	9
	Bunyama		Kagoonya	7	8
		Lwabaswa		10	9
	Bujumba		Kibanga-Buligo	7	7
			Bujumba-Buyoga	10	10
Mulabana		Kyagalanyi (Mulabana)	20	20	
2) Kalangala Town Council	Kalangala 'A'	Buggala		11	11
			Kibanga	3	3
	Kalangala 'B'	Lutoboka		11	11
			Kalangala	15	17
3) Mugoye	Kagulube		Bugoma	13	13
	Kayunga		Bumangi	3	3
	Bbeta		Bbeta	12	13
			Kasekulo – Ttubi	5	5
			Kasekulo	22	20
<b>BUJUMBA TOTAL</b>		<b>5</b>	<b>11</b>	<b>172</b>	<b>173</b>
<b>Kyamuswa County</b>					
1) Bubeke	Bubeke		Kande	4	4
		Lwazi-Bubeke		8	8
			Namisoke	17	17
	Jaana	Lwazi-Jaana		13	13
		Kikku	7	7	
2) Bufumira	Bufumira		Bufumira	4	4
		Kaazi		13	14
	Lulamba	Kaaya		8	8
			Misonzi	15	15
		Kachanga	20	20	
3) Kyamuswa	Buwanga		Buwanga	2	3
		Lwanabatya		12	12
	Buzingo		Buwazi	6	6
			Buzingo	5	5
			Kisaba	23	24
		Nakibanga		10	10
4) Mazinga	Buggala		Kachungwa	10	10
		Busindi		3	3
<b>KYAMUSWA TOTAL</b>		<b>7</b>	<b>11</b>	<b>180</b>	<b>182</b>
<b>KALANGALA DISTRICT TOTAL</b>		<b>12</b>	<b>22</b>	<b>352</b>	<b>355</b>

## **Annex 8: Illustration Photos**

**Local Administration (and Tourism) Component**



The District HQs in Kalangala Town, constructed with ICEIDA funding. Nice patio in the middle of the building. The Fisheries Dept office, with desktop PC no longer in use. Most senior officers in the district administration have laptop computers these days, leaving some of the ICEIDA PCs provided idling. However, the normal lifetime of the PCs was exceeded.



Bubeke Sub-County Office. Nice offices with good furniture. The building shows signs of serious deterioration. The Sub-County claimed to have very little (read: no) money to undertake proper O&M.



Bufumira Sub-County Office. (No-one at home when visiting, but doors were open). Nice main building with solid furniture, but deteriorating latrine structures, with broken plastering and termite-eaten/rotten latrine doors of wood.



Mazinga Sub-County Office. Nice offices and solid furniture. As Mazinga is a rather remote place, one sub-county employees is using his office for accommodation, as no dormitory for employees exists.



Mazinga Sub-County Office in standard design. Showing some signs of deterioration, e.g. hole in water tank (not in use) and rotten latrine doors. The ceiling in the assembly hall has a large crack. The building exterior needs brush-up painting.



The Sese Islands Tourist Center in Kalangala Town, next to the new district government building. A fully private initiative, with 3 employees and hardly any customers in the café. Virtually no tourists visiting (6 Polish and German tourists in December was considered as “good”). The few artefact needs proper display. The Centre Manager makes some handicraft for sales in the café. The Centre might arrange for private transport to sites and guiding, but no regular set-up for tourists exists.

