

**RURAL ACTION COMMUNITY BASED
ORGANIZATION (RACOB AO)**

STRATEGIC PLAN

2013 - 2017

**TOWARDS A RIGHTS BASED, INTEGRATED
AND SUSTAINABLE COMMUNITY
DEVELOPMENT.**

Table of Contents

Abbreviations	3
Executive Summary	4
Chapter One.....	6
1.1 Introduction.....	6
1.2 Background to the Strategic Plan (2012 – 2016)	7
Chapter Two	10
2.1 Geographical Area	10
2.2 Political Context	10
2.3 Legislative and Legal Framework on Human Rights.....	10
2.4 Poverty Trends	13
2.5 Food Insecurity.....	13
2.6 HIV AND THE HEALTH SECTOR IN UGANDA	14
HIV and AIDS.....	Error! Bookmark not defined.
2.7 The National Development Plan	16
2.8 Donor Trends.....	16
2.9 PESTEL Analysis	17
2.10 SWOT Analysis.....	18
Chapter Three	20
STRATEGIC OBJECTIVES, KEY RESULT AREAS AND KEY INTERVENTIONS	20
Chapter Four	25
4.1 Finance Resources.....	25
4.2 Documentation of Lessons Learnt	25
4.3 Capacity to Implement Human Rights, Governance and Service Accountability Initiatives	25
4.4 Human Resources.....	26
4.5 Geographical Coverage	26
4.6 Networking, Collaboration and Partnering.....	30
Chapter Five	31
ACTION PLAN.....	33
APPENDICES	37
1. RACOBABO Organizational Chart.....	37
2. District Profiles.....	Error! Bookmark not defined.

Abbreviations

AGHA	Action Group for Health and AIDS
ARV	Anti Retroviral Drugs
CAT	The Convention against Torture and Other Cruel, Inhuman or Degrading Treatment or Punishment
CBO	Community Based Organisations
CDRN	Community Development Resource Network
CIPA	Community Initiative for Prevention Against AIDS
CRC	UN Convention on the Rights of Children
CUAHA	Churches United Against HIV and AIDS
DCA	DanChurchAid
DENIVA	Development Network for Indigenous Voluntary Associations
GBV	Gender Based Violence Network
ICCPR	International Covenant on Civil and Political Rights
ICESCR	The International Covenant on Economic, Social Cultural rights
JAF	Joint Assessment Strategy
LCCs	Local Council Courts
LWF	Lutheran World Vision
MARPs	Most At Risk Populations
NDP	National Development Plan
NGO	Non Government Organization
NPOs	Non-Profit Organisations
OVC	Orphans and Other Vulnerable Children
PEAP	Poverty Eradication Action Plan
PESTEL	Political, Economic, Social Technological, Economic and Legal Analysis
PLHIV	Persons Living with HIV/AIDS
PRA	Participatory Rural Appraisal
PWD	Persons with Disabilities
RACA	Rakai Aids Counselors Association
RACOBAP	Rakai AIDS Community Based Project
RACOBEO	Rural Action Community Based Organization
RANASO	Rakai Network for AIDS Service Organizations
SWOT	Strength, Weakness, Opportunity and Threats Analysis
HPI	Human Poverty Index
HURINET	Human Rights Network Uganda
UDHR	Universal Declaration of Human Rights
UDN	Uganda Debt Network
UJAS	Uganda Joint Assistance Strategy

Executive Summary

Rural Action Community Based Organization's (RACOB AO) 5 year strategic plan charts out the course for the RACOB AO to address organizational and operational issues in a more strategic way. It demonstrates RACOB AO commitment to provide quality, effective and efficient service to its beneficiaries and stakeholders. During the next 5 years, this document will serve as a reference point to gauge RACOB AO's progress towards attainment of its mission, goal and strategic objectives.

RACOB AO is at a very important point of transition in its life as an organization. Specifically strategic decisions that have been taken will especially have implications on both its program scope and area of geographical coverage. Since its inception RACOB AO has been working with over 5,000 PLHIV, RACOB AO's main focus has been on the direct delivery of comprehensive prevention and treatment services for PLHIV. While there is no doubt that its HIV/AIDS program has greatly contributed to the fall of prevalence rates in the district as evidenced by organizational and district reports, there has been a realization that direct service delivery alone is not enough to create the desired impact. This perhaps explains reversals in gains against HIV that had been reported over the last decade. Given this background, This Strategic Plan realizes that active citizen participation especially by marginalized groups of persons is an important ingredient in the fight against poverty and related problems like HIV/AIDS.

The specific objectives of the strategic plan include:

- To set a road map for RACOB AOs future course of action
- To enable RACOB AO respond to the factors in the operating environmental that affect its service delivery.
- To facilitate the promotion of gender equality, community empowerment and participation, community-led advocacy and engagement with government through a Rights Based Approach.
- To enable the organization leverage its resources for effective, efficient and sustainable service delivery

The strategic plan comprises of a brief introduction highlighting the strategic planning process, background to RACOB AO highlighting its vision, mission statement, core values, organizational goal, objectives, and key activities and achievements, contextual/situational analysis including SWOT analysis, PESTEL, strategic direction, strategic objectives, result areas, action plan and activity schedule (Gantt chart), the budget and implementation, monitoring and evaluation plan.

The Strategic Plan identified key priority areas that provided for the formulation of strategic objectives and key result areas for the next 5 years. The following is a synopsis of the strategic objectives and result areas:

Strategic Objective: 1 <i>Vulnerable persons are empowered to demand for the recognition, respect, promotion and fulfillment of their rights</i>

Strategic Objective: 2 <i>Improve access to justice for the most Vulnerable people in the Targeted Districts</i>

Strategic Objective: 3 <i>Improve Access to Quality Prevention, Treatment and Care Services for</i>
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PLHIV and most at Risk Populations

Chapter One

INTRODUCTION AND ORGANIZATIONAL BACKGROUND

1.1 Introduction

Rural Action Community Based Organization (RACOB AO) is a local NGO that was founded in 2008. RACOB AO then known as Rakai Community Based Organization was birthed out of Lutheran World Federation (LWF) initiative to localize its programs in Rakai and Lyantonde districts. Prior to this, LWF had since 1995 been implementing the Rakai Community Based AIDS Project (RACOB AP) whose major goal was to: *reduce the incidence of HIV/AIDS transmission and mitigate the social economic impact of AIDS*. This process of transiting RACOB AP into a local NGO (RACOB AO) was started in 2006 after two external evaluations recommended that LWF to come up with an exit plan. With consultations from the local leadership including other key partners like Church of Uganda and the donors, this transition process was supported by DanChurchAid (DCA) for two years to ensure RACOB AO is a fully fledged local NGO. This transition process was technically facilitated by Community Development Resource Network (CDRN).

At the end of the process, RACOB AO come up with a five year Strategic Plan (2008 – 2012) whose vision was *a Ugandan community where people are free from HIV/AIDS and are living improved quality of life* with the mission as *RACOB AP exists to empower communities affected by HIV/AIDS and those at risk to respond to the causes and consequences of the scourge*.

In the development of this new Strategic Plan, the vision and mission have been reviewed with a goal added to strategic framework as shown below:

Vision:

A Uganda where all people are living a dignified life and are actively participating in the development of their communities

Goal:

Contribute to the full realization of Rights of the most vulnerable people.

Mission:

RACOB AO is a local NGO that is committed to the full realisation of Health Rights and entitlements of vulnerable persons in the Districts of Masaka, Rakai, Lyantonde, Bukomansimbi, Kalungu Lwengo, Sembabule and Kalangala. We do this through empowering communities to promote the demand-side of accountability and delivery of accessible, quantity and quality public services and building capacity of relevant duty bearers to appreciate and fulfill citizens' rights of, especially, the most vulnerable men, women, boys and girls.

RACOB AO's **Core Values** are:

- **Transparency**

We will strive to implement the principle of transparency in all that we do; we shall do this by being open to rights holders, stakeholders and partners. We believe that transparency will facilitate building of mutual trust among stakeholders and partners as well as enhance cooperation.

- ***Accountability***

We are responsible for the decisions we make and the actions we take. We will be accountable to our constituents and donors by conforming to internationally acceptable financial management systems and giving them opportunity to evaluate our performance. Accountability will ensure a strong reputation of our organization.

- ***Justice***

We will endeavor to be fair to all our constituents irrespective of religion, tribe, gender or political affiliation. The principle of justice and promotion of human dignity will permeate all our operations.

- ***Participation***

We will strive to involve rights holders and other stakeholders in planning, implementation, monitoring and evaluation of our interventions by promoting participation we will make our intervention more meaningful to those being served

- ***Quality***

We believe in quality service provision. Quality assurance will be at the forefront of our interventions and will be reinforced, among others, through authentication of manuals and content, vetting participants' delivery after training, ensuring that contractors use right materials, mixture, etc and ensuring quality of the products we design

- ***Professionalism***

We will ensure observance of professionalism in service delivery. We shall do this by targeting skilled staff for the implementation of our interventions as well as adherence to acceptable professional values and ethics. Professionalism will promote good quality for our interventions.

RACOBABO is a fully registered Local NGO and was granted this status the by NGO Board under the Ministry of Internal Affairs to work anywhere in Uganda. This was after the NGO Board had verified that RACOBABO has capacity to scale up its activities to work nationally. Under this new Strategic Plan, RACOBABO plans to implement activities in the districts of Masaka, Rakai, Lyantonde, Bukomansimbi, Kalungu, Lwengo, Sembabule and Kalangala.

