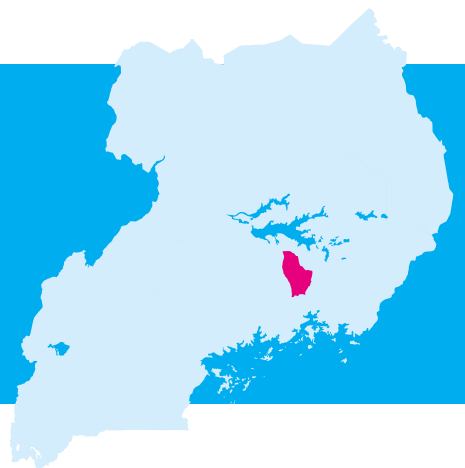


KAMULI

Family Planning Budget Analysis 2020/21



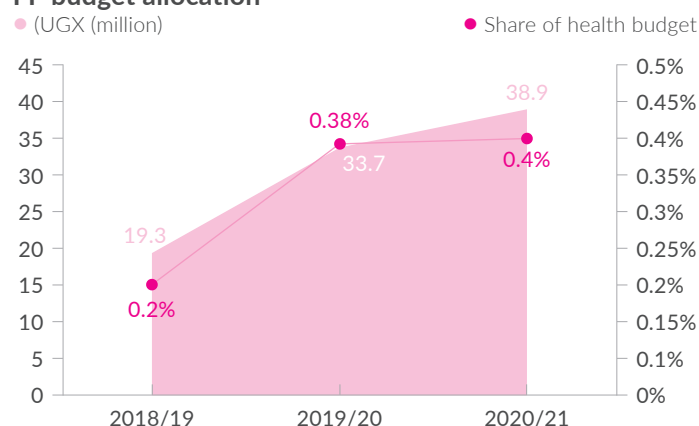
INTRODUCTION

Kamuli district is commended for allocating over 15 percent of the total budget to the health sector and for having sufficient stocks of contraceptives to meet the district needs. The overall district budget allocation was 20.6 percent for FY 2018/2019, 20.5 percent for FY 2019/2020 and 21.1 percent for the FY 2020/2021.

BUDGET FINDINGS

There was a continued trend of prioritisation of family planning and this was reflected in the increase of allocations from **UGX 19.3 Million** to **UGX 38.9 Million** between FY 2018/19 and FY 2020/21. This represents a 101.1 percent increase over the analysis period. Despite this significant increase, the district experiences limitations during budgeting processes and during the development of related ordinances and bi-laws. To manage these limitations, evidence based advocacy remains critical to Family planning advocacy.

FP budget allocation



SITUATION ANALYSIS

In the **FY2020/21** there was unbalance allocation of funds for FP in the district budget. Approximately 77.7 percent was allocated to service delivery, 17.3 percent to advocacy and community mobilization whereas 5.0 percent to cover other administrative costs. There was no allocations to FP commodities and capacity building for the health service providers.

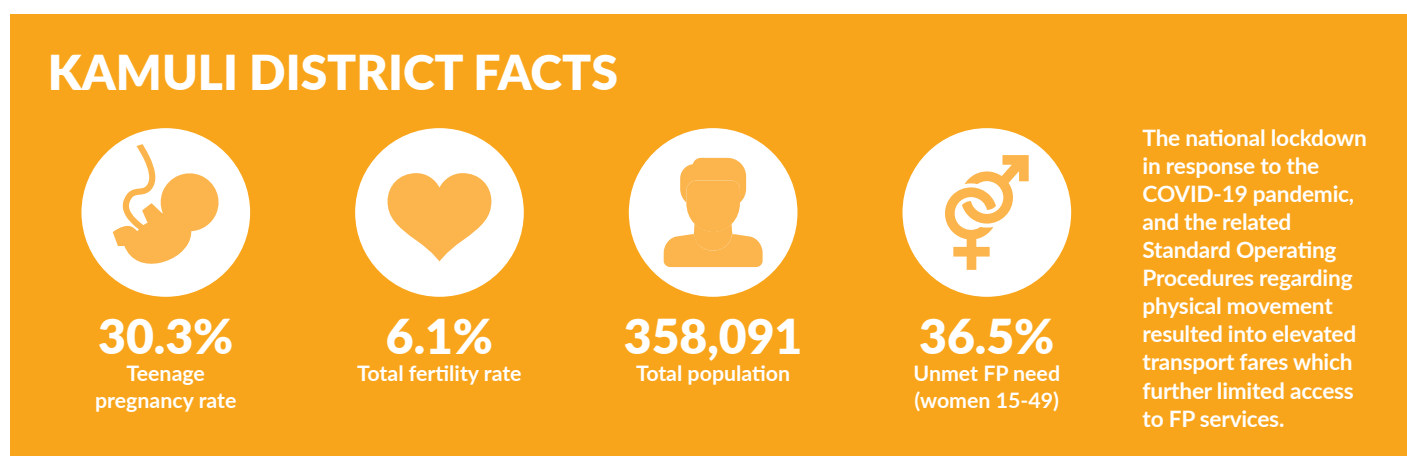
FP Component	2018/19		2019/20		2020/21	
	Amount (UGX m)	Share	Amount (UGX m)	Share	Amount (UGX m)	Share
Commodities	1.0	5.3	3.2	9.6	-	0.0
Advocacy & community mobilisation	8.7	45.2	14.7	43.6	6.7	17.3
Service delivery	1.3	6.8	14.2	42.1	30.2	77.7
Capacity Building	6.5	33.7	-	0.0	-	0.0
Others	1.7	9.1	1.6	4.7	1.9	5.0
Total	19.3	100	33.7	100	38.9	100

CHALLENGES OF UNMET NEED FOR FAMILY PLANNING

The following obstacles have overlooked the quality of family planning services in Kamuli

Challenges	Percentage
Inadequate skilled staff to offer some FP methods	50
Understaffing	40
Negative attitude towards FP	10
Stock outs of FP commodities	10
Inadequate funding for outreaches, radio talk shows & community dialogues	10
Inadequate structures at the facility to offer FP services	10
Low turn up of community for FP outreaches	10
Side effects associated with FP like bleeding, infertility in women	10

The health facility assessment, indicated that FP services were hampered by understaffed health facilities, perceptions by male partners on number of children per household and unfriendly youth friendly services.



Kamuli district should ensure that commodities are consistently available at the facility level and the budget reflects the needs in the District Family Planning Costed Implementation Plan.

Methodology

The study was conducted between October and December 2020 and the reviewed documents included the district annual health budgets, health sector budget and work plan, and 14 health facility budgets and work plans. The analysis focused on reproductive health budget lines for FP of FY 2018/19, FY 2019/20 and FY 2020/21. Four focus group discussions (male/female) were conducted at community level, and key informants were interviewed. The extracted FP budget data was analyzed using the A4HU/DSW FP Excel tool. The Kamuli district local government and other stakeholders validated the report.

Sources

- A4HU/DSW (2020) Family Planning in Uganda: Family Planning Budget and Expenditure Analysis FY 2019/2020 and 2020/2021
- UBOS. 2016a, The National Population and Housing Census 2014 – Main Report, Kampala, Uganda
- UBOS. 2016b, Uganda Demographic and Health Survey 2016, Kampala, Uganda

DSW/A4HU Country Office contacts

Action 4 Health Uganda, P.O Box 33900, Kampala, Uganda.
Phone: 256414200801/392002471, Fax: 256414200815
Website: www.a4hu.org

April 2021