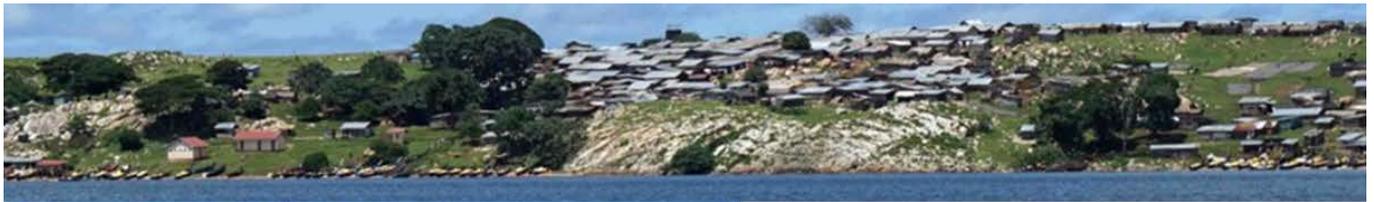
## **Fisheries and WATSAN Component**



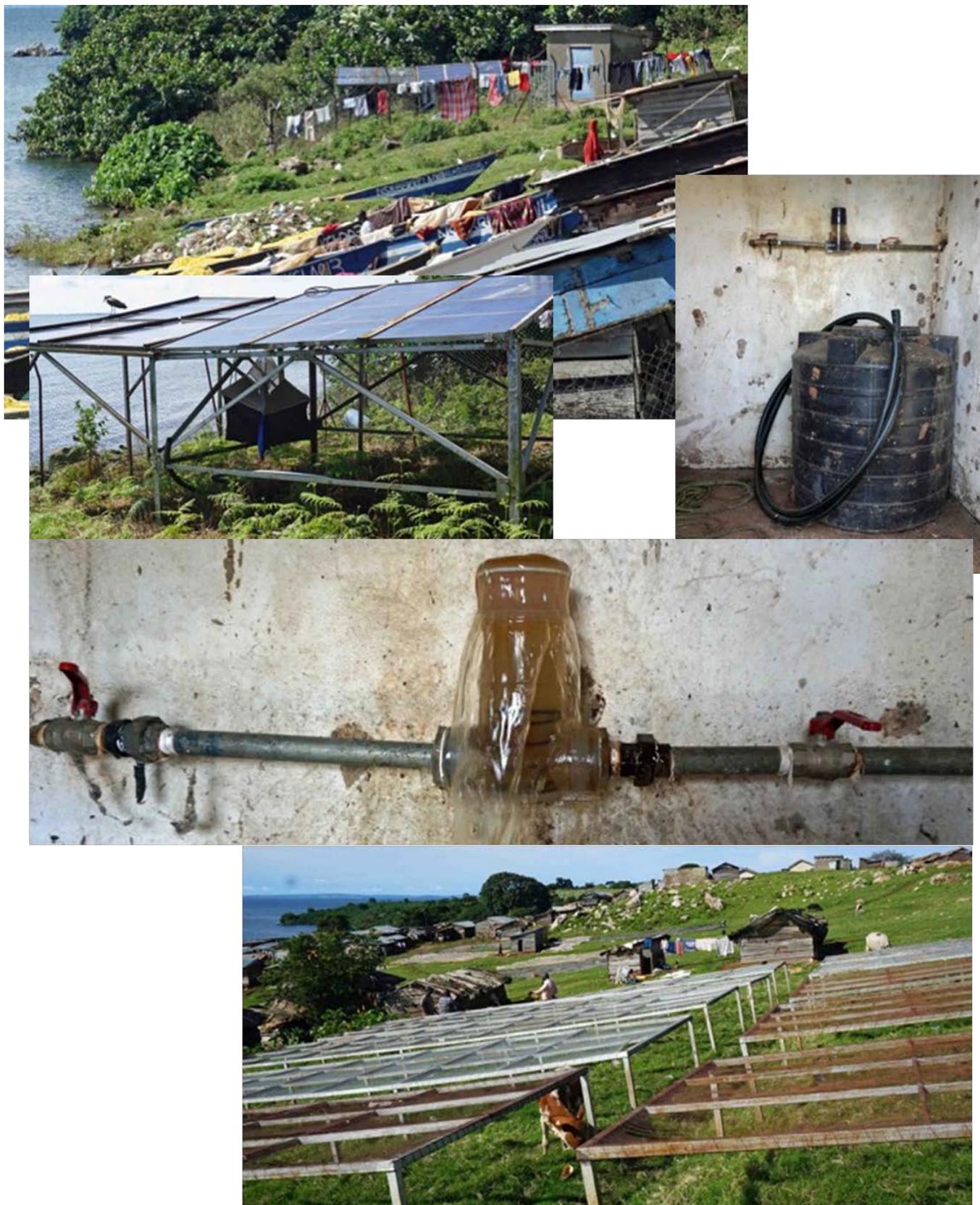
Kyagalanya Fish Landing Site. Nice offices with furniture. Water is present and supplied by Kalangala Infrastructure Services (KIS) through pipeline from Kanasi fish landing site nearby. The stairs to the fish washing stand has been destroyed by flood water and needs to be rebuilt. Fish drying racks not in use at the time of the visit.



Kyagalanya Fish Landing Site. The water tank at the landing site. In front of the tank is the concrete garbage bin with two chambers (obviously not in use). This is a standard design on all landing sites, not possible to empty without climbing into the bins and shuffle out!!! The bat problems is solved (all bats killed, but some remain to be removed from ceiling mesh). No water available for hand washing in the toilet sink. One door lock is broken/missing. Choking kiln (for smoking fish) in the village, used for other purposes after smoking was banned by authorities.