The organization is currently member to several national and regional networks for example the Human Rights Network Uganda (HURINET), Action Group for Health and AIDS (AGHA), Churches United Against HIV and AIDS (CUAHA), Gender Based Violence Network (GBV) and Rakai Network for AIDS Service Organizations (RANASO), DENIVA, National NGO Forum. These networks will be a great opportunity for RACOBABO to enhance its advocacy Agenda both at local and national level.

1.2 Background to the Strategic Plan (2012 - 2016)

RACOBABO is at a very important point of transition in its life as an organization. Specifically strategic decisions that have been taken will especially have implications on both its program scope and area of geographical coverage. Since its inception and working with over 5,000 PLHIV, RACOBABO's main focus has been on the direct delivery of comprehensive prevention and treatment services for PLHIV. While there is no doubt that its HIV/AIDS program has greatly contributed to the fall of prevalence rates in the district as evidenced by organizational and district reports, there has been a realization that direct service delivery alone is not enough to initiate, hasten and create a sustainable desired impact. This partly perhaps explains reversals in gains against HIV that had been reported over the last decade. There is growing realization that active citizen participation especially by marginalized groups of persons is an important ingredient in the fight against poverty and HIV related problems. Active citizen participation also enhances civic awareness, action and

active involvement in governance processes and human rights protection, and demand for accountability.

In the last two decades, countries like Uganda have made strides in enhancing democracy and political participation. Nonetheless, this democratic reform, decentralization and other measures are having a limited impact in drawing the poor out of absolute poverty; many marginalized groups including the most affected populations remain excluded from political and economic development processes. They cannot even demand for their rights because they do not know or if they know have no capacity to demand what belongs to them. Like at national level and district level, much of the decision making is still confined to a handful of state administrators and a small section of rural political elite. This situation is not helped by the high levels of corruption and abuse of public resources that has been often reported in the media. Uganda has a strong anti-corruption framework that includes, the Penal Code Act, the Prevention of Corruption Act, IGG Act 2002, Public Finance and Accountability Act 2003, Leadership Act 2002, Public Prosecution and Disposal of Public Assets Act 2003. Besides, the roll-out of democratic dispensation to local communities in Uganda is mainly through the Decentralization policy framework, implemented since 1992. It is imperative to note that communities are part of the aspirations of the framework for meaningful people-centred participation to take root and for citizens to determine their development priorities and agenda, monitoring the implementation of this agenda as well as ensuring that there is accountability thereof. It is due to this new thinking that RACOBAAO is committing to rights based programming. This will interalia build a credible and sustainable State-citizens engagement for effective delivery of public services in the respective communities, particular in the RACOBAAO areas of operation.

In 2006 the President of Uganda announced a policy for zero tolerance for corruption. Nonetheless, most governance indicators show that corruption is wide spread and endemic at all levels of society. Global Integrity report 2006 for Uganda estimates that more than half of the government's annual budget i.e. US 950m is lost to corruption each year. This definitely affects even the delivery of essential social services for the poor, e.g. it was reported that 2million USD for Global Alliance for Vaccine and Immunization in 2005 was misappropriated. The 2008 Corruption Perception Index (CPI) rates Uganda at 126th place with the score of 2.6 in 2008. Despite silent improvements, the CPI continued to perceive corruption as rampant and systemic in Uganda. Similarly the continued splitting and creation of new districts has led to reduced capacity for delivery of quality social services largely because these new administrative units are resource constrained and are still struggling to put in place adequate service delivery infrastructure.

To strengthen and improve social service delivery including the provision of comprehensive HIV prevention and treatment services, RACOBAAO using a Human Rights Based Approach will in this new strategic phase expand the scope of its interventions to include empowering users of public health and other essential services to demand for the fulfillment of their rights and delivery of quality services by the duty bearers. Drawing from the experience of partners like DanChurchAid, Uganda Debt Network and others the organization has worked with previously, RACOBAAO has premised this new strategy on the belief that the active participation of marginalized groups in decisions and events that affect their lives will play a crucial role in improving service delivery and accountable governance. This will necessitate dealing with improved access to information by communities, reduced discrimination, particularly gender discrimination, enhancing the political participation of marginalized groups and their access to formal and informal judicial systems; and advocacy for legal, policy and budget reforms based on interests of discriminated women, men and other excluded groups (DCA, Political Space Programme Policy 2007). RACOBAAO therefore decided to change strategy by embracing the rights based approach to empower communities to demand

for services and make Government authorities (leaders and institutions) at local and national levels more accountable and responsive to community needs and aspirations on whose behalf Government is meant to implement. This was thought to be more empowering in building active citizenry, encouraging sustainability of initiatives and local ownership. Since RACOBABO's operations are directly limited to the said districts, it will seek or keep critical networks and alliances with national level CSOs, in order for relevant local issues to input into national platform and advocacy avenues. These CSOs include UDN, UNASO, UJCC, DCA (INGO), law Society/Legal Aid Project, FIDA and other partners.

The on-going creation of new districts has affected NGOs like RACOBABO that were operating in one district to either find themselves in new districts or with their target communities located in new administrative units – RACOBABO was originally in Rakai district but now located in Lyantonde. For this reason, RACOBABO had to strategically reposition itself by rebranding with a new name, **Rural Action Community Based Organization** from formerly being known as Rakai AIDS Community Based Organization. To maintain visibility with its partners especially the communities served, the organization maintained its acronym of RACOBABO. The name change followed a legal due process. In addition to name change, the organization has had to expand its geographical scope to cover 8 districts (formerly the greater Masaka) that almost share similar social and economic characteristics. This will also augur well with the broadening of the program scope since interventions like advocacy, research and policy engagement will create more impact when dealing with a wider civil leadership (region) than in one district.

This Strategic Plan has been developed through a participatory approach involving duty bearers and rights holders. The development of this strategic plan followed the recommendations of the previous midterm review of the old plan which recommended that RACOBABO should now focus more on building capacity of communities to demand for their rights and making Local Governments accountable for the delivery of quality services thereby achieving RACOBABO's vision and mission. Similarly RACOBABO undertook annual participatory monitoring exercises and gave rights holders and duty bearers the opportunity to evaluate its earlier strategic interventions and determine future community priorities. Using the Participatory Rural Appraisal (PRA) techniques, these priorities were ranked and the most outstanding challenges were selected. Other processes included desk reviews of organizational documents, consultative meetings with staff and board and conducting of the PESTEL and SWOT analysis. The identified gaps provided for the background of the strategic interventions of this Strategic Plan.

Chapter Two

CONTEXT SITUATIONAL ANALYSIS

2.1 Geographical Area

RACOBAAO has been operating in two districts of Rakai and Lyantonde under the old Strategic Plan. Under this new Strategic Plan (2012 – 2016), RACOBAAO will expand into 6 additional districts to cover 8 districts of South Central (the old greater Masaka) namely; Masaka, Rakai, Lyantonde, Bukomansimbi, Kalungu, Lwengo, Sembabule and Kalangala. *Please see Annex for District Profiles.*

2.2 Political Context

Uganda has been pursuing a decentralization policy in which the central government has transferred powers, functions and responsibilities to Local Governments and lower administrative units. Under the decentralization framework, Local Government Councils are corporate bodies with legislative and executive powers. They are mandated to plan, budget and implement development programmes using both locally generated resources and central government grants. For example, schedule II of the 1997 Local Government Act accords Local Governments powers over production, primary education and community access road sectors. Likewise, the Decentralization policy provides for citizen participation as a human right. Therefore, Local governments are mandated to allow all citizens participate in election of leaders through elections at all levels as well as participate in planning and implementation of community interventions.

The Decentralization framework further provides a great opportunity for RACOBAAO to engage local governments in advocating and promoting democratic governance, accountability and improved service delivery. With new districts facing challenges of resource allocation and human resource capacity, RACOBAAO's interventions will be timely in ensuring that the duty bearers fulfill their obligations to the people they lead.

2.3 Legislative and Legal Framework on Human Rights

Uganda has enacted laws and policies for protection and promotion of human rights. It is also a signatory to a number of international human rights conventions and instruments that are intended to ensure observance of human rights for individuals, groups and communities. Some of the international ones that Uganda has signed and ratified include:

- **The Universal Declaration of Human Rights (UDHR)** – This was adopted in 1948 defining the various rights human beings should enjoy and necessitating all signatory member States (Uganda inclusive) to protect these rights. For example, article 2 of the UDHR provides that everyone is entitled to all the rights and freedoms set forth in the Declaration, without distinction of any kind, such as race, colour, sex, language, religion, political or other opinion, national or social origin, property, birth or other status and article 5 prohibits subjecting any one to torture or to cruel, inhuman or degrading treatment or punishment. There is need for concerted efforts of all human rights defenders in Uganda today to achieve the aim of the UDHR.

- **The Covenant on Civil and Political Rights (ICCPR)** - The ICCPR is one of the international human rights instruments that have a force of law and binds all nations that signed and ratified it. The ICCPR provides for a right to self determination and the right of individuals to

freely determine their political affiliation. The state party has a duty to protect the rights of individuals within their jurisdiction. The state has a duty to ensure that competent authorities and bodies are in place to protect the rights of individuals. The ICCPR provides, among others, for the right to life which shall be protected by law, freedom from torture, cruel and inhuman treatment, freedom from forced labour and slavery, liberty and security of person which includes protection from arbitrary arrest, trial within reasonable time for persons arrested and release on bond or bail for suspected criminals.

