

IOM UGANDA ANNUAL REPORT 2018



IOM IN UGANDA

AREAS OF OPERATION IN 2018



Districts of Kampala, Hoima, Kikuube, Isingiro, Mbarara, Yumbe, Moyo, Kyegegwa, Lamwo, Koboko, Amuru, Kasese, Kisoro, Bundibugyo, Ntoroko, Kaabong, Amudat, Moroto; Nakasongola, and in the refugee settlements of Nakivale, Kyangwali, Kyaka II, Palorinya and Bidibidi.



IOM Uganda staff and partners march in Kampala on International Migrants Day, 18 December 2018

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Welcome to IOM Uganda Annual Report for 2018, where we reflect on the organization's support to the Government of Uganda and other actors towards ensuring that migration is safe, orderly and humane.

No doubt the standout development in 2018 was the adoption of the Global Compact on Migration (GCM) by the UN member states in Marrakech, Morocco, in December. As IOM, we have no doubt that well implemented, the GCM holds immense promise for excellent management and harnessing of migration for the betterment of humanity. Moving forward, IOM Uganda is committed to working with the Government and other stakeholders towards the implementation of the GCM.

On the operational front, our staff had a particularly lively year, thanks to the different migration-related humanitarian and other situations IOM was called upon to respond to. This was largely possible thanks to the steadfast support of our donors – particularly the European Union – both the EU Emergency Trust Fund for Africa (EUTF) and the Directorate General for European Civil Protection and Humanitarian Aid Operations (DG ECHO); the UN Central Emergency Response Fund (CERF); the United States of America Department of State; IOM Development Fund, and the various Governments with whom we work on the Resettlement Programme. I also wish to salute our colleagues in the United Nations for the various partnerships that have enabled us to

better serve the people in this country.

Our EUTF-funded Strengthening Social Cohesion and Stability in Slum Populations (SSCoS) project continued its challenging work of trying to blunt the drivers of radicalization, targeting not just the material situation of vulnerable populations, but also the hearts and minds with the Beera Clear messaging campaign. Humanitarian Emergencies pulled IOM to the waters of Lake Albert in pursuit of protection for asylum seekers, while also going after safe Water, Sanitation and Hygiene (WASH) in both West Nile and South-western Uganda. With both DG ECHO and CERF funding IOM helped to avert health crises in settlements, while also contributing to the reduction of water trucking.

I would also like to welcome the Better Migration Management Programme (BMM), which is a regional, multi-year, multi-partner programme co-funded by EUTF, and the German Federal Ministry for Economic Cooperation and Development (BMZ). Two new projects funded by the United States Government also came on board at the end of the year, with activities set to start in earnest in 2019.

Overall, IOM Uganda personnel have continued to offer excellent service in programmes on Resettlement, Migration Health, Assisted Voluntary Return and Reintegration (AVRR), Immigration and Border Management, and the Canada Visa Application Centre, which will be looking to expand in 2019.

Last but not least, a vote of thanks to our key partners, especially the Government of Uganda, our donors, the UN Country Team and civil society, private sector suppliers, and to the IOM Uganda Staff.

I hope you find the report informative; and as always, we will be grateful for your critical feedback.



Ali ABDI
Chief of Mission
February 2019



Established in 1951, the International Organization for Migration (IOM) is committed to the principle that humane and orderly migration benefits both migrants and society in general. As the United Nations Migration Agency, IOM works with its partners to assist in meeting the growing operational challenges of migration, advance understanding of migration issues, encourage social and economic development through migration, and uphold the wellbeing and human rights of migrants. The IOM constitution gives explicit recognition to the link between migration and economic, social and cultural development, as well as to the principle of freedom of movement of persons. As at the end of 2018, IOM had 173 member states, eight countries holding Observer Status, and offices in more than 100 countries.

IOM works in the four broad areas of migration management: migration and development, facilitating migration, regulating migration, and addressing forced migration. Cross-cutting activities include the promotion of international migration law, policy debate and guidance, protection of migrants' rights, migration health and the gender dimension of migration.

In Uganda, the IOM mission was established in 1988 and has since been supporting the Government to address migration challenges, and building capacity of relevant stakeholders. Besides its head office in Kampala, IOM has field sub-offices in Nakivale, Kyangwali, Kyaka

II, Palorinya and Bidibidi refugee settlements, as well as a presence in Moroto in the Karamoja sub-region.

IOM also operates a Migration Health Assessment Centre (MHAC), a Transit Centre for refugees, and the Canada Visa Application Centre, in Kampala.

IOM implements a range of programmatic interventions in areas such as Movement and Resettlement; Emergency Response; Migration Health (Assessments and Promotion); Labour Migration and Human Development; Counter-Trafficking and Migrant Assistance, including return and reintegration assistance for stranded migrants; Immigration and Border Management; and Migration Governance.

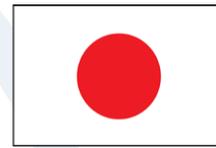
In terms of broad objectives, IOM Uganda works to:

- Enhance capacity, knowledge and dialogue on migration, migration management, and migration policy-making among relevant stakeholders.
- Promote safe and regular migration, in full respect of the human rights of all migrants, with a view to improving development outcomes of migration for migrants and communities.
- Build and enhance capacity for responses to migration dimensions of humanitarian crises, with a focus both on vulnerable mobile populations and affected communities.

OUR PARTNERS



EUROPEAN UNION



From
the People of Japan



United Nations
CERF

Central
Emergency
Response
Fund



Irish Aid
Government of Ireland
Rialtas na hÉireann



IOM Development Fund
DEVELOPING CAPACITIES IN MIGRATION MANAGEMENT



- Office of the Prime Minister (OPM) ● Ministry of Internal Affairs ● European Union ● United Nations' Central Emergency Response Fund (CERF) ● IOM Development Fund ● IOM's Global Assistance Fund ● Irish Aid (through Joint UN Programme of Support on AIDS) ● Ministry of Gender, Labour and Social Development ● Ministry of Foreign Affairs ● Ministry of Health ● Private Health sector (Clinics, Hospitals and Laboratories) ● Ministry of Works and Transport ● Uganda AIDS Commission ● Kampala Capital City Authority (KCCA) ● German Federal Ministry for Economic Cooperation and Development (BMZ) ● Deutsche Gesellschaft für Internationale Zusammenarbeit (GIZ) ● Federation of Uganda Employers ● Recruitment agencies ● District Local Governments in areas of operation ● UNHCR ● Resettlement Support Center (RSC) Nairobi ● Canadian High Commission ● Swedish Embassy Kampala ● Danish Embassy Kampala ● US Embassy Kampala ● Embassy of Norway ● Embassy of the Netherlands ● Embassy of Japan ● Embassy of Belgium ● British High Commission ● United Nations Country Team ● VFS Global ● Centers for Disease Control and Prevention (CDC) ● Inter-Governmental Authority on Development (IGAD).

BETTER MIGRATION MANAGEMENT PROGRAMME (BMM)



Counter-Trafficking



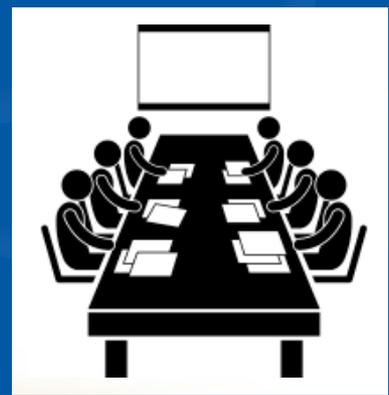
Immigration and
Border Management



Migration Data



Labour Migration



Policy and Coordination

BMM PROGRAMME BOOSTS MIGRATION MANAGEMENT



Members of the National Coordination Mechanism on Migration (NCM) pose after training in Entebbe.