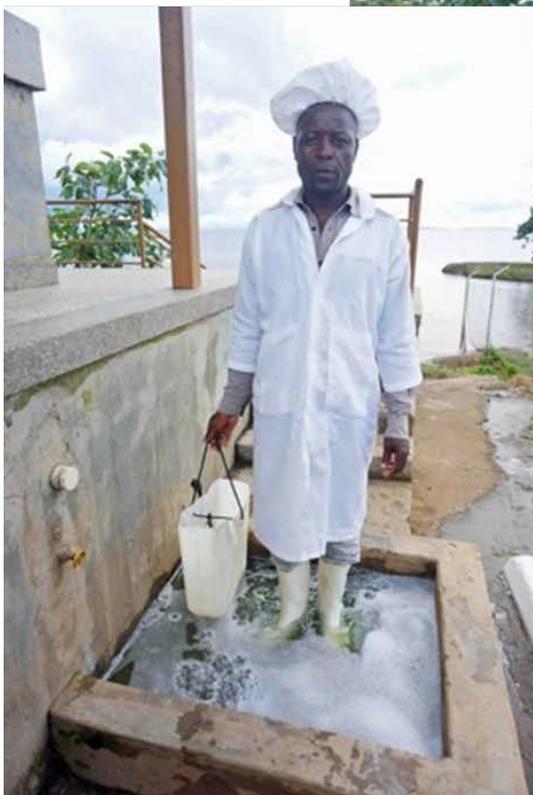


Namisoke Fish Landing Site. Overview photo: the fish landing site on left hand side. Photo under: Offices and store rooms to the right, toilets to the left. No water available in the toilets, and broken tap in sink. One room in the toilet building used for storing of fuel. The public toilet in the village built under KDDP, fairly clean but with a terrible stench! Low left: bird nests in the office building.



Namisoke Fish Landing Site. Water intake pump house with solar panel (needs cleaning). Water looked dirty, probably after some days without pumping (supply twice a week only). Water operator had no training at all (new person). No chemicals available for several months.

Fish drying rack not in use (drying on the ground in the background). Some rusty racks, but some looked OK. Different reasons given for non-use (metal taste in fish, metal tearing the nets they put on top, etc.). Probably also socio-cultural reasons not properly explained to the Evaluation Team (land ownership, etc.)



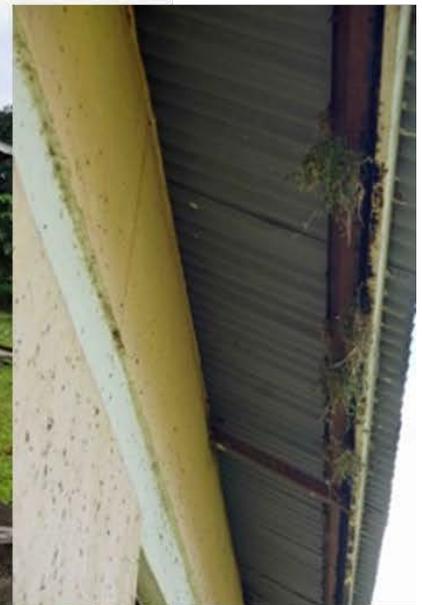
Kasekulo-Ttubi Fish Landing Site. By far the best operated site in Kalangala District, with a good clean appearance. Compulsory washing of rubber boots in bath with detergent liquid before entering the fish washing stand. All visitors have to change to rubber boots at the gate. Water and soap (!) available in toilet washroom.



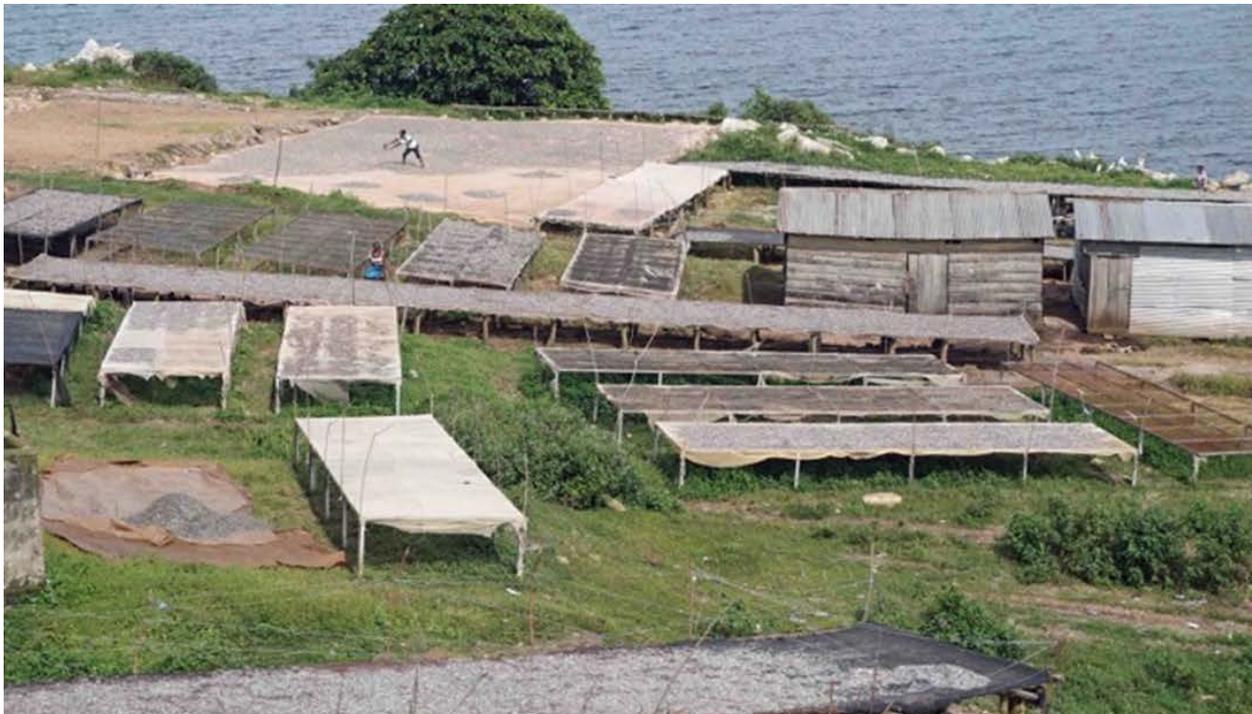
Kasekulo-Ttubi Fish Landing Site. Water supply house with solar power. Broken tap in the yard. Two chambers for filling in chlorine for disinfection, and chemicals available on site (used every day). The operator had seemingly good knowledge of the operation. The fish drying rack in Kasekulo-Ttubi village not in use – rusty and broken.