- **The International Covenant on Economic, Social Cultural rights (ICESCR)** - The ICESCR is an international convention that provides for economic social cultural rights as opposed to civil political rights. The ICESCR provides for a number of rights such as; right to life, health, clean and healthy environment, right to adequate food, right to work, and conducive working condition. Article 11(2) of the ICESCR recognizes the need for more immediate and urgent steps to ensure the *fundamental right to freedom from hunger and malnutrition*. The right to work for human rights defenders is one of the most violated and most threatened rights even here in Uganda and therefore interventions such as those of RACOBAAO are needed to remind rights holders and duty bearers (moral and legal) of their roles.
- **The Convention against Torture and Other Cruel, Inhuman or Degrading Treatment or Punishment (CAT)** - The United Nations CAT is an international human rights instrument that aims to prevent torture around the world. The Convention requires states to take effective measures to prevent torture within their borders, and forbids states to return people to their home country if there is reason to believe they will be tortured. Incidences of torture especially by security agencies in Uganda have become common despite the condemnation by human rights defender groups.
- **The Convention on the Rights of the Child (CRC)** - The CRC guarantees every child the right to the enjoyment of the highest attainable standard of health and it facilities for the treatment of illness and rehabilitation of health. The provision requires states to diminish infant and child mortality, and to ensure that no child is deprived of access to health care. In Uganda where a great percentage of children are considered vulnerable and their rights violated, human right defenders have to educate or create awareness about the rights of children.
- **UN Declaration on Human Rights Defenders** - The declaration is intended to protect human rights defenders using the existing international legal regime. Article 1 of the UN Declaration on Human Rights Defenders provides that everyone has the right, individually and in association with others, to promote and to strive for the protection and realization of human rights and fundamental freedoms at the national and international levels. The provisions in this declaration enable human rights defenders to freely discuss and focus on the development of new ideas and principles in human rights. This is the focus of RACOBAAO where it intends to engage both duty bearers and rights holders in upholding human rights.

Some of the **national laws and policies** include:

- **The Constitution of Uganda 1995** - Chapter 4 of the constitution is devoted to “protection and promotion of fundamental and other human rights and freedoms.” These include: Equality and freedom from discrimination (**Article 21**); right to life (**Article 22**); protection of personal liberty (**Article 23**); protection of freedom of conscience, expression, movement, religion, assembly and association (**Article 29**); right to education (**Article 30**); rights of women to full and equal dignity with men (**Article 33**); rights to persons with disability (**Article 35**); rights of minorities (**Article 36**); and right to participate in the affairs of government (**Article 38**). There are also provisions in

the **National Objectives and Directive Principles of State Policy** that promote and protect human rights even though they do not expressly place the state under a legal obligation to guarantee those rights. These provisions include: **Article II** provides that: (i) The State shall be based on democratic principles which empower and encourage the active participation of all citizens at all levels in their own governance; (iii) The state shall be guided by the principle of decentralization and devolution of government functions and powers to the people at appropriate levels where they can best manage and direct their own affairs; (vi) Civic Organizations shall retain their autonomy in pursuit of their declared objectives. **Article X** provides that “The State shall take all the necessary steps to involve the people in the formulation and implementation of development plans and programmes which affect them”. **Article XXVI** provides that: All public offices shall be held in trust for the people; All persons placed in positions of leadership and responsibility shall, in their work, be answerable to the people. Many Ugandans are not aware of their Constitution and hence do not know what it entails. This is the first step that has made many Ugandan vulnerable to human rights abuse. **Human Rights Enforcement Mechanisms in Uganda** – This is an independent constitutional body that was established under article 51(1) of the Constitution of the Republic of Uganda by the Uganda Human Rights Commission Act No. 4 of 1997. The Uganda Human Rights Commission aims to sensitize the public on human rights. It is also responsible for investigating human rights violations. The commission has powers of court to summon witnesses and receive evidence regarding human rights violations. However the need is high and therefore Civil Society Organizations need to compliment their efforts.

- **The Office of the Inspector of Government** - The IGG was established under article 223 of the Constitution of the Republic of Uganda and is charged with the responsibility of protecting and promoting human rights, eliminating corruption and abuse of office as well as ensuring the observance of the rule of law and justice to ensure good governance and economic development. Since its inception, the IGG has acted as an important avenue where anyone who is aggrieved by any public person or authority go for redress. Rights bearers need to know the functions of such as an office so that they can act as whistle blowers in their respective communities hence ensuring good governance.

- **The Courts of Judicature** - The judiciary is established under article 126 of the Constitution. The judiciary is made up of courts of judicature. Courts are central means of dispute resolution and the constitution provides that any person who claims that their fundamental or freedom guaranteed under the constitution has been infringed or threatened is entitled to apply to a competent court for redress and this may include compensation. In Uganda, the courts of judicature include; the Supreme Court, the Court of Appeal of Uganda, the High Court and Magistrates Court. However courts in Uganda have been seen as being inaccessible and for the privileged few. This has left many people especially the vulnerable failing to seek legal redress.

- **The Tribunals** - The laws of Uganda provides for a number of specialized tribunals for resolving particular types of disputes. These tribunals include: Village and Sub-county Land Tribunals established under the Land Act 1998; the Tax Appeal Tribunal which hears complaints from tax payers; the Tribunal of the Uganda Communication Commission which handles complaints from the telecommunication sector; the Electricity Tribunal under the Electricity Regulatory Authority that handles complaints from that sector and the Industrial Court which handles labour disputes between trade unions and employees. These tribunals are all aimed at ensuring that all consumers and right bearers meaningfully participate in decision making and contribute to development in their communities.

- **Local Council Courts (LCCs)** - The LCCs are established under the Local Council Act of 2006. The LC consisted of members of the Executive Committees of village and Sub-county Councils. However, under the current law, members of the courts are drawn from non-elected members of

the community to ensure separation of roles between those who make laws and those who sit in a judgement. The new act also emphasizes women representation in LCCs. Local Council Courts have powers to resolve land disputes, family disputes and community-related complaints that are not criminal in nature. These courts in most parts of the country are non functional and even their roles are unknown. The need to establish, strengthen and empower the LCCs is evident in our communities and RACOBAA will have to do this to enable vulnerable communities have access to justice.

- **The NGO Registration Act** - The Act became operational on August 4, 2007. It provides for the National Board of Non-governmental Organizations to monitor NGO operations and develop policy guidelines for CBOs. Additionally, NGOs are now required to obtain a periodic permit to operate. The Amendment Act also expanded the powers of the Ministry to regulate the dissolution of NGOs. RACOBAA being a registered NGO complies with the Registration Act Regulations evidenced by the renewal of its NGO certification status.

2.4 Poverty Trends

Uganda government launched a minimum economic recovery programme in 1987, and has since developed and sustained a microeconomic framework that has positively transformed the country's economy. Factors that have contributed to the country's economic growth include: control of inflation, maintenance of a competitive exchange rates, liberalisation and privatisation policies.

The government has put in place deliberate strategies to eradicate poverty through the National Development Plan 2010. The revised 2004 PEAP restates the country's ambitions of eradicating mass poverty and of becoming a middle income country in the next 20 years. It argues for a shift of policy focus from recovery to sustainable growth and structural transformation. The PEAP presents specific policies and measures to achieve its objectives, grouped under five pillars. However, in spite of the above strategies a significant number of people, particularly in rural areas remain below the poverty. It is estimated that 42% of the Ugandan population live below the poverty line (Uganda Human Development Report 2007). In addition, the country has experienced an increase in the Gini coefficient which tracks trends in inequality over the years with 2009/2010 standing at 0.426. High inflation, rising costs of fuel and food prices are some of the key drivers to the above trend.

2.5 Food Insecurity

Up to 80% of the population in Uganda is directly engaged in rain-fed, subsistence agriculture, with only a small portion of the population depending almost entirely on livestock production systems / pastoralism alone (World Bank 2011). Therefore, a decline in production performance in this sector has significant impact on their poverty levels. Agricultural productivity among farmers in rural areas is affected, among others by low price levels, limited access to appropriate technologies, limited value addition, inadequate access to markets, inadequate finance and credit facilities, poor infrastructure and gender inequalities.

The right to food has been recognized as one of the important human rights issues and there are a number of international conventions, treaties and declaration that Uganda has ratified in this regard. These include: Article 25(1) of the Universal Declaration of Human Rights and Article 11(1) of the International Covenant on Economic, Social and Cultural Rights (ICESCR) that provide for the right of everyone to an adequate standard of living including adequate food, Hyogo Framework for Action, and the Millennium Development Goals (MDGs) particularly Goal 1 "Eliminate extreme poverty and hunger" where Target No.1 is to "Reduce by half the proportion of people who suffer from hunger" by 2015. In addition the World Food Summit in 1996 adopted the declaration for the

drafting of a Code of Conduct on the human right to adequate food and this declaration was supported by 800 NGOs.