BMM is a regional, multi-year, multi-partner programme co-funded by the European Union Emergency Trust Fund for Africa, and the German Federal Ministry for Economic Cooperation and Development (BMZ). It is coordinated by the Deutsche Gesellschaft für Internationale Zusammenarbeit (GIZ). IOM, the UN Migration Agency, is one of the implementing partners of the programme alongside the British Council, CIVIPOL, Expertise France, GIZ, Italian Department of Public Security (IDoPS) and the United Nations Office on Drugs and Crime (UNODC). IOM implements this programme in Djibouti, Ethiopia, Kenya, Somalia, South Sudan, Sudan and Uganda.

The BMM programme aims at improving migration management in the Horn of Africa, notably by supporting partners in the region to better address irregular migration, the smuggling of migrants and the trafficking in human beings.

The intervention logic is based on four components: (1) support for policy and legislative development and harmonization for better migration and border governance; (2) capacity building in the form of training, technical assistance and the provision of appropriate equipment to those implementing migration-

related policies; (3) support to the identification, assistance and protection of migrants in need; and (4) awareness-raising with regard to alternative livelihood options, including safe migration.

Uganda joined the BMM in 2018, following key government consultations, after becoming an official member of the Khartoum Process (<https://www.khartoumprocess.net/>). In Uganda, IOM is responsible for the implementation of specific actions aiming to support the Government of Uganda in strengthening migration management, reinforcing labor migration and protection of migrant workers while contributing to tackling Trafficking in Persons.

National Coordination Mechanism on Migration (NCM)

Upholding a whole-of-government approach to migration, IOM Uganda, with the support of the BMM, has strengthened coordination between migration stakeholders by providing support to the National Coordination Mechanism on Migration (NCM), through the support to the Office of the Prime Minister, chair of the NCM.

into their policy frameworks and developing the new phase of the National Development Plan.

Migration Data

Acknowledging the centrality of verifiable and disaggregated data to well-formulated migration policies, IOM Uganda has strived to secure a reliable channel for migration data collection. In 2018-2019, IOM Uganda operationalized nine Flow Monitoring Points (FMPs) along the border with Democratic Republic of the Congo. The collected mobility data will be used to produce analysis on the migration patterns and inform IOM and other humanitarian partners on trends, needs and vulnerabilities. Recently, IOM hosted a training for members of National Coordination Mechanism for Migration on migration and data to impress upon them the centrality of accurate data to well-formulated migration policies and further strengthen the capacity of government stakeholders.

Labour Migration

IOM Uganda continues to support the Government of Uganda in addressing the needs of the externalization of labor and protection of migrant workers. IOM, with the support of the BMM, has supported fact-finding and dialogue missions by Ugandan authorities to Jordan, Dubai, the Emirates, and the Philippines in order to assess the current status quo of Ugandan diaspora populations; promote dialogue on the protection of migrant workers' rights and discuss the establishment of bilateral agreements.

Through the BMM programme, IOM is supporting the revision of the Employment (Recruitment of Ugandan Migrant Workers Abroad) Regulations of 2005. The Regulations concern the recruitment of Ugandan migrant workers abroad, and the revision aimed at better reflecting current labor migration realities on the Regulations and improving protection measures for the Diaspora populations. Furthermore, IOM Uganda is supporting the dissemination of pre-departure information booklets to migrant workers in order to increase their awareness



Gender, Labour and Social Development Minister Janat Mukwaya with IOM Chief of Mission Ali Abdi at a labour expo in Kampala

Presented by government stakeholders and non-state actors, the NCM was established in 2015 to address current and emerging migration issues. IOM provides regular thematic trainings on migration management for the members of NCM and facilitates its quarterly coordination meetings.

In early 2019, IOM is expected to support a benchmarking mission of NCM representatives to Kenya where they will meet with their NCM counterparts to discuss modalities to improve coordination between the two entities.

Besides capacity building and technical support, IOM Uganda, funded by the BMM programme, provides policy development support to the NCM, notably by supporting the institution incorporating the Global Compact for Migration



Enumerators undergoing training ahead of deployment along Uganda's western border.

on trafficking issues, prevention of abuse and exploitation and migrant workers' rights.

Immigration and Border Management (IBM)

One of IOM's priorities in Uganda is to support the Government of Uganda in strengthening its border management capacity and infrastructures. To this end, IOM Uganda has been a long-standing partner of the Directorate of Citizenship and Immigration Control (DCIC). One of IOM Uganda's major contribution to the country's border management system is the setting up of the Migration Information and Data Analysis System (MIDAS), an IOM-developed border management information system which now operates in eight land border crossing points.

One important mission for IOM's IBM activities is to further build the capacities of government counterparts. With the support of BMM, IOM Uganda has provided trainings for front-line immigration officers on the use of MIDAS and is organizing a training scheme on Humanitarian Border Management and counter-trafficking for border management officials. Furthermore, it has organized a benchmarking trip of senior immigration officers to Ghana Immigration Service to enable our counterparts incorporate international best practices into their border management apparatus. Moreover, to enhance

cross-border coordination, IOM Uganda is supporting the joint mission to the One-Stop Border Post (OSBP) for South Sudanese and Ugandan border officials.

As part of the BMM programme, IOM is continuing the logistical support to the Immigration Training Academy, which was built by IOM and handed over to the Government of Uganda in 2016.

Counter-Trafficking

IOM supports the Coordination Office for Prevention of Trafficking in Persons (COPTIP), chaired by the Ministry of Internal Affairs through various platforms. One important aspect of IOM's counter-trafficking interventions is capacity building. IOM provides counter-trafficking trainings to first responders including border officials, Civil Society Organizations (CSOs), and local authorities in refugee-receiving districts. Furthermore, for the protection of vulnerable migrants, IOM Uganda supports the establishment of a National Referral Mechanism (NRM) in Uganda, carries out sensitization on human trafficking, and provides trainings on victim assistance for shelter providers.

IOM also provides support in policy development to the COPTIP by supporting the review of the current National Action Plan (NAP) and the elaboration of the new NAP 2019-2023.

IDF SUPPORTS IMMIGRATION TRAINING ACADEMY



Ugandan officers graduate at the academy



South Sudanese and Ugandan Immigration officers during a training at the academy

IMMIGRATION TRAINING ACADEMY TAKES OFF



ABOVE: Immigration officers demonstrate their newly-acquired skills on graduation day.

BOTTOM: Ugandan Immigration Officers and facilitators after a training at the academy.

When IOM Uganda Chief of Mission Ali Abdi spoke at the launch of the Immigration Training Academy in April 2017, he committed that IOM would not simply abandon the new institution.

Indeed IOM has continued to support Uganda's first-ever specialized immigration institution navigate the teething problems of taking off.

In 2018, IOM Uganda implemented a project titled "Support to Uganda's Immigration Training Academy", which helped the academy take its first steps.

The USD 80,000 project was financed by the IOM Development Fund, which seeks to build migration management capacities worldwide.

The academy was built by IOM with funding from the Government of Japan and was formally handed over to the Government of Uganda in 2017. But the IDF project came in handy, supporting the academy to develop an institutional strategy,

which will help the institution's operationalization.