Public toilet in Kasekulo-Ttubi village, not properly cleaned, and with unattractive appearance. Toilet cistern not functioning (considered not appropriate design for rural areas) and no water available for hand washing or toilet flushing.



Kachungwa Fish Landing Site. Overview photo: village to the right and landing site to the left of the forest (with water supply house on very left). Site obviously not much used to judge from appearance. All buildings were locked as the Sub-County Fisheries Officer had gone away with the key! Buildings show signs of deterioration (a lot of birds' nests and rusty roof beams). The floating barge, no more in use (not suitable in rough weather).



Kachungwa Fish Landing Site. The fish drying racks in use in the village (Kachanga), except for the rusty ones on the right side. Water supply pump house with difficult access due to swampy area around. Solar panels need cleaning.



Kachungwa Fish Landing Site. The pump house was not cleaned and looked more or less abandoned. Instructions on the wall to run only one pump at the time, alternate running on various week days. Both pumps were however running all the time, and have not been serviced in 3 years or more. The pump capacity has gone down and cannot supply ample water to the village any more. No chemicals were available. The Evaluation Team called the “problem phone number”, but no answer, which was not a big surprise. In principle, it is the community that has the responsibility for operation of the water supply, but they have no means (skills and money) to maintain and repair. The Water Department in the district have no funds for fuel to visit the location and assist. Even good submersible pumps from Grundfos need regular maintenance and service, ideally every 6 months! It is believed to be just a matter of short time before this water supply is stopping completely.

## **Education and Sports Component**



The new schools buildings built with ICEIDA funding are very much appreciated by the local communities (and of course by teachers and pupils alike), giving self-confidence to communities and appear as attractive education facilities. Pupil enrolment has gradually increased with the improved facilities and it seems to be easier to retain teachers with attractive teaching environment and partly accommodation improving. Top: Lwabasa Primary School and Bubeke PS. Right: the new teachers quarter in Busanga PS, built under KIEP, not yet handed over to the school, with high standard bathroom facilities. Bottom: Mazinga PS under refurbishment during schools break (KIEP).





More than 90% of the brass tap handles were broken in the schools. Some had creative solutions to stop the leaking. The one-handle tap in metal seems to be more sturdy, but is also more expensive.



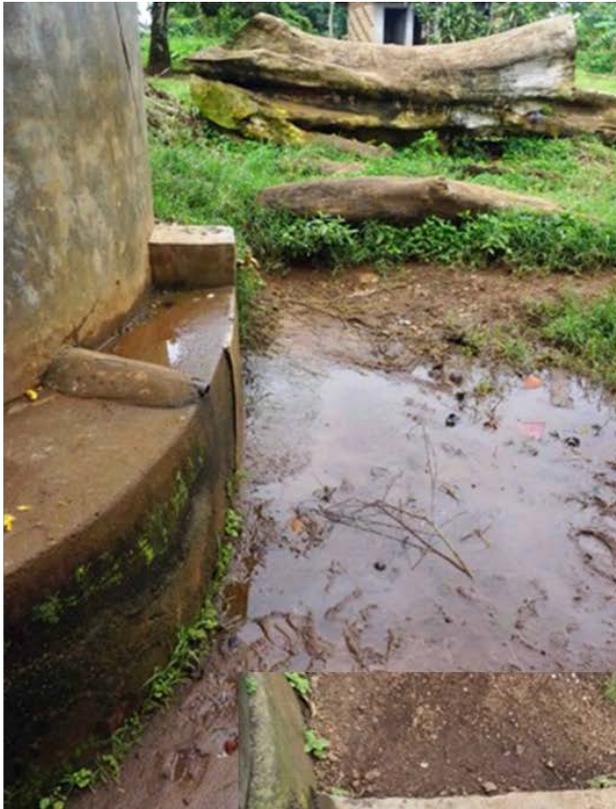
The latrines in schools were generally found quite clean. Normally, there are daily routines of cleaning by the pupils. Various toilet design, also to accommodate disabled pupils (of which there were none reported in any school!). Top: Mulabana PS latrine. Bottom: Bubeke PS latrine.