Other relevant Ugandan government policies and programmes related to access to food as a human right include: the Uganda Food and Nutrition Policy (2003) whose guiding principles include - adequate food is a human right; food is treated as a national strategic resource; the cross-cutting nature of issues of food and nutrition as they affect men, women and children; strategies for responding to food and nutrition concerns at all levels and; the needs of all vulnerable groups being integral to all components of the policy¹; The National Disaster Risk Reduction and Management Policy; Plan for the Modernization of Agriculture (PMA); the National Development Programme where under health and nutrition sector, objective 3 is to “Improve nutrition of Uganda population.” This entire policy framework is proof of the government’s commitment to fulfill its Constitutional obligation of ensuring food and nutrition security for all Ugandans.

Despite this supportive environment in terms of policies, in the districts under focus, households survive on less than \$3 per week though these districts were once a food basket for Uganda. Agriculture which contributes 70% of the household incomes has been severely affected by the AIDS pandemic. The pandemic has reduced the domestic workforce because those who would work are either sick or have died as a result of AIDS. Household members have neglected productive work to care for the sick which has in turn lowered agricultural production and household incomes, threatened food security and increased household poverty.

The implications of the above analysis is that RACOBABO needs to maintain a poverty focus in targeting both thematically and geographically if it is to remain relevant to its clients and beneficiaries. Programme interventions should augur well with the NDP since it’s the national manifesto for development.

2.6 HIV AND THE HEALTH SECTOR IN UGANDA

The Health sector and provision of the health services and delivery system are conceived within the frameworks for poverty reduction and improved citizens' welfare and standards. Prominent in the frameworks was the PEAP (Poverty Eradication Action Plan) and currently the National Development Plan (NDP). The institution directly responsible for the health sector in Uganda is the Ministry of Health (MoH) and the HSSP III provides an overall framework for the sector. Government of Uganda has also developed the second (NHP II) to operate for a period of ten years 2010/11-2019/20. To operationalise the NHP, a Health Sector Strategic Plan (HSSP) has been developed. RACOBABO’s operational framework and interventions under HIV/AIDS will be conceived and implemented under this framework. To achieve this, RACOBABO will create necessary horizontal linkages in the 8 districts of operation and vertical linkages with the districts, regional and national level players. This will also aid RACOBABO and other players to demand accountability in Government delivery of the health frameworks at the various levels of implementation including the communities where the intended beneficiaries actually reside.

The first AIDS cases were identified in Rakai district in 1981 at Kasensero landing site according to Rakai Health Sciences research report of 2004. Rakai district being the epicentre of the pandemic has been severely affected. The prevalence rate in Rakai is 12% far much higher than the national

¹ Government of Uganda: The Uganda Food and Nutrition Policy, 2003

prevalence rate that is at 6.4%². AIDS has led to a distortion in the demographic composition and structure of the community leading to child headed, women headed and elderly headed households. These households face unprecedented economic and social hardships. There is reduced concentration on agricultural production activities³, loss of economically active household members, increased dependency ratio, reduced labor capacity for agro related activities and hence causing food deficiencies at household and community levels.

Furthermore, AIDS infected and affected individuals and families divert financial and human resources to HIV and AIDS and related illnesses instead of investing in agricultural inputs and improved farming technologies. HIV and AIDS has particularly a great impact on women as they must spend most of their time on care of those infected and affected thus leaving them with less labour time for increased agricultural and food productivity. Besides, increased morbidity and mortality of the most productive work force in the crop and livestock agricultural sub-sectors leads to loss of farming knowledge and skills and slow adoption of technologies.

The intricate relationship between HIV/AIDS and Orphan hood needs careful attention, especially given the fact that decline in infection rates have not been consistent over the past years. For example it is predicted in the National Development Plan that GDP will fall from a projected 6.5% per year in situations “without AIDS” to 5.3 % under the “With AIDS and without ART” situation. HIV/AIDS raises the overall headcount poverty rate by 1.4 points (1.6 in the rural areas and 0.9 in urban areas). Though access to ARTs has improved from 141,419 in 2009 to about 330,000 persons living with HIV/AIDS in 2010⁴, of the 105,000 children living with HIV/AIDs only 27% are accessing ART that is critical for their survival. This will worsen as 20,000 new children are infected every year.

Because there are fewer women than men among fishing communities along landing sites on Lake, Victoria, Kacheera and Lake Kijanibarora, it is common for men to share the few women available. Since the primary objective of the women at the landing sites is to look for money which the fishermen readily have, the women do not mind having sex with several men, one after the other in a day. Similarly, it is easy for fishermen to lure young school girls into sexual relations in exchange for money and gifts. Consequently, the HIV prevalence at these landing sites is higher (21%) as compared to the districts’ HIV prevalence (12%). In other communities surrounding the fishing communities such as in Kacheera and Kyalulangira, there exist harmful behavioral practices among pastoralist settlers. These include widow inheritance, spouse sharing, and domestic violence. These practices have been identified as drivers of HIV infection in the area.

Gender stereotypes and cultural beliefs economically disempower women in fishing communities and greatly contribute to increasing risky practices. Women are employed in less paying jobs like tending small kiosks, working in bars and sorting out fish at the landing sites. This limited access to and control of any productive resources means that women have limited decision making on when, how and with whom to have sex hence lacking the capacity to make the right choices to avoid contracting HIV.

In Rakai, despite the efforts made to address AIDS related stigma, community members still discriminate PLHIV. This continues to impede uptake of HIV prevention services, disclosure of HIV status, and open discussion of HIV and appropriate responses. For example, some churches encourage spiritual healing instead of promoting ART. This is partly driven by limited understanding of HIV among religious leaders, HIV and AIDS myths, misconceptions about how HIV is transmitted, and fear of contracting HIV from casual contact. Other forms of stigma include

² National Behavioural Health Sero Survey 2011

³ UNAIDS report (2001b) indicates that production of households affected by HIV&AIDS reduces at 40% per annum

⁴ National development Plan(2010/11-2015/2015

discriminative sermons, de-campaigning of condom use, PLHIV being perceived as a burden, and moralization of HIV. Stigma and discrimination therefore leads to those infected with HIV not seeking timely care and support and negatively affects openness about HIV and AIDS and greater involvement of people living with AIDS (GIPA) in HIV prevention efforts.

In view of the great negative impact that HIV and AIDS has had in the target districts of RACOBAAO, the organization will continue to put emphasis on comprehensive HIV and AIDS interventions using the rights based approach and referral. RACOBAAO will have to advocate for increased resource allocation to child birth registration services as a process/system to help children access their child rights like social service obligations to education, health, justice and citizenship; and strengthen families and communities' capacity to provide care and protection to Orphans and other Vulnerable Children (OVC) at that level.

2.7 The National Development Plan

The National Development Plan (NDP) was designed to be the primary Government National Strategic Plan, the anchor for Government fiscal strategy and lower level or sectoral plans. It provides a guide for the allocation of resources through the Medium Term Expenditure Framework. Over the next five years, the NDP is also intended to guide decision making and implementation of government programmes including the annual budget process, and the prioritization and direction of Government actions.

Human rights and social protection are among the key issues emphasized in the NDP. For example, under social the development sector, objective 1 "Build and maintain an effective national HIV/AIDS programme system", and strategy 1 is to "strengthen the policy, legal, social and community HIV/AIDS response framework such as review and scale up social protection interventions targeting people living with HIV/AIDS (PLWHs), OVCs and other vulnerable groups". Objective 5, "Ensure respect and promotion of human rights and dignity," and strategy 1 is to "Strengthen the systems for promotion of human rights and prevention of human rights abuse." It is therefore, an important tool for prioritizing government interventions, mobilizing external resources and also developing plans that are aligned to it like this RACOBAAO Strategic Plan.

2.8 Donor Trends

Aid flow in Uganda is mainly through International NGOs as well as through bilateral and multilateral agencies. Therefore, a substantial percentage of Uganda's budget is still financed by development partners. The traditional aid delivery mechanism has been through project support (funding specific projects directly). However, there has been of recent a shift from this approach to budget support (giving a lump sum to government to allocate in accordance with its budget priorities) as the main channel for delivering aid. The latter approach is most preferred by government because it believes that the former approach can lead to misaligned and costly projects that are not in line with the National Development Plan's objectives or set priorities.

There are however a few donors that still believe in aid delivery through direct funding of projects. These donors feel that project support allows them to ensure that money does exactly what it is meant to do. It is also important to note that even donors' principal areas of focus have changed with more interest in funding projects that supplement sector programmes such as human rights, domestic violence, capacity building, HIV/AIDS and conflict resolution.

The Sector Wide Approach (SWAP) has been adopted in a bid to harmonize development assistance and reduce administrative costs associated with projects' approach. The SWAP allows development partners to contribute to a national program of development instead of piecemeal project specific

development. It increases donor coordination and reduces the likelihood of overlapping and duplication of initiatives. It further enhances the possibility of the government to ensure uniform practices and reduces the administrative burden of dealing with a number of donors applying different policies and administrative practices – in particular in relation to financial management.

The implications of these trends is that there will be fewer resources available for out-of-budget direct support and RACOBABO will have to explore alternative sources of funding for its interventions. It will also need to ensure that its interventions are aligned with the National Development Plan as well as the Millennium Development Goals so as to remain relevant to the country's national and international development agenda. In addition, RACOBABO's resource mobilization strategies should be reviewed in light of changes in donor preferences, priorities, community perceived needs, challenges and funding requirements.