In May, a consultant supported the academy to develop an Immigration Training Catalogue, which outlines all the courses that are available at the facility.

The year 2018 further saw the academy promote regional collaboration by facilitating meetings and trainings between border officials from Uganda and South Sudan, which strengthened operational partnerships between both countries in the area of border management.

With support from IOM Uganda and IOM South Sudan, the academy hosted 31 South Sudanese and Ugandan border officials (including five women) for a five-day training on One-Stop Border Posts (OSBP), EAC Free Movement Protocol and Trafficking in Persons (TiP).

IDF funding also enabled 15 Ugandan immigration officers to receive a training on Imposter Recognition, timely in an era awash with forgeries.

These were just some of the trainings that the academy hosted in 2018, thanks to the operationalizing support from IDF, and the passion and enterprise of officials of the Directorate of Citizenship and Immigration Control.

But the longest training was a three-month foundation course for 22 Immigration officers (including 15 women). This culminated in a colourful pass-out ceremony at the academy in August, presided over by Internal Affairs Minister Jeje Odongo.



ASSISTED VOLUNTARY RETURN AND REINTEGRATION



ABOVE AND RIGHT: Two of the Ugandans who were supported to return home, pictured in their businesses in Kampala

IOM provided assistance and protection services to vulnerable migrants including; victims of trafficking, stranded migrants, and unaccompanied minors, to return and reintegrate in their homes of origin. During the reporting period, 80 international migrant cases, 76% of whom were young women, benefited from IOM's assistance.

In coordination with IOM missions, Consular missions, Government and non-governmental partners in Uganda and the destination countries, migrants were provided direct assistance to return and socio-economic reintegration support. Assistance was individualized, based on

identified needs, and included; pre-departure assistance (information counselling, pre-departure medical assistance) and transitional assistance (i.e. shelter, medical, counselling and family tracing). Beneficiaries were supported with small business start-ups ranging from small-scale poultry and piggery farming, salons, retail businesses (clothing, groceries, etc), among others, thereby supporting the economic empowerment and self-reliance of these beneficiaries. Ninety-five per cent of the assisted migrants were Ugandans returning home from Asia, other African countries, Turkey and other European countries, among others.



European Union Delegation Head of Governance and Human Rights, Thomas Tiedemann (Centre) talks to youths supported by the EU-funded SCoS project, during the launch of the Beera Clear campaign.



State Minister for local Government Jenipher Namuyangu (R) visits the IOM Uganda stall on UN Day 2018.



IOM Uganda staff cuddle a baby on a visit to Sanyu Babies Home in Kampala on International Migrants Day 2018.



IOM Uganda UN Volunteer with the WASH team, Yuji Kawai, works with hygiene promoters in Palorinya, Moyo district.



IOM and other UN staff participate in wellness exercises on UN Day, 24 October 2018, in Kololo Kampala.



Police officers and civilians during a town hall meeting organized by the SCoS project in Katwe, Kampala.

Community Stabilization: STRENGTHENING SOCIAL COHESION AND STABILITY IN SLUM POPULATIONS



28 MILLION

Radio Listeners reached with
Beera Clear messages



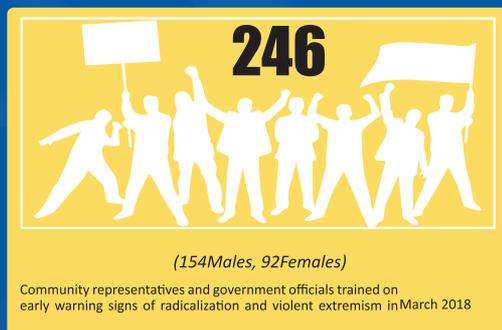
16 Schools trained on Prevention
of violent Extremism using
Music, dance and drama



417

(227 Males, 190 Females)

New Students enrolled for Vocational Training



123

(128 Males, 43 Females)

Police officers trained on human
rights and community policing,
including ToTs



519

Youths approved to receive
Small business start-up kits



242

(106 Males and 136 Females)

Vocational Students Graduated

SLUMS PROJECT ENGAGES YOUTH FOR PEACE



Youth receive business start-up items from the SSCoS project.

The year 2018 marked the mid-point of the Strengthening Social Cohesion and Stability in Slum Populations (SSCoS) project in Kampala. The project is implemented by IOM in four slum areas of Bwaise, Katwe, Kisenyi and Kabalagala.

Running from August 2016 through February 2020, the SSCoS project is wholly funded by the European Union with 4.3 million euros.

SSCoS uses a multi-level, multi-dimensional approach to address the key drivers of radicalization and violent extremism in informal settlements. Approaches include vocational training; socioeconomic support to vulnerable young men and women; engaging key government agencies that serve slum communities; building capacity of local civil society; and organizing anti-radicalization messaging campaigns.

The year in review witnessed progress in all the result areas. But a key highlight was the Beera Clear campaign, a multi-layered initiative designed to urge the communities to make 'clear' or right choices and stand against violence.

Hereunder, some 480 students in 16 schools were trained in using music dance, and drama



SSCoS-trained officers train their colleagues in Jinja

to propagate messages against radicalization and violence. With help from Theatre Factory, the young people staged MDD productions in competition between schools, with the finals at the National Theatre. All four finalists got prizes such as computers, printers, local musical instruments and trophies. The engagement of so many teachers and students is expected to have a cascading effect and increase the reach of the message.

"Beera clear" was officially launched in September 2018, followed by a season of messages on radio and TV, which reached an estimated 28,080,000 listeners and 850,740 viewers across the country.



Students perform during the MDD gala at the National Theatre, using drama against radicalization.

Vocational Training

Under IOM's main implementing partner AFFCAD (Action for Fundamental Change and Development), the project launched a second vocational training centre in Kisenyi, to add to the one in Bwaise. This new centre has 175 (64 Female, 111 Male) students training in Automotive Electricals, catering, leather design as well as welding and fabrication. During the year, a total of 417 (227 M, 190F) new students enrolled for vocational training, while 242 graduated from the Bwaise-based AFFCAD Business and Vocational Institute, 56 per cent of them female.

Small Business Start-ups and Cooperatives

By the end of the year, 519 youths and women had received approvals for their Small business start-up proposals, with purchase and distribution of in-kind support items ongoing. At least 259 youths received high-quality training in financial management and entrepreneurship. In a bid to develop the culture of saving and increase access to affordable credit for the poor, the project supported three cooperatives in Bwaise and Kisenyi to register, with a total of 228 members. The cooperatives are now lending money to their members, with impressive repayment rates.

The Police and the People

The SSCoS project continued with the work done in 2017 – to build the capacity of the police to conduct their work in ways that both detect and prevent radicalization, and to improve

SUMMARY OF SSCoS RESULT AREAS

1. Increased knowledge of conflict drivers in slum communities of Kampala;
2. Strengthened capacity of Action for Fundamental Change and Development (AFFCAD) to combat political, social and economic drivers of conflict and radicalization, provide socio-economic opportunities for youth in slum communities and to monitor the delivery of social services.
3. Increased capacity and resilience of most at-risk communities to resist radicalization and combat violent extremism.
4. Increased capacity among relevant security agencies in Kampala to combat radicalization and violent extremism and to respond to human rights abuses in line with international best practices.
5. Relevant Government authorities in the education, health; urban infrastructure and JLOS sectors have the capacity to provide conflict-sensitive and non-discriminatory public services.
6. Vulnerable youth in target communities access employment opportunities and financial services.