The schools kitchens have appropriate design with own building for firewood and other storage. The tilted air gutters were found to be the best ones, as the design prevents the rain from entering. The energy-saving stoves has reduced the firewood use to 1/3 of previous level. From top left: Bufumira PS, Kibanga PS, Mulabaka (w/headteacher), Bwendero PS (3 photos).



Rainwater harvesting tanks installed in all schools. Only a few have cracks and need repair. A weak point is the tap mounted directly on the tank, as frequent “movements” might make the tank break (bottom right). The protection wall on the lower part of the tank had cracks in some schools, and in a couple of schools it had been completely removed.



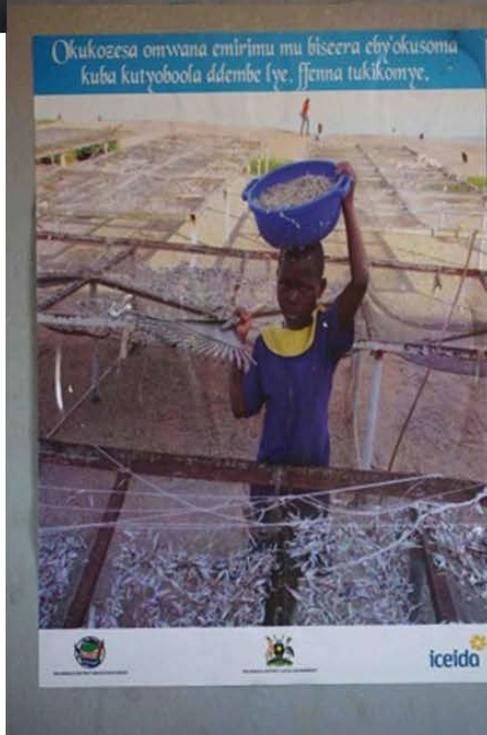
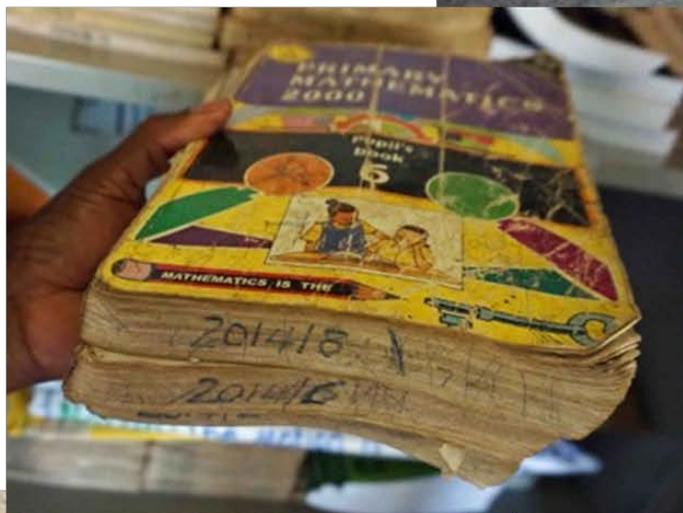
The environment around the schools water taps could be improved by simple means in most schools. Daily cleaning and picking of garbage should be instigated. A task for the schools health clubs? The area under and close to the taps could preferably be elevated by putting stones/bricks on the ground. Note that the design having the tap mounted on a “stand” in front of the tank avoid the tap mounted directly on the tank from breaking.



Dormitories in some schools have increased enrolment of pupils coming from far away (e.g. outer islands). Top: Mazinga PS, middle Kibanga PS. Right: Girls washing room in connection with the toilet (Kibanga PS), clean and with plastic wash basins available. Girls are washing their own sanitary pads, made of cotton and produced at school.



Some equipment provided to all schools (both in KDDP and in KIEP): musical instruments, chemicals and scientific equipment (cut-through plastic heart), and wind wane. Each class has got its own cupboard for storing books, highly appreciated by the teachers.



The pupil to schoolbook ratio in Kalangala is approaching 1:1 (not yet completely there), and some books are well used. During the time of the Evaluation several schools had just received new books (as it was the end of term) and were in the process of registering them. The books were given from various donors (KIEP/ICEIDA; Rotary Club, etc.).

Unlike other donors, ICEIDA is not mentioned as the donor of the infrastructure facilities (schools blocks, latrines, kitchens)). The above examples show that the district takes the full credit for funding! However, in almost every village and schools, posters are placed for general awareness raising dealing with different topics, all including the logo of ICEIDA. (This poster says: "Keeping a child out of school to do menial jobs and household chores is an abuse of the child's rights. We must all stop it.")