2.9 PESTEL Analysis

As an organization working in a changing environment, RACOBABO conducted an environmental analysis technique - PESTEL to analyze the impact that Political, Economic, Socio-cultural, Technological, Environmental and Legal factors may have on the organization as it strives to achieve its mission and objectives. This analysis focused on the issues that affect the organization's performance and how it can or will respond to them since being external factors, it may have no control over them. The analysis is presented in the table below.

VARIABLES	ISSUES	STRATEGIES TO MINIMIZE ISSUES
Political	Political In-stability especially during elections	Work with government to ensure protection and peace
	Political interference	Regular sharing of information with political leaders on organizational activities and always sticking to RACOBABO policies.
	Change in political leadership – from Local Councils to National level	Ensure community ownership of programs through meaningful participation and bring new leaders on board
	Taxation and Social welfare policies	Advocate for inclusive policies and demand for policies protecting vulnerable groups
Economic	Inflation leading to increased cost of living and running the organization	Strategic budgeting incorporating inflationary aspects
	Poor infrastructure such as roads, health facilities and water facilities	Advocate for increased budget allocation for infrastructure improvement, monitor infrastructure development in the community and use alternative means available in the community
	Increase in unemployment trends	Support vocational training and create of sustainable IGAs
	High poverty levels in the community leading to dependency especially among vulnerable groups	Support vocational training and empowerment programs, and create sustainable IGAs. Link beneficiaries to government poverty alleviation programs and micro-finance
	Economic recession leading to reduced donor and government funds	Design community owned interventions that can be sustained without funding. Initiate organizational IGAs.
Socio-cultural	Bad Cultural practices such as widow inheritance and no inheritance rights for girls/women	Involve cultural institutions in program design and implementation. Continuous education of communities on human rights. Support legal redress for affected groups
	Breakdown of community values and	Advocate for restoration of community values and

	norms such as caring for OVC	norms. Meaningfully involve the community in program design.
	Increased mobility, morbidity and mortality among adults and children	Provide comprehensive care package to vulnerable households and create partnerships with other service providers to facilitate referrals
	Religious and cultural interference	Meaningful involvement of religious and cultural leaders in programming and continuous dialogue with them
	Low literacy levels	Initiate Adult Functional Literacy and translate IEC materials into local languages
	Population demographics	Improve demand, access and utilization of reproductive health services and educate communities on reproductive health rights
Technological	Limited access to ICT	Upgrade both hardware and software. Install high speed internet and fax and make internet accessible especially to youth. Use new social media such as Twitter and Facebook to reach partners and beneficiaries
	Limited access to electricity or no power stability	Advocate for government programs such as rural electrification and use of solar. Buy bigger generator and install inverters
Environmental	Lack of information and limited knowledge on environmental conservation	Integrate and mainstream environmental protection programs such as tree planting, energy conservation and proper waste disposal
	Insufficient environment protection laws	Enforce existing laws and advocate for new community specific by-laws for environmental protection such as by-laws on WATSAN
	Drought/Flooding	Support modern agricultural practices including food storage; support construct of dams; buy four-wheel vehicles for transport
Legal	Lack of implementation of existing policies and laws that protect human rights	Enforce implementation of and educate communities on existing laws. Conduct research on abuse of laws and policies
	Changing policies and laws against the rights of people	Advocate for amendment to protect human rights; do evidence based advocacy; continuous dialogue with policy makers

2.10 SWOT Analysis

As it focuses on the next 5 years, RACOB AO analyzed and identified its Strength and Weaknesses (internal environment) and Opportunities and Threats (external environment). This was done in recognition of the fact that the RACOB AO will focus on full realization of human rights by vulnerable communities. The analysis is presented in the table below

STRENGTH	WEAKNESSES
Established systems both financial and management	Poor documentation affecting programming and visibility
Availability of physical Assets such as land and motorcycles	Inadequate resources majorly financial - short term funding (one year commitment) E.g. FY11 budget was 1.3bn UGX but only raised 900m UGX
Good reputation in community	Inadequate Capacity to implement human rights and governance issues projects – few staff have been trained in Rights Based Programming

Long experience in implementing HIV/AIDS programs	Limited opportunities for staff skills development – no resources or budget for staff development, current donors don't fund it. Organization provides opportunities in terms of time.
Capacity to attract new donors	Location of the organization – target districts have few donors focusing on them and no district field offices
Good Accountability Mechanisms	Under staffing – organization downsized from 23 staff to 14 due to cut in external funding
Skilled, Committed and Active Board, Management and Staff	Limited Geographical coverage due to funding – only 2 districts reached though other districts have expressed in writing the need of RACOBABO's services e.g. Lwengo, Kiruhura and Ssembabule.
Operates low cost organization that is community based	Few competent NGOs in the areas of operation limiting partnerships – current partners include; Child Aid, HURINET, AGHA, DENIVA, Churches United Against HIV/AIDS, Kitovu Mobile, CIPA, RACA, etc
OPPORTUNITIES	THREATS
Target districts have few NGOs focused on governance and human rights	Government may miss understand us – human rights and good governance are new areas that government may think it's not a CSO responsibility
Development partners are focusing on human rights and good governance	Inadequate funds to cover our budget
Availability of ready to serve human resource like volunteers – currently have 229 volunteers	Unpredictable donors – usually give for short period and one is not sure whether they will give after initial funding
Acceptability of RACOBABO in the communities – people usually attend our meetings, community feedback on our programs is positive, invitation of RACOBABO by communities not reached, every sub-county gave RACOBABO free office space, good Reputation of RACOBABO;	History of conflict in some target areas may lead to political instability
Existence of the need in the community – increasing rates of human rights violation, HIV prevalence is on the increase and communities adopting violence as a way of solving conflicts	High HIV prevalence rates in the fishing communities
Peaceful environment	Politics in the land tenure system – oppressors of the poor will see RACOBABO as opposition
RACOBABO is a delegate on the DCA board in Copenhagen representing Uganda – opportunity to influence strategic direction of DCA.	Unfavorable government policies and laws such as HIV Bill
Supportive policy environment – Central and Local governments have policies that protect all people e.g. Land laws; Constitution, OVC policy	

Chapter Three

PROGRAM STRATEGIC FRAMEWORK

This strategic framework spells out RACOBABO's programmatic ambitions for the next five years. RACOBABO's programming will grow in scope to complement the direct delivery of comprehensive HIV/AIDS prevention and treatment services, by empowering vulnerable populations demand for the recognition, respect, promotion and fulfillment of their health rights, holding local governments accountable for the provision of quality and adequate services and improving access to justice.

Mainstreamed components of the strategy will include, gender, child participation, advocacy and effective and the sustainable use of natural resources.

STRATEGIC OBJECTIVES, KEY RESULT AREAS AND KEY INTERVENTIONS

Strategic Objective 1.0

Vulnerable populations are empowered to demand for the recognition, respect, promotion and fulfillment of their rights and accountability for the provision of quality and adequate services

Key Result Area 1.1

Civil Society Organizations, Health Services users and networks in the targeted districts are strengthened to lobby and advocate for pro-poor Public Management Practices, Policies and Legislation.

Strategic Interventions

- ✚ Empower vulnerable people to promote the demand-side of accountability, equitable access to rights and entitlements, services and resources through formation and strengthening of user groups and issue based networks pertaining to adequacy, appropriateness and quality of public health and other essential services; marginalization and resource allocation in their sub counties and districts.
- ✚ Building organizational and institutional capacity of likeminded CBOs to engage with the State and market actors, and establish Community Based Monitoring and Accountability Systems to monitor the delivery of services and local accountability (e.g. with support from Uganda Debt Network-UDN Capacity Support programme or any other available and competent firms or individuals)
- ✚ Build partnerships with likeminded organizations to exchange ideas, information, best practices, and ignite collective action on pro-poor issues at regional and national level
- ✚ Strengthen RACOBABO capacity to be an active player in facilitating sustainable community-led/ people-centred advocacy initiatives at the local, district, regional levels and networking with national CSOs in Uganda.

Key Result Area 1.2

Health services users through their respective networks and alliances are able to effectively monitor and report on violation of human rights and abuse of public resources at Parish, Sub County & District Level.

Strategic Interventions

- ✚ Write and disseminate district specific annual status reports on good governance, accountability in relation to the observance of health human rights including documenting and flagging specific human rights abuses.
- ✚ Support community *Barazas* where the communities build a “voice” on pro-poor issues and interface with their leaders to discuss and strategize on local service delivery and accountability
- ✚ Training of Community Based Human Rights Monitors to support community based organizations monitor and report on cases of abuse.

Key Result Area 1.3

Health Services users through their respective networks are able to effectively participate in health related decision making

Strategic Interventions

- ✚ Community mobilization and awareness of selected health rights and entitlements, lobbying and advocacy.
- ✚ Promote the participation of right holders/health services users in parish, sub-county and district planning and budgeting processes to ensure that their needs and aspirations are taken into consideration.
- ✚ Promote the participation of rights holders in the planning (development plans) and budgeting and monitoring processes of Local governments using score cards or CBMAS monitoring Tools.
- ✚ Promote the use of participatory approaches to empower women and girls to participate in development and manage to gain access and control over productive resources
- ✚ Lobby for amending of existing laws or new ones that are found to be counterproductive to sexual reproductive rights and other health rights including HIV/AIDS.

Key Result Area 1.4

Strengthened capacity of district and Lower Local Governments to demonstrate accountability, uphold human rights, delivery of services and accountability of public resources.