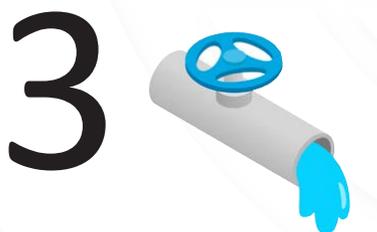
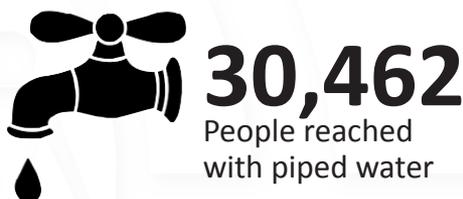
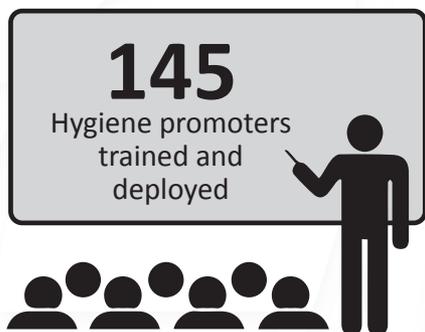
relations between the people and the Police.

An international consultant conducted a Training of Trainers for 30 police officers, and a refresher for a separate 18 police officers. Eventually, the trained trainers conducted cascaded training for a total of 123 for fellow officers in Kampala, Busoga and Greater Masaka regions.

The project also facilitated three town hall meetings in Katwe, Kabalagala and Kisenyi in 2018, with at least 736 community members attending. More town halls are planned in 2019 in all the project sites.

In addition, the project set up early warning centres at three police stations (Old Kampala, Kawempe and Kabalagala), each of the centres was equipped with a Toll-free line 0800279650 and furniture. The centres, expected to become operational in early 2019, are a “soft” mechanism to strengthen ties between law enforcers and communities rather than in sophisticated ICT systems to ensure sustainability.

HUMANITARIAN EMERGENCIES



Large-scale piped water
systems



10,698
Household latrines



6,572
Hygiene kits distributed

EU, CERF FUND BOLD EMERGENCY RESPONSE



A girl fetches water from IOM's new Bidibidi water system, funded by European Union humanitarian aid as IOM Chief of Mission Ali Abdi (3rd Left) and Yumbe district officials (1st and 2nd Left) and IOM staff visit.

Throughout 2018, the more than 1.2 million refugees in Uganda continued to exert tremendous pressure on the humanitarian community. Early in the year, a fresh surge in the number of refugees arrived from the Democratic Republic of the Congo. And while the numbers from South Sudan slowed down, arrivals continued.

As part of the humanitarian response, IOM completed or initiated four projects worth EUR 5.5 million (USD 6.1 M) in the year 2018.

These interventions were funded by the European Union's Directorate-General for European Civil Protection and Humanitarian Aid Operations (ECHO) and the United Nations Central Emergency Response Fund (CERF).

IOM supported Water, Sanitation and Hygiene (WASH) services for refugees and host communities, protection for vulnerable asylum seekers, as well as boosting the capacity of government agencies serving refugees and migrants and the host community.

Life-saving, Rapid Response

At the height of the Congolese refugee influx to Uganda in early 2018, IOM implemented the

CERF Rapid Response project titled "Emergency Sanitation, Hygiene and Protection Assistance to Congolese Refugees". IOM was able to provide emergency WASH assistance to a total of 38,091 beneficiaries in sites such as Nsonga, Sebagoro and Kyangwali refugee settlement in what is now Kikuube district, Western Uganda.

From January to July 2018, IOM contributed to reducing the risk of spread of WASH-related diseases among refugee and host communities. This was done through boosting access to safe sanitation at both household and institutional levels for a total of 20,495 individuals, as well as through campaigns to promote hygiene best practices. More than 30,000 people were reached through hygiene promotion campaigns and 1,500 hygiene kits were distributed to new arrivals along with aqua-tabs.

Furthermore, new arrivals received improved protection assistance from immigration and government officials and the Uganda Police Force's Marine Unit. IOM supported the Police Marines in the safe transportation of 456 most vulnerable refugees stranded on isolated landing sites along Lake Albert to locations where they could be picked up by UNHCR. The Police also received 400 lifejackets and 50 night-vision torches.



A scene from the boat evacuation on Lake Albert during the CERF-funded Congolese refugee response in western Uganda.



IOM staff get a newborn baby from an evacuation boat on Lake Albert during the Congolese refugee response in western Uganda.

Besides deploying a Search and Rescue Specialist in the relocation of stranded refugees, IOM also conducted refresher training for marine Police force at Sebagoro. Furthermore IOM conducted two rapid pre-deployment trainings

in Humanitarian Border Management in coordination with UNHCR for a total of 92 participants. Among the participants were border and immigration officials, as well as community leaders. Rights of refugees and asylum seekers



Officers of the Marine Unit of the Uganda Police Force doing a rescue drill on Lake Albert. This was part of an IOM training under the CERF-funded Congolese refugee response.

and identification and assistance of Victims of Trafficking (VoTs), were also part of the training.

European Union WASH Service Delivery Project Completed

Beginning April 2017, with support of European Union humanitarian aid, IOM implemented a major project in Yumbe and Moyo districts in West Nile, and this was successfully completed in 2018. IOM's safe water, sanitation and hygiene promotion intervention benefitted 92,118 beneficiaries with 30,462 benefitting from safe sustainable water supply systems and 61,656 from sanitation and hygiene in both settlements.

Hygiene promoters received training from IOM, its implementation partner with technical support from both District local governments of Moyo and Yumbe specifically the district health inspectorate and water offices. Overall, IOM contributed to reduction of costly and unsustainable water trucking from 41 percent at baseline to 9.78 percent through provision of sustainable solar-powered water systems from both Bidibidi and Palorinya. During this period,

sanitation and hygiene were improved specifically through directly engaging both refugees and host community population through demand response approaches including Community-Led Total Sanitation (CLTS) methods. IOM's KAP (knowledge, attitudes and practices) survey would later reveal that the incidence of diarrhoea improved from 16.4 percent at baseline to 4.76 percent.

European Union, CERF in Fresh Drive to Strengthen WASH Services

Besides the above projects, European Union humanitarian aid and CERF again intervened with fresh support for IOM's work in Palorinya, Kyaka II and Kyangwali settlements.

European Union humanitarian aid provided 2 million euros for the project titled "Strengthening WASH Service Delivery for Refugees and Host Communities in Uganda". CERF provided USD 1.1 million for "Strengthening Emergency WASH Service Delivery in Palorinya and Kyaka Settlements". The two projects complemented each other to help close gaps identified by sector



ABOVE: The then Settlement Commandant of Bidibidi in Yumbe district signs a visitors' book at the new water system funded by European Union humanitarian aid, which started supplying water in 2018.

RIGHT: Part of the EU-funded Decentralized Fecal Sludge Treatment facility in Bidibidi.

partners.