**Health Component**



Top: Mulabana Health Centre (HC), with midwife being interviewed. Most health centres reported on decrease in water- and hygiene-related diseases, but district statistics showed a rather stable number of cases. (The midwife claimed that no equipment/furniture provided under KDDP were left, contrary to what was reported in most other HCs visited).

Bottom: Bwendero HC, with functioning solar energy system, installed under KDDP. The two batteries are new (provided by Kalangala Comprehensive Health Services Project some two years back, but already now having low capacity) The nurse interviewed knew that awareness raising had been undertaken under KDDP, but she came to the centre after the Health Component ended in 2010.



A telephone provided under KDDP (in Bumangi St. Elisabeth HC), now stored in a cupboard. The nurse interviewed claimed that it had been in use only on the day it was installed. KDDP installed 12 such phones with antennas. Obviously most of them were used just for a short period, one interviewee said up to one year. It was reported that most of the filing cupboard and furniture provided under KDDP (before 2010) were still in use, but few of the staff remembered anything from that period, as they mostly had been employed later.

Most of the health centres had newer equipment provided under the Kalangala Comprehensive Health Services Project (KCHSP).

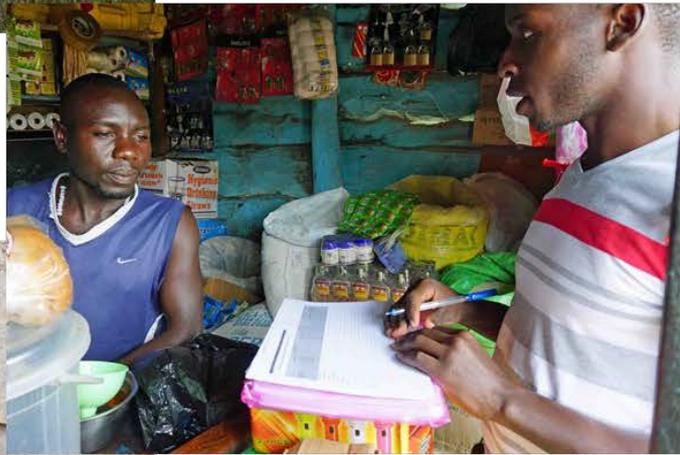
Bottom: Mazinga HC. The solar system installed under KDDP is still in use for light, but batteries were replaced in February 2017. In addition, the HC has one solar system for the medicine fridge (supplied by UNEP in 2008) and one system supplied by KCHSP for the PC (2016).

**Household Survey**  
**(Sample photos showing enumerators at work in various villages)**









## **Annex 11: Comments to the Draft Evaluation Report**

Comments to the Draft Evaluation Report of 28 June was only made by the Icelandic Embassy In Kampala.

It is noted with some surprise that the Kalangala District Local Government, who was overall responsible for KDDP and the main implementer, did not submit comments and neither did the Ministry of Local Government.

### **General Comments**

**by**

**Icelandic Embassy (ICEMB)  
Kampala  
(Dated July 2018)**

**on**

### **DRAFT FINAL REPORT**

***“External Evaluation of District Development Cooperation  
Programmes in Kalangala District in Uganda”***

***28 June 2018***

***Draft, V1***

<b>The Consultant’s Team:</b>	<b>Tore Laugerud Godfrey Mukwaya Andrew Arinaitwe</b>
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No	Comment
	<p><b>GENERAL</b></p> <p>These are general comments intended to supplement comments tracked in the main document (draft vi). Hence the two should be read together</p>
1	<p><b>CHAPTER 1. INTRODUCTION</b></p> <p>There are a few comments tracked in the main document as follows:</p> <ul style="list-style-type: none"> <li>• <i>Under section 1.1.3 (d) Other studies and milestones:</i> KDDP Internal Review by partners was omitted (see tracked comment in the main document).</li> </ul> <p><i>Under section 1.2.2 The Household Survey:</i> There is a need to define “beneficiary” villages and “control” villages (see tracked comment in the main document)</p>
2	<p><b>CHAPTER 2. DESIGN AND RELEVANCE</b></p> <p>There are a few comments tracked in the main document as follows:</p> <p><i>Under section 2.2 ---- Immediate Objective (outcome/purpose:</i> The clarification is made that KDDP had four immediate objectives (indicating that it was a multi-sector project or “programme”. The three immediate objectives under fisheries and WATSAN sector, education sector and Health sector were not conceived as subsidiary to the immediate objective under administration sector, as presented in the report. It is a different matter if the consultant interpreted it as the most important immediate objective among the four.</p>
3	<p><b>CHAPTER 3. EFFECTIVENESS</b></p> <p><i>A couple of comments are made on this chapter as follows:</i></p> <p><b>3.1 Clarification on progress reports</b></p> <p><i>The finding that the progress reports were produced up to 2009 needs to be corrected as the records available show progress reports were produced up to the end of project:</i></p> <ul style="list-style-type: none"> <li>• Up to end of 2010, KDDP progress reports were prepared by PIT at sector level, processed by PMT and presented to PSC. So KDDP progress reports for this period are available up to the end of 2010 (including the KDDP Five Year Report produced in 2010, which is cited by the consultant).</li> <li>• After 2010, KDDP progress reports were prepared by the district (coordinated by District Planning Unit, processed at district level by District Technical Planning Committee (DTPC) and submitted to the PSC. All reports from 2011 onwards were submitted by the District including the KDDP Completion Report (<i>See attached copies, owing to the bulk of reports only Annual progress reports for 2011-2013, and a copy of biannual report for 2014 have been attached</i>)</li> </ul> <p> KDDP Progress Reports.zip</p> <p><b>3.2 The finding that the reports did not include reporting on outcomes needs to be put into context:</b></p> <p>The outcomes are at higher results level and as such cannot be reported on in every quarterly progress report. Besides, reporting on outcomes requires evidence in form of data collected over periodic intervals, either through studies or national/sub-national statistical systems. Nevertheless, reporting on some outcome indicators was done based on available data as evidenced by the reports provided:</p> <ul style="list-style-type: none"> <li>• KDDP Five Year Report covered reporting on outcome indicators under administration sector, fisheries and WATSAN sector and education sector. Where reporting on outcomes was not comprehensive, it was because data was not available at that material time.</li> <li>• KDDP MTR covered qualitative reporting on satisfaction levels with the quality of services</li> </ul>

