

TITLE OF THE SUCCESS STORY: Institutional capacity, the 'Ray of Hope' for the vulnerable



FLEP/ABH during inception meeting to work with RAGGA Executive Committee at Nabikoote, Iganga district



construction

**RAGGA
Office
Block
under**



empowering students about patients rights and responsibilities

**RAGGA
staff**

1. What was the problem?

In 2012, the committed group of members conceived the vision to form RAGGA, Nabikoote village was engulfed with individual and institutional capacity challenges like disempowered citizenry, limited human resource for technical expertise in resource mobilization, meagre resource envelop and no logistical support. Despite all these hurdles, RAGGA was established to champion implementation of 4 core program areas namely health, orphans and other vulnerable children, orphans (OVC), youths and women. As a growing CBO, it was registered to inaugurate its operations with Iganga district local government and while staggering it managed to secure itself a plot of land in Nabikote village along Mugoya road, Namunkesu parish, Namungalwe sub county where its headquarters are now.

Worthwhile the struggle, opportunity struck the way of hope for community groups with reputable expertise to implement FLEP/ABH interventions. At the helm of the process was the CDO who proposed RAGGA alongside other groups. Having exhibited track record performance in implementing advocacy related activities, it was then that the community group was selected to work in partnership with Family Life Education Program (FLEP) to implement Advocacy for Better Health (ABH) Project.

What was the engagement?

A ray of hope indeed, to take part in spear heading the advocacy agenda in Namungalwe Sub County, doors opened wide for opportunity. RAGGA was engaged in undertaking NGO work alongside their staff. The mandate on the FLEP PATH/ABH project was and continues to: -

- ✓ Empower citizens in Iganga to demand improved quality services
- ✓ Advocate for issues of citizens'



RAGGA executive committee group photo



ABH Success Exhibited: Left is the Advocacy Champion and RAGGA staff member

concern in the health and social sectors

- ✓ Institutional capacity of community groups in Namungalwe strengthened.

On the institution capacity strengthening mandate, FLEP empowered RAGGA to mobilize communities for advocacy including resource mobilization, documenting minutes with action plans, mentorship, and confidence to hold duty bearers accountable. When the RFA for Global Fund/TASO UDHA came it was shared with RAGGA who swiftly took the initiative to apply and were selected for the competitive grant award process.

In October 2016, RAGGA was still selected after a series of assessments carried by TASO Uganda together with Uganda Development Health Associates (UDHA) to find reputable CBOs to implement health systems strengthening grant (HSS) under global fund.

After RAGGA staff attending the training/workshop held at Continental in Iganga from 10th - 18th April 2017, they were still asked to find placement in a reputable NGO for mentorship. RAGGA contacted FLEP management for placement and without hesitation permission was granted. "We will always testify about the FLEP PATH ABH placement for the knowledge and skills acquired including advocacy for rights, health system strengthening for FLEP targeted communities, quality improvement, documentation, policy, budget review and analysis" said the Executive Director Godfrey Kimera. This success is attributed to FLEP PATH ABH project.

1. Results/Progress



Eventually, as a result of FLEP's willingness to nurture, build the institutional capacity of CBOs such as RAGGA, success was registered when the Global fund grant was awarded, the commitment that FLEP gave RAGGA a recommendation letter and mentorship placement letter, this paved way for the organization to access the grant. Implementation of the fore mentioned project called scaling up

Adolescent sexual reproductive health (ASRH) funded by Global fund through TASO Uganda and UDHA is ongoing.

2. Find the 'hook' that makes people interested

"With our institutional capacity built by FLEP on the PATH/ABH project we got the grant, RAGGA has been able to improve on its implementation and contribution towards health sector in the community and in turn enabling our organization start its Journey to be a bigger NGO with time" reported Chris Muguwa Group Chairperson. This is an achievement basing on ABH result area three: Institutional capacity of CSOs strengthening.

Way forward

TITLE OF THE SUCCESS STORY	
PICTURE/ PHOTO/GRAPHIC	What was the problem?
	<p>Kaliro District has for the past years performed poorly in the area of nutrition. According to LQAS (2014) conducted by STAR-EC, the district had declined greatly on the breastfeeding indicator from 40% to 17%. This is largely due to the fact that nutrition interventions have not been given the attention that they deserve. Also, the district did not have a District Nutrition Coordination Committee (DNCC) to push for the integration of nutrition activities in the district work plan and budget.</p>
<p><i>A meeting with the Kaliro key decision makers to seek their support for revival of DNCCs</i></p>	What was the engagement?
	<p>The goal of the advocacy initiative was to seek support of district decision makers to support revival of DNCCs. Some of the activities that were undertaken included:</p> <ul style="list-style-type: none"> - 03 meetings with decision makers, change agents and influencers - Packaging of evidence in the form of fact sheets and sharing them with the district duty bearers. - Providing the district with 10 copies of the Uganda Nutrition Action Plan (UNAP) were given to the district by FLEP as terms of reference for the formation of the DNCC.
<p><i>FLEP conducted another meeting to seek support for revival of DNCCs. While in this meeting, the CAO made the announcement that the DNCC had been formed with a multi sectoral composition. Members had been appointed and they were yet to receive their appointment letters together with TORs.</i></p>	<p>The main asks from the duty bearers was the revival of the DNCC and the particular duty bearers engaged included the</p> <ul style="list-style-type: none"> - District Health Officer (DHO), - Chief Administrative Officer, - District Chairperson, - District Production Officer - District Nutrition Focal Person - Senior Probation and Welfare Officer - District Community Development Officer - District Health Educator
Results/Progress	

- As a result of FLEP's engagement, the district duty bearers specifically the CAO responded by constituting the DNCC for Kaliro District. Appointment letters to the members were written on 29th June 2017 and the district (CAO's office) has written to the Sub County Local governments instructing them to form the Sub County Nutrition Committees.
- Plans are also underway to have members of the DNCC oriented on their roles and responsibilities.
- The committee will develop an action plan detailing their activities across different sectors.
- FLEP's and in particular ABH project's visibility especially among the district key decision makers has greatly improved with this engagement.
- The most critical issue at the moment is ensuring functionality of the committee that was formed.

Way forward

The advocacy initiative achieved its result of revival of the DNCC. The next advocacy efforts will focus on ensuring functionality of the DNCC and integration of nutrition interventions in the district work plan and budget.