The CERF Underfunded Emergencies project, from March to December 2018, targeted a total 58,018 refugees and 1,565 host community members in Palorinya and Kyaka II refugee settlements with water, sanitation and hygiene interventions. In Palorinya and Kyaka II refugee settlements, IOM built water supply systems to deliver safe piped water to 18,778 people, in addition to constructing 4 institutional latrine blocks and 1,200 household latrines (including 200 for persons with special needs) and distributing hygiene kits to 1,000 households. As a result, the IOM WASH intervention contributed to reducing the water-related diseases among refugees in both settlements. In Kyaka II settlement, the high rate of watery diarrhoea among children under five years old declined from 64.81% in March 2018 to 24.16% by December 2018; and the watery diarrhoea cases in Palorinya settlement (both children and adults) reduced from 684 in March 2018 to 251 by December 2018.

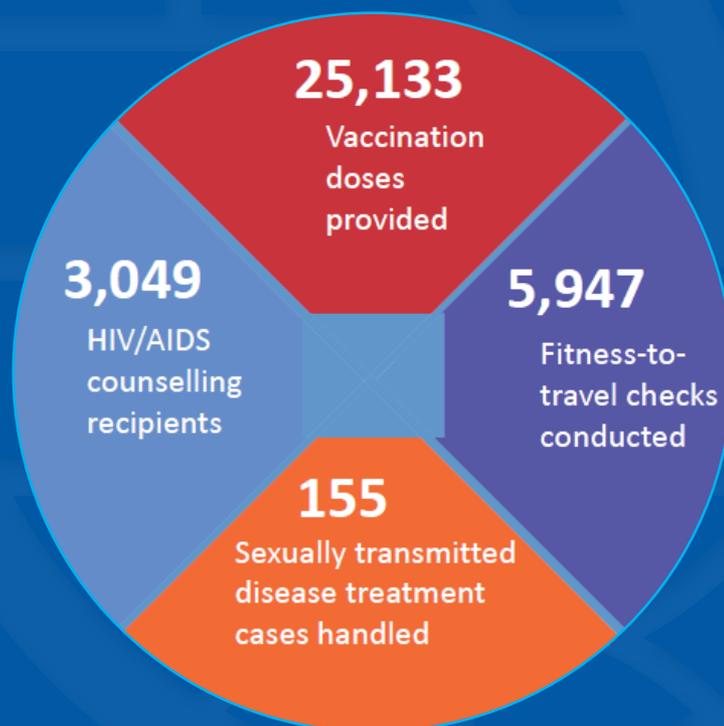
Meanwhile, as fresh arrivals from South Sudan and the Democratic Republic of the Congo (DRC) joined the old caseload of refugees in

Kyaka and Kyangwali, the increased strain on the limited resources in settlements and host communities had predictable consequences. These included outbreak of water and sanitation-related diseases, with at least 1,000 cholera cases and 33 death cases in Kyaka II and Kyangwali refugee settlements.

Backed by European Union humanitarian aid, IOM worked with other partners to improve the WASH environment in Kyaka, Kyangwali and underserved Palorinya settlements and host communities. As of December 2018, IOM had completed 16 institutional latrine blocks at schools and health centers, besides constructing waste management facilities at markets and health centers. In addition, at least 2,500 refugee households in the three settlements were supported with tools and materials to build their own latrines. IOM further supported the training of hygiene promoters and distributed hygiene kits (including soap, water containers and sanitary pads) to 2,000 refugee households across the settlements.

The project continued into 2019, with piped water system expected to come on board both in Kyaka and Kyangwali in the first half of the year.

MIGRATION HEALTH ASSESSMENT CENTRE



MHAC, WORKING TO KEEP MIGRATION SAFE



A participant speaks during a regional Training of Trainers on the IOM Expanded Vaccination Programme and Physical Examination Skills, hosted by IOM Uganda at Kampala Sheraton hotel .

Uganda is one of the 70 countries where IOM is operating health assessment and travel advisory programmes, which feed into the broader objective of ensuring that migration is safe, orderly and humane.

IOM Uganda's Migration Health Assessment Center (MHAC), located in Naguru, Kampala, provides a complete health assessment for migrants and refugees travelling abroad permanently or temporarily prior to their departure. The menus of these services differ according to the protocols defined by destination countries. The services can include fitness-to-travel checks, vaccination, treatment of sexually transmitted diseases and tuberculosis, pre-departure presumptive treatment and medical escorts.

In Uganda, the majority of migrants and refugees travel to countries such as the United States of America, Canada, Australia, Norway, Sweden, Netherlands, etc.

The year 2018 was a busy one for MHAC, and witnessed expansion in the range of services directly available.

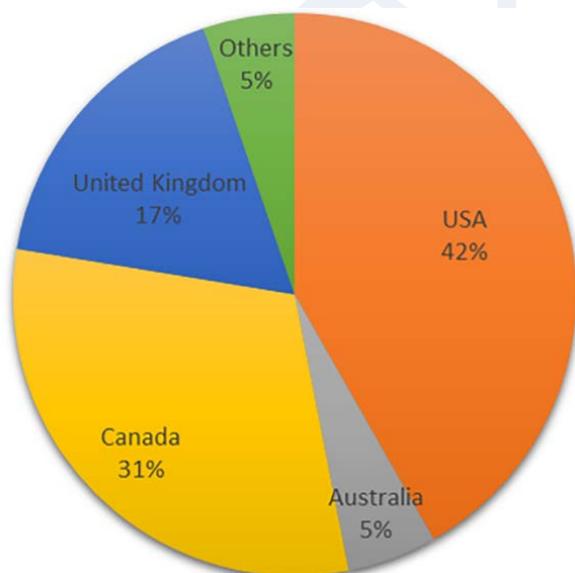
A fully-fledged radiology unit has since been established, with a new Digital Radiology system X-ray machine installed in October.

IOM's laboratory can now also perform the IGRA test and GeneXpert test for Tuberculosis during pre-departure screening.

MHAC is also developing the mental health component of health assessment using the Mental Health Assessment tools developed by War Survivors Institute, an organization based in the United States of America.

The new tools allow MHAC to strengthen the mental health screening skills of its panel physicians and to develop specifically-tailored screening tools and protocols for detection and classification of mental disorders and emotional

Destinations of MHAC clients in 2018



Projected Destination / Requesting entity	Number of persons
USA	4518
Australia	557
Canada	3316
New Zealand	41
United Kingdom	1855
UNHCR cases (MAF)	190
Others (including DNA)	337
Total	10814

distress (MDED). MHAC can now also perform the enzyme-linked immunosorbent assay test, also called ELISA which detects and measures HIV antibodies and antigens in the blood.

In response to the Ebola outbreak in Democratic Republic of the Congo in August 2018, IOM implemented a three-week pre-departure surveillance for the refugees residing in the settlements. The refugees were brought to the IOM Transit Centre in Kampala for 21 days for surveillance. During the review period, IOM conducted Ebola surveillance for 2,348 refugees.

Training

IOM Uganda conducted additional tests for malaria for USA-bound refugees, upon request from CDC. During a health assessment mission in Hoima in Feb and March, MHAC performed additional testing (PCR test) for malaria for 803 individuals. The test was to help to identify the cause of splenomegaly (enlarging of the spleen) detected among the Congolese refugees

IOM Uganda continues to build the capacity of its staff to deliver a top-class service. In May, MHAC hosted a regional Training of Trainers course in "IOM Expanded Vaccination Program and Physical Examination Skills". This was organized

by CDC and IOM in partnership with the USA-based public health agency John Snow, Inc. (JSI) and University of Minnesota (UMN). The activity comprised Comprehensive training program for IOM doctors and nurses participating in USRAP health activities. At least 30 participants from Africa and beyond attended.