No	Comment
	<ul style="list-style-type: none"> <li>The KDDP Progress report for 2011 comprehensively covered reporting on outcome indicators, while reports for 2012 on words covered some reporting on outcomes for education.</li> <li>Finally, the KDDP Internal Review by partners, Detailed Review of KDDP Education Component, and KDDP Completion report all reported on outcome indicators. The completion report highlighted areas where data was not readily available.</li> </ul> <p><b>3.4 The findings on the Monitoring Plan and Monitoring Reports need to be put into context, and some corrections made:</b></p> <p>The development and application of M&amp;E as management tool in development projects has evolved overtime and based on knowledge accumulated overtime the current projects have better designs than the previous ones. Uganda developed the first M&amp;E policy in 2011 and it was approved in 2013. Similarly, the OECD-DAC Evaluation standards were developed in 2010. Notwithstanding the weaknesses the consultant found in the document, the efforts of the partners to develop the M&amp;E Plan that early merits some recognition.</p> <ul style="list-style-type: none"> <li>As admitted by the consultant, the M&amp;E Plan which was part of the development of the Logframes for 2011-2015 refined the immediate objective for the support to the fisheries and WATSAN sector and added a timeframe of 2015.</li> <li>The plan added measurable indicators for support to administration sector (especially performance on minimum capacity requirement and performance quality attracting rewards (minimum conditions and performance measures).</li> <li>The plan emphasized the need for putting in place key structures and personnel – leading to a functional planning unit.</li> </ul> <p>The finding that the “M&amp;E plan was not at all followed” is not entirely correct; on the contrary the plan was implemented, to some extent:</p> <ul style="list-style-type: none"> <li>A functional District Planning Unit was established with 100% staffing (District Planner, Senior Economist, Statistician and Population Officer)– this was set as precondition for funding the second five phases of KDDP implementation</li> <li>District Technical Planning Committee Members and the entire district planning unit staff (total of 13 officials) were sponsored to undertake training in monitoring and evaluation at Uganda Management Institute (UMI).</li> <li>The District Planning Unit was equipped with basic equipment and tools e.g. computers</li> <li>The M&amp;E Unit based in the District Planning Unit headed by the Senior Economist coordinated reporting activities of KDDP involving collection, analysis and integration of sector reports into cumulative quarterly reports for the period 2011-2014 – culminating into the KDDP project completion report.</li> <li>Joint monitoring missions (ICEIDA, MoLG and KDLG) and multi-sector monitoring mission (District level sectors) were conducted to validate reports and get feedback from beneficiaries and mission reports were prepared by District Planning Unit.</li> </ul> <p>The finding that District Planning Unit did not produce reports needs to be corrected:</p> <ul style="list-style-type: none"> <li>It is important to note that the monitoring activities and reports were of three types- Routine monitoring covering financial and physical implementation (done by individual sector departments and secretaries– leading to sector activity reports and monthly reports; multi-sector monitoring missions conducted by a team comprised of members of District Technical Planning Committee and District Executive Committee members – coordinated by CAO through the District Planning Unit; and Joint monitoring mission by partners (ICEIDA, MoLG and KDLG)</li> <li>The District Planning Unit- M&amp;E Desk produced all the multi-sector monitoring reports and prepared all the KDDP progress reports for the period 2011-2015 culminating into the KDDP Completion Report (<b>Check carefully the authors for the progress reports and monitoring report provided</b>)</li> </ul>

