

TORORO

Family Planning Budget Analysis 2020/21

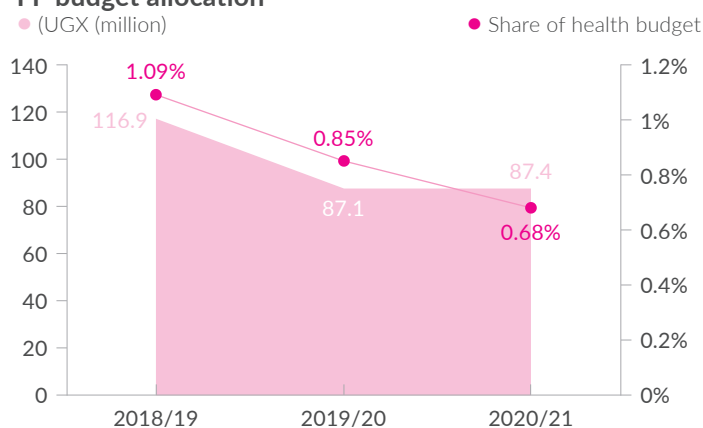
INTRODUCTION

Tororo district maintained its record of allocating more than 15 percent of its budget to health. The percentiles for FYs 2018/19, 2019/20 and 2020/21 were 19.5 percent, 15.8 percent, and 19.9 percent respectively. Its prioritization of FP is evidenced by the operationalisation of its 2020-2024 FP Costed Implementation Plan.

BUDGET FINDINGS

Although Tororo district has continuously increased its health budget, allocations towards FP programming have been less than 1 percent relative to the overall health sector budget in the last two years. Furthermore, there has been an insignificant increase in FP budget from locally raised revenue. In FY 2020/21, the budget increased by 0.34 percent. Worth noting is that the district has additional resources allocated to SRH/FP under Result Based Financing projects which were outside the scope of this analysis. Additionally, the district has developed a district FP costed implementation plan that will continue to guide implementation of FP.

FP budget allocation



SITUATION ANALYSIS

In FY 2020/21, 73.8 percent of the FP budget was allocated to service delivery, 9.9 percent to advocacy and community mobilisation, and 3.7 percent was allocated to others administrative service. There was no budget allocations to FP commodities and capacity building for advocacy.

FP Component	2018/19		2019/20		2020/21	
	Amount (UGX m)	Share	Amount (UGX m)	Share	Amount (UGX m)	Share
Commodities	2.8	2.4	-	0.0	-	0.0
Advocacy & community mobilisation	80.0	68.4	3.9	4.5	9.9	11.3
Service delivery	34.1	29.2	48.4	55.6	73.8	84.5
Capacity Building	-	0.0	31.0	35.6	-	0.0
Others	-	0.0	3.7	4.2	3.7	4.2
Total	116.9	100	87.1	100	87.4	100

CHALLENGES OF UNMET NEED FOR FAMILY PLANNING

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

Challenges	Percentage
Negative attitude towards FP (Myths)	45.5
Stock outs of FP commodities	27.3
Inadequate funding for outreaches, radio talk shows & community dialogues	27.3
Inadequate skilled staff for some FP methods	18.2
Lack of equipment like gloves, cancer screen, sterilizer	18.2
Side effects associated with FP like bleeding, infertility in women	18.2
Understaffing	9.1
Lack of transport by staff to conduct the outreaches	9.1
Inadequate structures at the facility for FP services	9.1
Low turn up of community for FP and outreaches	9.1

TORORO DISTRICT FACTS



29.5%
Teenage pregnancy rate



6.3%*
Total fertility rate



565,700
Total population



30.4%
Unmet FP need (women 15-49)

There was an increase in the number of unplanned pregnancies attributed to the Standard Operating Procedures related to restricted physical movements in the context of the COVID-19 pandemic.

*According to the 2014 National Population and Housing Census.



Tororo District should spearhead and fast track the finalization of ordinances and by-laws of Prohibition of Child Marriage and Improvement of Education standards Ordinance.

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 analysed using the A4HU/DSW FP Excel tool. The Tororo 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

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