In December, MHAC also hosted 15 participants from various missions in the region for a Refugee Physical Examination Training. The aim was to develop Master trainers on refugee physical examination (PE) and to facilitate and enhance CALS trainings on medical emergency and aviation medicine, including identifying refugees with Significant Medical Conditions (SMC).

Americares Donates

During the course of the year, MHAC and the Migration Health Promotion unit received a donation of medical supplies to support cholera responses. These supplies came from the USA charity Americares. They included sodium chloride solution, lactated ringers injections and infant feeding tubes. The supplies that were donated to Kampala Capital City Authority (KCCA) and health facilities in refugee settlement in Kyaka.

MIGRATION HEALTH PROMOTION

16,822

Condoms distributed
in Kaabong and Moro-
to districts (incl. 285
female condoms).

1,595

Persons reached with
HIV/SRHR messages
through local drama

1,180

Persons received
HIV Counselling and
Testing Services.

41

Health workers and peer
educators were trained
on adolescent-friendly
and migration-sensitive
service delivery.



IOM
UN MIGRATION

PROMOTING GOOD HEALTH IN KARAMOJA



A Moonlight Health outreach in Camp Nyanshi in Karita sub county, Amudat district.

IOM is a member of the Joint United Nations Program of Support on AIDS in Uganda (JUPSA), whose third programming cycle is strategically focused on Karamoja. Along with 10 other UN agencies, IOM is co-implementing the Karamoja United Nations HIV Programme (KARUNA-HP), for the period 2016- 2020. This initiative is funded by Irish Aid.

KARUNA-HP has the overarching objective of reducing new infections among 10-24-year-olds (especially adolescent girls) by at least 70 per cent by 2021. Hereunder, IOM pursues two broad goals in hard-to-reach areas in Kaabong, Amudat and Moroto districts: influencing behavior change as well as improving access to – and uptake of – quality healthcare services.

Overall, IOM activities under KARUNA-HP increased access to HIV/SRHR services using integrated health outreach services model to deliver services in remote mining communities and cross-border sites in Amudat, Moroto and Kaabong districts.

The service delivery model adopted two complementary approaches, including outreaches in the community held at central locations in the community that can be accessed, and the moonlight outreaches at pre-arranged hotspot locations including bars. Both approaches involve a basic package of HIV/SRHR services.

IN CONTEXT

Although migration ultimately benefits society, if not properly managed, it can generate socioeconomic inequalities, gender imbalances and increased health vulnerability of migrants and host communities.

The IOM Health Promotion programme aims at improving access to health services for migrants and other mobile populations and supporting access to high-quality health services for neglected populations, including host communities.

In 2018, a total of 3,901 migrants and host community members were reached. 1,180 persons were provided with HIV Testing Services (HTS) including counselling. To support the continuum of care, 11 persons who tested positive were referred to nearby health facilities for treatment, care and support.

To further enhance the prevention of STIs, a total of 16,577 male condoms and 285 female condoms were distributed to communities in Kaabong and Moroto districts.

To improve the quality of care services to migrants, 21 health workers and 20 peer educators were trained in collaboration with district health teams on adolescent-friendly and migration-sensitive



Peer educators posing after a training in Kosiroi Health Centre, Moroto district.

service delivery. The trainings were conducted with the aim of strengthening capacity to provide quality health care services and to strengthen community referral. Moreover, the trained health workers and peer educators are expected to mentor their colleagues in the facility or the community in the case of peer educator.

To promote district-led programming and ownership, the district technical staff were supported to conduct monitoring and on-site support supervision in the sub-counties of implementation.

Social Behavioral Change Communication (SBCC) campaigns targeting young people through dialogue meetings reached 487 key populations and migrants. These included miners, truck drivers, sex workers, boda boda riders, adolescents and other young people, who were sensitized on HIV prevention, SRHR and social cultural issues. The key topics discussed in the dialogues included basic facts and myths about HIV/AIDS, the sociocultural factors that predispose people to HIV and the sexual network and correct ways of using condoms.

Owing to its ability to transmit information to a wide audience including hard-to-reach populations, IOM implemented a community radio program targeting most-at-risk population groups (MARPs) as an entry point for communication on SRH/HIV/GBV. IOM aired a radio drama series 'The Desire' in the districts of Moroto and Kaabong districts. The program, aired in Ngakarimojong language, addressed issues related to and that influence HIV and SRHR services in Karamoja region.

During the course of the year, IOM also supported local drama groups that reached a total of 1,595 people, nearly half of them women/girls. The drama groups support the mobilization and sensitize communities on socio-cultural and economic barriers that hinder HIV preventive behavior and constrain service uptake in the mining areas and cross-border points.



A Health outreach in Loyoro sub-county, Kaabong district.

MOVEMENT AND RESETTLEMENT OPERATIONS



6,496
Refugees and migrants
moved to other
countries



28%
children or
infants



50%
are women



68%
are Congolese



39%
to USA

RESETTLEMENT OPERATIONS IN 2018



IOM staff at the Transit Centre doing final checks before taking refugees to Entebbe airport enroute to resettlement abroad.

Although resettlement applies to barely 1 per cent of refugees, it is one of the durable solutions to the challenges of countries having very large numbers of vulnerable refugees. Globally, IOM works to relocate accepted refugees from asylum countries to countries willing to offer them permanent residence. IOM also handles self-paying migrants with the approval of the destination countries.

In Uganda, IOM collaborates with UNHCR and Office of Prime Minister in the resettlement process. IOM provides logistical support for the selection, medical assessment, cultural orientation and movement of refugees and migrants.

The Resettlement Operations unit is based at Plot 47 Bukoto Crescent and has some operations at its Transit Centre on Nakasero road. But the

THE RESETTLEMENT PROCESS

1. UNHCR identifies and recommends refugee cases to interested countries for consideration for resettlement.
2. The countries select the refugees they are interested in and notify UNHCR and IOM.
3. The countries send schedule to IOM to organize interviews.
4. IOM organizes selection missions where officials from the accepting country interview the refugees.
5. Refugees who pass the selection stage undergo medical assessment by IOM's Migration Health Assessment staff. Meanwhile, refugees' travel documents are being processed.
6. The accepting country sends IOM the list of refugees who are ready for resettlement.
7. IOM makes all the necessary logistical and medical arrangements leading to departure from the airport, including cultural orientation, vaccinations and treatments, booking plane tickets, transportation to the airport and check-in, and – in some cases – medical escorts up to the destination, where the receiving country takes over.



HAPPY: Departing refugees at the Transit Centre in Kampala.

unit also has field teams in the settlements of Kyangwali (Kikuube District), Kyaka II (Kyegegwa) and Nakivale (Isingiro). While most resettled refugees come from the three settlements, an increasing number of urban refugees in Kampala is being considered.

In 2018, the number of refugees and migrants resettled from Uganda to third countries continued to grow, with the United States of America, Canada, Sweden, Norway and Australia the major destinations.

IOM moved at least 6,494 refugees and migrants, including minors, elderly, medical cases and persons with disabilities for resettlement and family reunification.

The 2018 figure reflects a 30 per cent increase on 2017. The refugees resettled from Uganda mostly originated from Democratic Republic of the Congo, Burundi, Eritrea, Ethiopia, Rwanda and South Sudan.