Strategic Interventions

- ✚ Build the capacity of district and Lower Local Government leadership in human rights and good governance in respect to promoting transparency and accountability at local levels.
- ✚ Build capacity for community groups in community monitoring

- ✚ Lobby for enforcement of existing and new laws, by-laws, ordinances that create an enabling environment for fulfillment of human rights, people's participation, local transparency and accountability.
- ✚ Support district stakeholders to monitor the implementation of government policies, programmes and guidelines with particular emphasis on the health and production sectors.

Strategic Objective 2.0

Improve access to justice for the most Vulnerable people in the Targeted Districts

Key Result Area 2.1

Targeted communities are able to protect the rights of OVC, Widows and minority groups enjoy their Inheritance and Property Ownership rights and secure land tenure.

Strategic Interventions

- ✚ Community mobilization and awareness of selected health rights and entitlements, lobbying and advocacy.
- ✚ Carry out a baseline survey in each sub-county to establish the identify barriers to justice to justice for vulnerable people especially widows and OVC.
- ✚ Strengthen the Local Court System (LC 1-3) capacity in targeted areas to ensure expeditious delivery of justice for vulnerable people in targeted communities.
- ✚ Establish strong working collaborations with relevant civil society actors like Uganda law Society/Legal Aid Project, FIDA, etc ; and private actors to provide Pro-Bono Legal services for vulnerable people.

Key Result Area 2.2

Targeted communities that have a history of violence live in peaceful co-existence including a reduction in violence against women and children

Strategic Interventions

- ✚ Establish and train sub-county and district peace and conflict resolution committees in communities with a history of violence
- ✚ Promote Community awareness on domestic violence, child protection, peace and reconciliation issues
- ✚ Promote a culture of dialogue, life skills among youth and children leading to a generation that appreciates peace and is more tolerant
- ✚ Research (Community Participatory Action Research) on issues that affect peaceful co-existence
- ✚ Promotion and production of relevant information materials and simple fact sheets such as policies, programmes, development plans, laws, and work plans.

Key Result Area 2.3

Marginalized groups like OVC, PLHIV, PWD, Albinos, are free from stigma and discrimination

Strategic interventions

- ✚ Reduce stigma through appropriate electronic and print media.
- ✚ Action researches, publication and dissemination of reports to stakeholders.
- ✚ Promotion and production of relevant information materials and simple fact sheets (policies, programmes, development plans, laws, work plans, etc).
- ✚ Promote the representation of marginalized groups in mainstream community events including decision making that affects their lives.
- ✚ Empower marginalized groups to influence the removal of clauses that violate human rights from relevant Bills

Key Result Area 2.4

- ✚ Marginalized communities have ownership, access to, and sustainable utilization of productive resources

Strategic Interventions

- ✚ Migrants, landless and potential evictees rallied into pressure groups to engage district authorities for protection of their land rights, to leverage negotiations with land lords and secure allocation from available public land in the districts.
- ✚ Promotion and production of relevant information materials and simple fact sheets (policies, programmes, development plans, laws, work plans, etc). Populations living on marginal lands supported to adopt good practices in the sustainable use of land resources and access to alternative non land based livelihood opportunities.

Strategic Objective 3.0

Improve Access to Quality Prevention, Treatment and Care Services for PLHIV and most at Risk Populations

Key Result Area 3.1

PLHIV and 'Most at Risk Populations' (MARPs), have access to Health related education and Information to enable them protect themselves from infection and adopt health seeking behaviors

Strategic Interventions

- ✚ Development, Adoption and dissemination of community tailored HIV prevention IEC materials
- ✚ Conduct HIV prevention BCC campaigns in targeted communities

Key Result Area 3.2

Essential prevention, treatment and care services (including access to arvs) are consistently available in selected remote and hard to reach communities - in targeted districts.

Strategic Interventions

- ✚ Provide comprehensive medical care to PLHIV in collaboration with other actors
- ✚ Establish and strengthen PLHIV Treatment Support Groups that monitor HIV service providers to ensure consistent supply of medicines including ARVs
- ✚ Promotion and production of relevant information materials and simple fact sheets (policies, programmes, development plans, work plans, etc). Effective community based systems established to follow up on drug adhere and compliance, home based care and support, as well as peer support to PLHIVs

Key Result Area 3.3

PLHIV and OVC in targeted communities access safe/adequate and nutritious food and other livelihood alternatives.

Strategic Interventions

- ✚ Provide social-economic support services to PLHIV and their households as well as other vulnerable groups to diversify livelihood options and to improve their income generating and food production capacities
- ✚ Promotion and production of relevant information materials and simple fact sheets (policies, programmes, development plans, work plans, etc).
- ✚ Community based monitoring and demanding for Government accountability of HIV/AIDS related interventions at the local, regional and national levels.

Key Result Area 3.4

PLHIV enjoy Healthy working and environmental Conditions

Strategic Intervention

- ✚ Develop and implement HIV work place policies for RACOBAAO and its partners
- ✚ Build RACOBAAO capacity to manage HIV/AIDS related interventions.
- ✚ Promotion and production of relevant information materials and simple fact sheets (policies, programmes, development plans, work plans, etc).

Chapter Four

INSTITUTIONAL AND ORGANIZATIONAL DEVELOPMENT

4.1 Finance Resources

RACOBABO currently depends on a few external donors. These include: Danchurchaid, Pharmacists without borders, Evangelic Lutheran Church in America (ELCA), Icelandic church aid, International Olympic Committee, the Civil Society Fund.

Some of these funders provide short term funding that cannot cater for interventions of a long-term nature. For example, where as the organization had budgeted for UGX 1.3 billion during the 2011 financial year, only UGX 900 million was realized. The above sources of funding are inadequate and unsustainable, especially in view of the anticipated increase in the scope of operations and organizational growth. It is therefore imperative that the organization lays out strategies for diversifying its financial resource RACOBABO will therefore in the next 5 years need to take the following actions:

- Identify long term partners
- Identify new partners and service providers for possible collaboration and linkage
- Establish income generation projects
- Devise resource mobilization strategies and networking to rationalize resources.

4.2 Documentation of Lessons Learnt

Despite its wide experience in planning and implementation HIV/AIDS-related interventions, RACOBABO has not adequately documented its experiences and lessons learnt. Sharing experiences with other like-minded organizations will not only enhance the organization's visibility but also enable it to uncover new and innovative approaches and interventions geared towards meeting the needs and expectations of stakeholders and beneficiaries. In a bid to address this gap, RACOBABO will need to:

- Build staff capacity in documentation
- Develop detailed M&E plans and tools
- Develop and update organizational website
- Introduce public relations office in the management structure

4.3 Capacity to Implement Human Rights, Governance and Service Accountability Initiatives

Although RACOBABO has mainstreamed human rights issues in its interventions, only a few staff so far have been trained in rights-based programming and gender equality. Given the current importance of human rights, good governance based accountability in the use of public resources in development programmes in Uganda in general and South Central in particular, the organization will need to strengthen its capacity in human rights programming, staffing and human resource development as well as acquisition of tools and equipment. The above capacity gap will be bridged through the following actions:

- Build the capacity of staff and Board on human rights programming, community-based monitoring, lobbying and advocacy for accountable delivery of public services and legal aspects
- Network and collaborate with existing service providers (expert CSOs, institutions/ firms and individuals) with more experience in human rights programming, community monitoring, local

governance and accountability, at the local and national levels. The major focus will be on the health, community development and production sectors.

4.4 Human Resources

People are the most important resource in any organization and the success of development interventions depend on knowledge, skills, attitudes and behavior of people at various levels of the organizational structure. Although RACOBABO has encouraged staff initiatives in knowledge and skills enhancement by provision of time for self-study, the organization currently has limited opportunities for staff development due to inadequate resources for this important aspect of organizational growth. Although, RACOBABO's staff have the requisite skills and experience to execute their work, the complex and dynamic nature of interventions such as HIV/AIDS, a repertoire of knowledge and skills in contemporary approaches and methods. Clearly, RACOBABO needs to transform itself into a learning organization.

The organization is also under-staffed given the current and anticipated geographical coverage as well as expected diversification of interventions. Despite under-staffing, the organization was forced to down-size from 24 to 14 due to cut on external funding.

RACOBABO intends to undertake the following measures to address staff development issues:

- Mobilize resources for staff development
- Increase staff development budget
- Explore alternative staff development strategies such as shadowing, secondments and exposure visits

4.5 Geographical Coverage

Despite the increasing demand for RACOBABO services in adjacent districts such as Lwengo, Kiruhura and Sembabule. The organization has limited geographical coverage; it is currently operating in 6 districts. This is attributed to limited funding. RACOBABO intends to expand to other neighboring districts, resources permitting. Human rights and citizens' advocacy for accountable governance in delivery of public service issues (especially in the health, production and community services/ development sectors) will be the main thrust in RACOBABO's current and future areas of operation since there are few CSOs that focus on this thematic area.

RACOBABO will also operate in 7 districts of: Rakai, Lyantonde, Masaka, Sembabule, Lwengo, Bukomansimbi, Kalungu, Kalangala.

Rakai District

Rakai district is located in south – western region of Uganda, west of Lake Victoria, lying between longitude 31E, 32E and latitude 0S. It is bordered by Sembabule district in the northwest, Masaka district in the East, Kalangala district in the southwest, Mbarara district in the west and Tanzania in the south.