No	Comment
	<ul style="list-style-type: none"> <li>It is true that a separate computerized database for KDDP was not established. All reports are backed by source paper records filed in the District Central Registry. The copies of paper files were further filed by ICEIDA in the Gopro database/filing system. Some sectors supported have operational databases at district level linked to the sector Ministries (education, health, water and sanitation and local government) but some are under upgrades, especially the LoGICS database under the Ministry of Local Government.</li> </ul> <p><b>3.5 Grants to CSOs and PSOs:</b> It is admitted there was a filing problem between the district and ICEIDA, but this was a successful intervention with verifiable impact. The organizations supported have sustained their operations up to now. See the initial reports on this folder; Example are including, among other, the following:</p> <ul style="list-style-type: none"> <li>Kalangala District Education Forum (KADEFO) – Is currently engaged to implement community sensitization under KIEP</li> <li>SHED has won a grant from USAID to sensitize parents and their role in promoting earl grade learning</li> <li>KAFOPHAN is an active network for people living with HIV/AIDS</li> </ul> <p>The initial reports are included here: More reports will be sent under a separate email cover.</p>  <p>Grants to CSOs.zip</p>
4	<p><b>CHAPTER 4: EFFICIENCE</b></p> <p><b>Two comments are made in respect to this chapter</b></p> <p>(a) Contribution by Government/Kalangala district was mainly in form of salaries. Treating contribution by Kalangala as a project management cost is misleading. (see details in tracked comments).</p>
5	<p><b>CHAPTER 5: IMPACT</b></p> <p>The general comments are made:</p> <p>(a) Operational definition of the project beneficiary villages and control villages needs to be elaborated (see details in the tracked comments)</p> <p>(b) Findings related to fisheries which show that contribution of the sector to household incomes and employment (which the consultant claims he could not understand why) should be analyzed considering the effect of the intervention by government, using the army, to control illegal fishing and regulate the fishing activities on Lake Victoria. At the time of the evaluation, fishing activities had been on standstill and this could account for the responses the household made.</p> <p>(c) Last but important: The evaluation should directly answer the key evaluation question (More reflected in conclusion)– <b><i>To what extent has the KDDP had an impact among the population in the project area (intended or not intended, positive or negative)?</i></b></p> <ul style="list-style-type: none"> <li>Clear comparison of the situation before and after KDDP intervention; and comparison of “beneficiary” and “non-beneficiary” villages for attribution (definition of villages matters).</li> <li>A summary table highlighting the comparisons of quantitative and qualitative data on measurable and perceive impacts should be included in the main report to make it a complete and stand-alone document and make the narrative clearer (As the consultant mentions the details in <b>Annex 9: Household Survey Analysis</b> can be a stand-alone document for reference by those that need more details).</li> </ul> <p>Triangulation of results: e.g. it may be necessary to make comparisons with indicators in the Population and Census Report (2014) on Kalangala District available on this site: <a href="https://www.ubos.org/wp-content/uploads/publications/03_2018NPHC_2014-Subcounty_Indicators_Report_-_Central_Region.pdf">https://www.ubos.org/wp-content/uploads/publications/03_2018NPHC_2014-Subcounty_Indicators_Report_-_Central_Region.pdf</a></p>

No	Comment
6	<b>SUSTAINABILITY</b> – No comment
7	<p data-bbox="272 237 774 264"><b>CONCLUSION AND RECOMMENDATIONS</b></p> <p data-bbox="272 271 1358 338">The recommendation on appropriate technology - simple technology option for water and sanitation solutions for communities, should recognize the policy context:</p> <ul data-bbox="272 344 1422 663" style="list-style-type: none"> <li data-bbox="272 344 1422 450">• The Uganda Vision 2040 aims to increase percentage of the population with access to safe piped water from 15% (2010) to 100% (2040) – <a href="http://npa.ug/wp-content/themes/npatheme/documents/vision2040.pdf">http://npa.ug/wp-content/themes/npatheme/documents/vision2040.pdf</a></li> <li data-bbox="272 456 1422 663">• To that effect, Government issued a circular to all districts (<b>Letter Ref. No. ADM/107/01, dated 14<sup>th</sup> March 2016- by Permanent Secretary of Ministry of Water and Environment to all Chief Administrative Officers</b>) which guided that with effect from the financial year 2016/2017 the priority for Water Development would be as follows -: <ul data-bbox="325 595 1126 663" style="list-style-type: none"> <li data-bbox="325 595 1126 629">▪ First, extension of National Water and Sewerage Water System</li> <li data-bbox="325 636 1126 663">▪ Second, Construction of solar Mini piped water systems</li> </ul> </li> </ul> <p data-bbox="272 669 1378 734">Construction of point water sources should be developed in areas where it is not possible to develop the first and 2<sup>nd</sup> option.</p>