Destinations of Refugees from Uganda, 2018

Destination Country	Male	Female	Total
USA	1,277	1,235	2,512
Canada	833	776	1,609
Sweden	385	460	845
Norway	341	366	707
Australia	216	201	417
Netherlands	74	95	169
United Kingdom	59	56	115
Others	65	57	122
	3,250	3,246	6,496

IOM Uganda Resettlement Trends

Destination Country	2016	2017	2018
USA	6,093	2,740	2,512
Canada	1,022	935	1,609
Sweden	577	740	845
Norway	26	37	707
Australia	261	201	417
Netherlands	7	4	169
United Kingdom	51	99	115
Others	160	255	122

‘I am now complete’: Story of a father, three daughters, and reunification



PORTRAITS OF DELIGHT: Stéphane Kalala with his daughters

By Abubaker Mayemba

Three little girls, 9-year-old Eunice Neema, 7-year-old Bless Riziki and 4-year-old Plenty Buya, surrounded by their care-takers, calmly sit down on the couch at the IOM office in Kampala. With their newly braided hair, they are dressed to the nines as they are going to meet the director of IOM. At least, that's what they think...

While waiting, they receive a phone call from their father, Stéphane Kalala, who lives in Belgium. He originates from the Democratic Republic of the Congo and has been recognized as a refugee in Belgium. « How are you? » he asks Neema in French. « I'm fine. » « It has been a long time. » « Yes. » When Bless' turn comes, a few teardrops appear. They haven't seen each other for three years now. Kalala starts singing and soon tears start rolling down the cheeks of the three sisters.

But the voice grows closer, and while the two younger girls concentrate on the image of their father on the phone screen, Neema suddenly understands. On realizing that it's not a dream

and dad is not calling from Belgium, Neema can't hide her excitement anymore. She sprints from the waiting chair, jumps high into the arms of her father, who readily embraces her, tight. As if to dispel his doubts, Kalala lowers his child to stare into her pearly eyes, before lifting her into his arms one more time.

For close to a minute, Kalala embraces his firstborn child and perhaps due to what he and his daughters have endured, he starts crying.

"I told you, no? On the boat, I told you, no? That I will come and look for you and your sisters," Kalala tells Neema in French.

Holding all three, he sways between sobs and laughs and says; "I am now completely complete because I have got my daughters. My princesses are with me now."

For three years, he has prayed and longed for this day when his daughters will be able to join him in Belgium. His daughters, back in The Democratic Republic of the Congo, went with their mother to Uganda (their parents are separated) in order



The Kalalas with IOM staffer Benson Tumuheki at Entebbe Airport, shortly before departure.

to launch the family reunification procedure to Belgium. The three files have been lodged to the Belgian Consulate in September 2017. The day after, Kalala contacted IOM Brussels for the first time to inquire about the assistance it provides. He already had his mind set on an idea: to welcome his daughters in person, but not in an ordinary way. He wanted to prepare the surprise of their lives.

However, a few months later, as their mother had to return to the DRC and to choose the best for her daughters' future, they were entrusted to an aunt and then to a host family, in Keevina, Nsambya.

For four months, this family took care of the girls even though they had never met their parents. Kalala describes them as a "super family." Since he had the host family's contact number, he frequently called his daughters, telling them that he was doing all he could to bring them to Belgium. Advised by the non-profit organization Aide Aux Personnes Déplacées in Belgium, he obtained a loan from Credal to finance travel expenses and contacted IOM for the logistical organization of the latter. He also obtained the agreement from the Belgian embassy to issue a laissez-passer for

his daughters.

"Every time I called, I told them [daughters] to be patient because one day they would join me in Belgium. I had submitted my request to the Belgian government," he recalls.

But not even the phone calls could fill the vacuum of not having their parents with them. Neema had the hardest task of consoling Buya every time she threw tantrums asking where her parents were. Even when the younger ones fell sick, it was Neema who was always sent to the drug shop to buy medicines.

Even though Kalala seemed to have thought of everything, there were still some obstacles to overcome. Kalala and his daughters were asked to undergo DNA tests to prove filiation. All tests proved that the three girls were indeed Kalala's daughters. But when they finally received the visa approval in May 2018, one issue was still standing: they had no legal status in the country, they were neither asylum seekers nor refugees in Uganda and the travel documents they had used to enter Uganda had long expired.

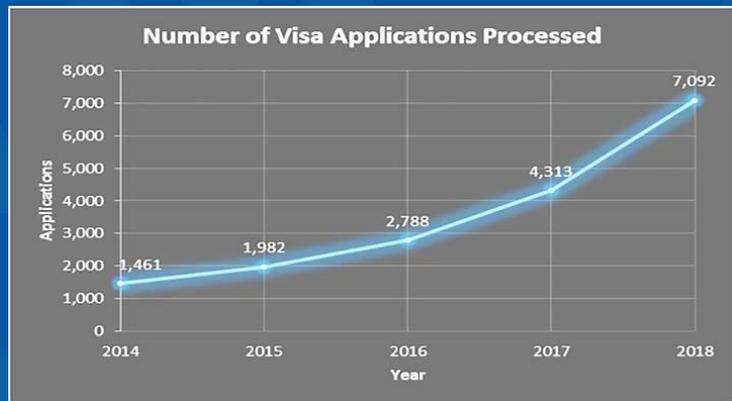
IOM Uganda, in coordination with IOM Brussels, guided both the father and the host family to solve this problem. Once done, IOM Uganda collected their laissez-passers at the Belgian embassy. Then, arrangements were made for the father to collect the girls from Uganda. Indeed, no airline will accept the girls on board without a responsible adult, the youngest being aged less than 5 years at the time.

Kalala arrived in the country without the children's knowledge, and when they came into the IOM Uganda offices on 2 July, it was such an emotional reunion.

After a health assessment at the Transit Centre to ensure they are fit to travel, the family was briefed on the itinerary and pre-departure formalities, and by 4AM, father and daughters were on the plane to Brussels via Istanbul, Turkey. .

"I want to see my daughters improve in a certain form of education," says Kalala. "I will now be safe in Belgium with them and I will see my daughters grow up."

CANADA VISA APPLICATION CENTRE



VISA CENTRE SET TO EXPAND ITS OPERATIONS



Canada Minister Ahmed D Hussen (Left) meets CANVAC staff Annet Akello and Proscovia Aber (Right). To his left is IOM Chief of Mission Ali Abdi and Canadian diplomat Erin Brouse, then based in Tanzania.

In August 2018, Canada's Minister for Immigration, Refugees and Citizenship, Ahmed D Hussen, visited the Canada Visa Application Centre (CANVAC) in Kampala, where he hailed IOM as a key partner, and praised its global work.

That visit capped a busy year that saw CANVAC register its highest number of processed applications yet. Minister Hussen, who migrated to Canada as a teenager, has widely spoken about the contribution migrants make to Canada. And here in Kampala, he praised IOM's partnership with his government, a partnership that takes thousands of refugees and migrants to Canada each year. He cited the four months between November 2015 and February 2016, when IOM moved 40,000 Syrian refugees into Canada.

"IOM is a very key partner and now we are very happy you are part of the UN family. Now we've the two global compacts, one on refugees, the other on migrants; IOM continues to play a key role," Minister Hussen said. "As the Global Compact is making its way towards finalization in December, we look forward to making sure that we implement all its recommendations, with the help of IOM."

Visa Application Centres, which offer visa support for governments and migrants worldwide, are part of IOM's work in the area of migration management.

For six years now, IOM Uganda has been operating CANVAC, located in the Kampala city suburb of Kololo, in partnership with VFS Global. Under this arrangement, CANVAC provides administrative support to visa applicants, but the visa decision-making process rests entirely with the Canadian Visa Officers based at the High Commission in Tanzania.