The district has an area of about 4,989 square kilometres and is made up of four administrative counties of Kyotera, Kakuuto and Kooki. It has 3 Sub-counties, 3 Town Councils, 2 Town Boards, 103 Parishes/Wards and 729 Villages. The following table indicates the administrative and political structures in Rakai district:

Administrative Unit	Number in District
Counties (LC. IV)	3

Sub-counties (LC.III Rural)	18
Town Councils (L.C.III Urban)	3
Town Boards	2
Parishes/Wards (LC.II)	103
Villages (LC.I)	738

The geographical location as well as the physical location of Rakai gives it a peripheral status, especially the counties of Kakuuto and Kooki. It occasionally leads to influx of refugees and their animals which make the district exposed spread of diseases. Also the little resources available in the district are shared with the people in the neighbouring countries.

The total population of Rakai district is 404,326 (**Uganda Population and Housing Census, 2002**)

Table:1 Raikai district population trend -1980 – 2002

Period	Population Size
1980	274,558
1991	383,501
2002	404,326

Source: 2002 Uganda population and housing census

Rakai population growth of 1.8 % is still high; such high population growth rate has an important implication on the demand for social services.

The vegetation of Rakai district is as varied as the different ecosystems that characterize the area. It ranges from the medium altitude forests on the shores of Lake Victoria, through swamps, to savannah. Only 180kms of the 4073sq kms are still covered with forests. The rainfall patterns in the last four to five years have been experiencing prolonged dry conditions where rainfall has been erratic affecting crop and livestock production.

Rakai district populace is comprised of Baganda, Bakiga and pastoral Banyankole. The main economic stay is subsistence agriculture for their livelihood and coffee is the chief cash crop but the coffee wilt disease has affected this crop and ever-fluctuating prices on the world market. This has rendered them prone to economic hardships during such times.

Masaka District

Masaka district is bordered by Sembabule in the North West, Mpigi district in the North, Rakai district in the west and south and Kalangala District in the East. The District Headquarters is 120 km from Kampala.

The District has a total land area of about 4560.4sq. KMs. The landscape and topography in Uganda is rolling and undulating with valley bottom swamps including stream flows to lakes and rivers. It has got some rocky hills, considerable area under river basin and plains, lakes, swamps and bushes.

The soil texture is varied from place to place ranging from red-latrine, sandy loam and loam but in general, productive. The rainfall pattern is bimodal having two crop seasons with dry spells in between July and August as well as January and March with the exception of a few months in a year of declining trend in precipitation.

The average annual rainfall received is 1100-1200mm with 100-110 rainy days. The maximum temperature recorded is not exceeding 30° C and the minimum not below 10oc having almost equal lengths of day and night throughout the year.

The total geographical area of the district is about 6986 Sq. Kms out of which 5865 sq. kms is arable and 122120 hectares are under cultivation. Considerable area is covered by marshlands, lakes, rivers, forestry and swamps. The total gazetted forest estate is about 35302 hectares this constitutes about 6.38% of the total land area of the district.

The district has a rich cultural heritage. It has also a diversity of ethnicity. The majority of the people are Baganda followed by the Banyankole, Banyarwanda and Banyoro, but most of the tribes practice Buganda culture.

Sembabule District

Sembabule District is situated close to the Equator towards the South and lies between 31 and 32 Degrees East longitude.

The District is bordered by Mubende and Mpigi Districts in the North and North East, Masaka District in the East and South East, Rakai District in the South east and Mbarara District in the West.

The district has a total area of about 2470.5 square kms with water coverage of zero Square KM. The landscape and topography is rolling and undulating with vertically gully heads and valley bottoms, seasonal streams and swamps.

The soil texture is varied from place to place ranging from red laterite, sandy loam. Over 85% of the soils are ferralsols representing an almost final stage of weathering. As regards climate, Sembabule has two rain seasons (bi-modal distribution) i.e. 1st Season – March to May and 2nd Season – September and December. The mean annual rainfall vary from 1200 – 2000 mm in Mateete Sub County. This decreases westwards to as long as 750 mm.

The district records high temperature of up to 32 degree C in the dry hot months of January – February and July – August and the mean temperature is between 20C^o and 27C^o.

Administratively, Sembabule comprises of two counties (Lyemiyaga and Mawongola) six Sub-counties (Lwemiyaga, Ntusi, Lwebitakuli, Mateete, Mijwala, and Lugusulu) and one town council (Sembabule Town Council).

Lyantonde District

Lyantonde District is located in the South Western region of Uganda lying between Latitude 00 S, and 0.5 S and Longitude 31.1oE and 31.3oE. It borders with Rakai District in the southern part. It is bordered by Sembabule District in the North-West, Masaka District in the East and Kiruhura District in the West. The District Headquarters are at Lyantonde Town, which is a tarmac road distance of about 190km from Kampala, the national capital. Lyantonde District has an area of about 864.62square kilometres.

About 96% of the population is rural, a situation which reflects the basically agricultural nature of the district economy. In this rural environment, settlement pattern vary, depending on a number of factors such as climate, vegetation, water supply, terrain, soil fertility, disease agents etc. Kasagama sub- County is the least densely populated with about 60 people per sq km. The low population in Kabula County can be attributed in part to the existing ranches and the acute shortage of water.

The total population of Lyantonde District is 66039 (Male 32,687 / Female 33,352) and administratively, the district comprises of 5 Sub-counties, 1 town council, 23 parishes and 188 villages.

Lyantonde is located in the semi arid stretch of the Ankole Masaka dry corridor. This belt experiences a bimodal pattern of rainfall. However in recent period, Lyantonde District under

severe drought, the rainfall pattern has been complicated it has received uni modal type of rainfall that ranges from on average 450-750mm. However, it varies to 850mm and 750mm to the extreme Northern Sub-Counties of Lyantonde, Kinuuka, Kaliiro and Kasagama. Two dry seasons occur with the more pronounced one in June-July -August and September, while the other is between December and February.

Kalangala District

Kalangala District was established in 1989, having been a sub-district of Masaka District. In 1996, it was fully decentralized. The district is situated in Lake Victoria, South Western Uganda and is between longitudes 32o01' East and 32o52' East and latitudes 0o10' South and 1o00' South. It shares boundaries with Mpigi and Wakiso Districts in the North, Mukono District in the East, the United Republic of Tanzania in the South, Masaka and Rakai Districts in the West.

The district is made up of 84 islands widely scattered on Lake Victoria over a total area of 9,066.8 sq. km, of which 432.1 sq. km (4.8%) is land and the rest is water mass. According to the results of the 2002 population census, the population in the district doubled compared to the previous census of 1991 where the total population was 16,371. The district population, over the 11-year period, has grown at a rate of 5% per annum. The level of urbanization is at 8.4%, with urban population growth rate at 7%, with a General Sex Ratio of 50:100 (i.e. for one female there are about two males) compared to the national ratio of 95:100.

The main economic activity is fishing which is characterized with constant migration of fishermen from one island to another depending on the fishing season. Other economic activities carried out include agriculture, livestock farming, tourism, charcoal burning and lumbering. The district has 22 primary schools, 3 secondary schools and 2 Tertiary institutions

Bukomansimbi District

Bukomansimbi is a new district that was created by act of parliament in 2010 and became functionally in July, 2010. It was formerly part of Masaka District, before it was split off into a separate independent district The district is bordered by Gomba District to the north, Kalungu District to the east, Masaka District to the southeast, Lwengo District to the southwest and Sembabule District to the northwest. Bukomansimbi town where the district headquarters are located, lies approximately 26 kilometres (16 miles), by road, northwest of Masaka, the nearest large city. This location is approximately 150 kilometres (93 miles), by road, southwest of Kampala. The coordinates of Bukomansimbi District are: 00 10S, 31 3. The estimated population for Bukomansimbi is 150,900 and 152,400 for 2010 and 2011 respectively as indicated here below:

Table: 2 District population by Sub-county - 2010 & 2011

District	Households	Population 2010		Total
		Male	Female	
Bukomansimbi	32,670	73,500	77,400	150,900
Bigasa	8,526	19,800	20,500	40,300
Butenga	10,784	23,700	25,100	48,000
Kibinge	7,328	16,500	17,400	33,900
Kitanda	6,031	13,500	14,400	27,900

Source: UCC Rural Communications Development Fund Report. 2010

Lwengo District

Lwengo District is a new district that was created by an Act of Parliament in 2010 and became functional in July 2010. Prior to that, it was part of Masaka District. The district is located in central Uganda and is bordered by Sembabule District to the north, Bukomansimbi District to the northeast, Masaka District to the east, Rakai District to the south, and Lyantonde District to the west. Lwengo, the district headquarters, is located 45 kilometres (28 miles), by road, west of Masaka. The coordinates of the district are: 00 24S, 31 2.

The district is predominantly rural with limited public services. The main economic activities include subsistence agriculture and livestock farming. The 2002 Uganda national census estimated the population of Lwengo District at about 242,300. However, current estimated population is 262,000 and 264,900 for 2010 and 2011 respectively as indicated here below:

Sub counties	Households	Population 2010		Total
		Male	Female	
Lwengo	59,359	126,500	135,500	262,000
Kisekka	11,293	22,800	24,900	47,700
Kkingo	8,385	18,100	19,000	37,100
Kyazanga	10,215	21,900	23,300	45,200
Lwengo	8,088	17,500	19,100	36,600
Ngagwe	8,021	17,700	18,600	36,300

Source: UCC Rural Communications Development Fund Report. 2011

In regard to the above, the organization will undertake the following actions:

- Identify long-term donors to fund interventions in new districts
- Identify new partners
- Identify and lobby for local government funding

4.6 Networking, Collaboration and Partnering

Since its inception, RACOBABO has been networking as well as building coalitions, alliances and partnership with other like-minded organizations. These include, among others: Child Aid, HURINET, AGHA, DENIVA, Churches United against HIV/AIDS, Kitovu Mobile, CIPA and RACA.

RACOBABO believes that partnerships with like-minded organizations are useful to harmonize its agenda, create synergy, share competencies and practices and most importantly, enlarge critical mass for impact on its constituents. However, here are few competent NGOs in RACOBABO's the areas of operation, especially those that focus on the organization's key thematic areas.

RACOBABO will continue to forge new alliance and partnership with other like-minded organizations and local governments.

Chapter Five

STRATEGIC PLAN IMPLEMENTATION AND MONITORING PLAN

RACOBABO's strategic plan will be implemented through the Steering Committee that will be charged with the responsibility of coordinating and overseeing its implementation. The organization will implement the actions in the plan in collaboration with partners and stakeholders. This approach will enable RACOBABO to leverage its resources for effective service delivery and create a critical mass that will facilitate the implementation of this strategic plan.

This strategic plan will be operationalized through annual operational work plans and budgets whose components will be derived from the strategic objectives and key result areas. The strategic plan will be reviewed on an annual basis to reflect emerging changes in RACOBABO's operating environment and mid-term reviews done by Management, Board and other key stakeholders for purposes of tracking progress towards achievement of set strategic objectives. In addition, operational/annual plans will be derived from the strategic plan. Quarterly plans as well as monthly plans will then be derived from these operational and annual plans.

Quarterly, annually and mid-term strategic plan reviews will be conducted to assess progress towards achievement of strategic objectives and action points. In addition, a final review will be done during the last quarter of the plan before preparation of a new strategic plan.

The following will be the key guiding questions while reviewing the strategic plan:

- Are strategic objectives achieved or not?
- Are the strategic objective achieved according to specified timelines in the plan?
- Are the strategic objectives still relevant and realistic?
- Should the deadlines for completion of action point/activities be changed?
- Do personnel have adequate resources (funds, equipment, training etc) to achieve the objectives?
- Should priorities be changed to put more emphasis on more important issues?
- What current trends, patterns necessitate adjusting the plan? e.g. changes in clients/beneficiary needs, changes in the external environment and changes in available of resources

The Monitoring and Evaluation plan is illustrated in the figure below:



Level 1: RACOB AO Management Team and Focal Persons of respective districts will be responsible for organizing annual and mid-term evaluations of impacts and effects. They will compile and provide an overview to the Board for review during the latter’s annual Board meeting.

Level 2: RACOB AO staff will also undertake periodical monitoring and evaluation. The data obtained will be discussed at Secretariat level and with the rights holders in the communities to determine which areas need particular attention. This will be agreed upon within the mandate of RACOB AO and what the organization can afford. There will be periodical feedback to the rights holders, donors and other stakeholders. The donor agencies and Local Government officials or other stakeholders will be free to visit the project sites of RACOB AO, hold discussions with the beneficiaries and obtain any information of their choice that may be available at RACOB AO HQ or field offices. The stakeholders will also be free to participate in semi-annual reviews and planning consultations and to access necessary project documents and reports.

Level 3: The Management Team will provide a brief assessment of governance, financial and human resources management mechanisms and processes to the Board for review each year.

ACTION PLAN

No	Strategic Interventions	Time Schedule																			
		2012				2013				2014				2015				2016			
		1	2	3	4	1	2	3	4	1	2	3	4	1	2	3	4	1	2	3	4
Strategic Objective I																					
1.1.1	Empower vulnerable people to demand and gain equitable access to rights, services and resources	X	X	X	X		X	X	X	X	X	X	X	X	X	X	X	X	X	X	X
1.1.2	Building organizational and institutional capacity of likeminded CBOs to engage with the state and market actors, & establish BM&A Systems	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X
1.1.3	Build partnerships with likeminded organisations for to exchange ideas, information, best practices, and ignite collective action on pro-poor issues regional and national level	X		X	X	X	X	X	X	X	X		X	X	X	X	X	X		X	X
1.2.1	Write and disseminate district specific annual status reports on good governance, accountability in relation to the observance of human rights including documenting and			X	X			X		X			X			X	X	X			X
X1.2.2	Support community Barazas where the communities build a “voice” on pro-poor issues and interface with their leaders for accountability	X	X	X	X	X	X	X		X			X	X	X	X	X	X		X	
1.2.3	Training of Community Based Human Rights Monitors to support community based organisations monitor and report on cases of abuse	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X		XX	
1.2.4	Preparation and production of relevant information materials and simple fact sheets (policies, programmes, development plans, laws, work plans, etc).	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x
1.3.1	Promote the participation of right holders/health services users in parish, sub-county and district Strategic Planning and budgeting processes to ensure that the needs of the	X		X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	
1.3.2	Promote the participation of rights holders in the planning (development plans) and budgeting and monitoring	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X		X	X	X

	processes of Local governments using score cards.																			
1.3.3	Promote the use of participatory approaches to empower women and girls to participate in development manage to gain access and control over productive resources	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X
1.3.4	Lobby for amending of existing laws or new ones that are found to be counterproductive to sexual reproductive rights and other health rights	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X
1.3.5	Preparation and production of relevant information materials and simple fact sheets (policies, programmes, development plans, work plans, etc).	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	X
1.4.1	Build the capacity of district and lower local government leadership in human rights and community accountability	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	
1.4.2	Lobby for enforcement of existing and new laws – bylaws, ordinances that create an enabling environment for fulfillment of human rights	X	X	X	X	X		X	X	X	X	X			X	X	X	X	X	
1.4.3	Support District stakeholders to monitor the implementation of government policies, guidelines and legislation	X	X	X	X	X	X	X	X		X	X	X	X	X	X	X	X	X	X
Strategic Objective 2																				
2.1.1	Carry out a baseline survey in each sub-county to establish the identify barriers to justice to justice for vulnerable people especially widows and OVC.	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X		X	X
2.1.2	Strengthen the Local Court System (LC 1-3) capacity in targeted areas to ensure expeditious delivery of justice for vulnerable people in targeted communities.	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X
2.1.3	Establish strong working collaborations with relevant civil society actors like Uganda law Society/Legal Aid Project, FIDA, etc ; and private actors to provide Pro-Bono Legal services for vulnerable people.	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X
2.2.1	Establish and train sub-county and district peace and conflict resolution committees in communities with a history of violence	X		X		X		X		X		X		X		X		X		
2.2.2	Promote Community awareness on domestic violence, child protection, peace and reconciliation issues	X			X		X		X		X		X				X		X	
2.2.3	Promote a culture of dialogue, life skills among youth and children leading to a generation that appreciates peace and is more tolerant		X		X	X		X		X		X		X		X		X	X	X
2.2.4	Research (Community Participatory Action Research) on issues that affect peaceful co-existence			X	X		X						X				X			

2.3.1	Conduct anti-stigma campaigns through Radio and other electronic media.	X		X					X				X			X			X
2.3.2	Promote the representation of marginalized groups in mainstream community events including decision making that affects their lives.	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X
2.3.3	Voices of mobilized to influence the PLHIV HIV/AIDS Prevention and Control	X		X		X		X		X		X		X		X		X	
2.4.1	Migrants, Landless and potential evictees rallied into pressure groups to engage district authorities for protection their land rights	X	X	X		X		X		X		X		X		X			X
2.4.2	Populations living on marginal lands supported to adopt good practices in the sustainable use of land resources and access to alternative non land based livelihood opportunities	X	X	X		X		X		X		X		X		X		X	
2.4.3	Preparation and production of relevant information materials and simple fact sheets (policies, programmes, development plans, work plans, etc).																		
Strategic Objective 3																			
3.1.1	Development/adoption of relevant IEC materials	X			X			X			X			X			X		X
3.1.2	Conduct HIV prevention BCC campaigns in targeted communities	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X
3.2.1	Provide comprehensive medical care to PLHIV in collaboration with other actors	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X
3.2.2	Establish and strengthen PLHIV Treatment Support Groups that monitor HIV service providers to ensure consistent supply of medicines including ARVs	X		X		X		X		X		X		X		X		X	X
3.2.3	Effective community based systems established to follow up on drug adhere and compliance, home based care and support, as well as peer support to PLHIVs	X	X	X	X	X	X	X	X		X		X	X	X	X		X	X
3.3.1	Provide social-economic support services to PLHIV and their households to diversify livelihood options	X	X	X	X	X		X	X		X		X	X	X			X	
3.4.1	Develop and implement HIV work place policies for RACOBABO and its partners		X			X					X				X				X
3.4.2	Preparation and production of relevant information materials and simple fact sheets (policies, programmes, development plans, work plans, etc).																		

3.4.3	Strengthen RACOBAAO institutional and organizational capacity (staffing and human resource training, tools and equipment, furniture, etc).																				
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APPENDICES

RACOB AO Organizational Chart