Thanks to a simplified application process and an easy access to information, the visa application number has been steadily growing, reaching 7,092 in 2018, which is an increase of 64% compared to 2017.

According to plans announced in 2018, Canada plans to admit more than a million migrants from 2019 to 2021, about 15 per cent of them being refugees and protected persons. Not surprisingly, in the first half of 2019, CANVAC is looking to expand its operations.

IOM Uganda Staff Join Hands to Save Baby Maria



Alex with his wife Racheal and Baby Maria.

**By Abubaker Mayemba
& Marion Dehier**

It is 5pm on a warm Friday 24 August 2018 and at this Indian hospital, Racheal Katusiime is tormented by bouts of emotions – between hope and despair, between courage and fear – her little daughter Maria between life and death. Doctors here at Narayan Hospital in Bangalore said the complicated heart operation would last four hours; but Baby Maria Alinda has been in the operating theatre for seven hours and her mother starts to cry.

Panicking, the mother of two darts to the reception desks and asks what is happening. Surgery not yet finished, she is told. This only makes her more anxious. “They said four hours,” she thinks, as the phone rings.

It’s her husband, Alex Satade Alinaitwe. A cleaner with Norema Services Uganda Limited, Alex tries to reassure Racheal that

their second child will be fine. It doesn’t work. Instead, Racheal is thinking about how to break the bad news to all the people who contributed money for this life-saving operation. Those people include dozens of IOM Uganda staff, who donated various amounts of money and time to try and save their cleaner’s baby.

How it started

Alex recalls that at the beginning of 2018, they took Baby Alinda, who also has Down syndrome, to Nsambya Hospital for a regular checkup. Then 6 months old, Alinda had started developing some difficulty in breathing and was growing tinier, paler and weaker. They were referred to Uganda Heart Institute (UHI) at Mulago hospital, where the devastating news was later broken.

“We were told that Alinda’s heart had three holes, one big and two small. They advised that she be operated abroad before she made a year to save her life,” says Racheal, who worked

as an office administrator with a local company. But where could this young couple get the estimated USD10,000 for the operation? Already they were struggling just to keep up with the basic hospital bills. Moreover, Racheal had had to quit her job to care for her ailing daughter. Alinda's five-year-old brother Travis, was sent to live with his grandmother.

Still, inspired by stories of heart patients for whom the public raised money, Alex and Racheal started appealing to family, friends and well-wishers for money. Despite the generous contributions the target of UGX 36 million seemed like a pipe dream. And time was running out. Day by day, Baby Alinda appeared to be getting worse as she approached her first birthday, the deadline for the surgery. She was now sweating profusely all the time, and her breathing was more difficult.

Eventually an employee of UHI advised the family to contact Action for Disadvantaged People (ACDIPE), a non-governmental organization that supports children who are at risk, abandoned, abused and vulnerable. The organization sent Alinda's medical results to a hospital in India which confirmed that the little girl's heart would be operated at USD 10,000 (about UGX 37 million) in September. Of that money, ACDIPE promised to contribute USD 4,000 (about UGX 15 million) if the parents could raise the balance of

USD 6,000 (about UGX 22 million). That was a huge motivation. But still 22 million seemed an impossibility. Yet, somehow, the impossible became possible. Indeed now, thousands of miles away in Bangalore, Racheal is thinking about those frantic fundraising efforts that enabled mother and baby to travel. Suddenly, at about 8PM, the theatre doors squeak open. Alinda is wheeled out and Racheal springs to her feet. But what she sees scares her even more: a motionless little thing with clear tubes running from her nose and plasters all over her chest. Before Racheal has fully digested the picture, the nurses wheel the baby into the intensive care unit (ICU), leaving a near-traumatized mother. "I couldn't believe my eyes. It was too much and I couldn't hold it, I called him [Alex] crying," Racheal recalls. Despite Alex comforting her, Racheal is not even sure the baby is alive.

IOM Staff Fundraiser

As Racheal was struggling in India, Alex was in Kampala in constant contact with the IOM Uganda Staff Association Committee (SAC). In July, after the couple asking for contributions and having no hope for more from all friends, family and well-wishers, a desperate Alex had approached IOM Uganda staff and management for help. The response was phenomenal. A message on the SAC WhatsApp group attracted outpouring of sympathy and ideas.



Alex receives an advance of UGX 7.5 million from his employers of NOREMA, while IOM Uganda Procurement and Logistics Officer Henry Ojiambo witnesses.



Baby Maria, now back at home

Soon, donations started to trickle in; a car-wash fundraiser was planned for 01 September, and appeal posters were sent to IOM staff and to other UN agencies.

“We planned to hold a car wash so that all well-wishers would come. We even opened up a bank account for the baby and availed mobile money lines because Alinda needed this operation urgently,” says Warda Karama, a Senior Operations Assistant at IOM Uganda.

But then, Alinda suddenly deteriorated. Doctors warned the operation now needed to be carried out in August (not September) if the baby was to be saved. The carwash fundraiser was abandoned. Encouraged by the Chief of Mission, SAC members hunted for money the way politicians hunt for votes. They went desk to desk and sent emails and WhatsApp messages calling for emergency contributions. One of the most touching donations was Shs 20,000 from a six-year old girl who heard Maria’s story and decided to empty her saving box. In all, the IOM ‘family’ managed to collect about UGX 11 million (USD 3,000). Part of the money was used for a return ticket to Bangalore with Emirates, the airline putting oxygen on the flight in case Alinda’s condition

deteriorated. The rest was used as upkeep by Racheal to care for her daughter during their stay in India. “This was a special show of solidarity by the staff, including the Chief of Mission, to help the unfortunate baby,” says SAC President Peter Nzabanita. “Some staff donated more than once; others appealed to their friends and family members to also chip in.” In addition, IOM management engaged Norema (Alex’s employers), and the company generously advanced Alex UGX 7.5 million to help get all the required funds in place. Now, every month the company deducts UGX 100,000 from Alex’s salary to help repay the debt. That leaves him on the edge, but Alex has regained his smile.

Happy Return

Baby Alinda and her mother spent one month and two weeks in India. The first two weeks were spent at Narayan Hospital in Bangalore, where doctors monitored the baby’s condition before and after surgery.

After one week in intensive care, Baby Alinda started improving. Soon, they moved into a nearby hotel, from where Racheal took Baby Alinda for monitoring and dressing.

Despite the unhealed scar on her chest, Baby Alinda continued to improve, and she started to breath naturally and sit on her own, until doctors cleared her to return to Uganda.

On 02 October 2018, Racheal and Baby Alinda landed at Entebbe Airport. Alex was among the family members that welcomed them. He recalls that before his daughter underwent surgery, she was too weak to sit. Five months later, she is doing fine, and has started calling Tata (father).

Racheal, who holds a diploma in customs clearing and forwarding, is now hunting for a job, confident that her daughter will do just fine.

On Monday 26 November, Alinda celebrated her first birthday, something the parents could not have imagined three months earlier.

“She had a favour because whoever we told about her condition would bring something at least,” says Alex. “If it wasn’t for the favour of God and people, we alone weren’t going to manage this. Whoever contributed to saving Alinda’s life, we just say ‘thank you and May God help you.’”

In Pursuit of the Sustainable Development Goals



International Organization for Migration (IOM)

The UN Migration Agency

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