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Challenges of Realising the Human Right to Adequate Food of Slum Dwellers of Banda Parish-Kampala City

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Dedication

This thesis is dedicated to my fiancée Akurut Rose for having endured the challenges of a long distance relationship while at the same time encouraging me to concentrate and finish my studies.

Abstract

International law recognises the right of everyone to adequate food and the fundamental freedom from hunger and malnutrition. The general objectives of this study were to determine whether the diet of slum dwellers of Banda Parish outside Kampala city is adequate in reference to the normative content of the human right to adequate food (RtF), and to identify and discuss existing constraints to attaining food adequacy, availability and accessibility in Banda Parish.

Two methodologies, qualitative content analysis and the survey method were used for this study. Content analysis involved a review of selected national and international documents on the RtF. The survey comprised two categories of respondents (i.e. rights holders and duty bearers). Rights holders were 265 children (0-60 months) and 265 caretakers selected from clusters (zones) using the EPI (Expanded Programme for Immunization) method. Duty bearers were purposively selected representatives of institutions considered as having the mandate of promoting realization of the RtF in Banda Parish. Institutions included Nakawa Division Council (4 respondents), Uganda Human Rights Commission (UHRC) (1 respondent), and Uganda National Bureau of Standards (UNBS) (1 respondent). For all respondents, quantitative and or qualitative data collected depended on selected outcome, structural and process indicators that were used for the survey.

Results show that the RtF in Uganda can be inferred from objectives XIV and XXII of the 1995 Constitution. This right could further be justiciable under article 45 of the same Constitution. The adequacy of diets as indicated by dietary diversity in Banda Parish seems inadequate and the level of child malnutrition seems unacceptably high. There are no clear recourse mechanisms for violations of the RtF, and rights holders seem grossly unaware of the provisions of this right. Capacity development seems therefore needed. Albeit existent formal legislation on food safety, food sold in Banda Parish seems unsafe. General hygiene and sanitation appears to be poor and access to tapped water is limited. A large percentage of household heads are underemployed and with a low education. Nakawa Division Council appears to be constrained due to inadequate funding to improve on the general welfare of people in Banda Parish. It can thus be concluded that RtF is not reached in Nakawa Division, and resources used for addressing existing constraints to attain the RtF in Banda Parish seems inadequate.

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Abbreviations

AUC	Akershus University College
CESCR	Committee on Economic Social and Cultural Rights
CRC	Convention on the Rights of the Child
DD	Dietary Diversity
FAO	United Nations Food and Agricultural Organisation
GC12	General Comment Number 12
HH	Household
HRAP	Human Rights Approach
IBSA	Indicators, Benchmarks, Scoping And Assessment
ICESCR	International Covenant on Economic Social and Cultural Rights
IDDS	Individual dietary Diversity Scores
KCC	Kampala City Council
KYU	Kyambogo University
MDG	Millennium Development Goal
RtF	Human Right to Adequate Food
SPSS	Statistical Package for Social Scientists
UBOS	Uganda Bureau of Standards
UDHR	Universal Declaration of Human Rights
UDHS	Uganda Demographic and Health Survey
UFNC	Uganda Food and Nutrition Council
UFNP	Uganda Food and Nutrition Policy
UFNS	Uganda Food and Nutrition Strategy
UHRC	Uganda Human Rights Commission
UN	United Nations
UNBS	Uganda National Bureau of Standards

UNDP	United Nations Development Programme
VG	Voluntary Guidelines to Support the Progressive Realisation of the Right to Adequate Food in the Context of National Food Security
WHO	World Health Organization
WFS	World Food Summit

1. Introduction

Limited access to a nutritionally adequate diet, safe drinking water and sanitation are issues part of an adequate standard of living fostering human development. This is part of article 11 of the International Covenant on Economic, Social and Cultural Rights (ICESCR).¹

International law thus recognizes the right of everyone to adequate food² and the fundamental freedom to be free from hunger, which also is of crucial importance for the enjoyment of all human rights. Under international law, States³ are obliged to ensure progressive realisation of the right to adequate food (RtF) but the obligation to ensure fundamental freedom from hunger takes immediate effect and is not subject to the standard of progressive realisation (CESCR, 1999).

Uganda ratified the International Covenant on Economic, Social and Cultural Rights (ICESCR) in 1987, and thus recognises the RtF as a human right (MAAIF and MOH, 2005). Realisation of this right is however still far from reality for a number of people around the country. According to the 2006 Uganda Demographic and Health Survey (UDHS) statistics published by the Uganda Bureau of Statistics (UBOS) in 2007, 38% of children under five years were stunted, 15% were severely stunted, 6% wasted, and 16% were underweight. These statistics though not very different from the 2003-2008 UNICEF nutrition statistics for Uganda⁴, were not disaggregated to Parish level and may thus not be representative of the actual nutrition situation in smaller geographical units. Lack of disaggregated nutrition data may make targeting of the most vulnerable individuals difficult for any nutritional interventions aimed at realization of these individuals enjoyment of the RtF.

To realize the RtF in this context according to Eide (2002) refers to, "The cultural and social domain and entails the evolution and creation of conditions under which the normative standards are implemented and respected in practice". It may also require a wide range of measures by the State, including the establishment and proper functioning of courts, law

¹ The International Covenant on Economic, Social and Cultural Rights deals more comprehensively than any other instrument with these rights. Pursuant to article 11.1 of the Covenant, States parties recognize "the right of everyone to an adequate standard of living for himself and his family, including adequate food, clothing and housing, and to the continuous improvement of living conditions."

² ICESCR <http://www2.ohchr.org/english/law/cescr.htm>. Article 11.2 recognizes that more immediate and urgent steps may be needed to ensure "the fundamental right to freedom from hunger and malnutrition". Accessed on 10th August, 2009.

³ By the word "States" is meant here any country that has ratified the ICESCR.

⁴ UNICEF Uganda nutrition statistics. http://www.unicef.org/infobycountry/uganda_statistics.html#64. Accessed on 15th February, 2010.

enforcement agencies, welfare institutions and others. For all this to happen, Eide further contends that there is need for acceptance of human rights among the public, knowledge of their own rights, respect for the rights of other members of society, and economic co-operation in order to contribute to the common welfare. All this should be in addition to adoption of international measures of co-operation and assistance (ibid.).

This research was carried out with an aim of identifying challenges faced by slum dwellers of Banda Parish in attaining adequate food⁵ with an assumption that breaching of State obligations in ensuring progressive realisation of the RtF makes it difficult for vulnerable groups to realise this right and be free from hunger and malnutrition. As part of the survey work for this thesis, the researcher fully recognises that realisation of the RtF is dependent on parallel measures necessary to ensure the enjoyment of such rights as those related to health, education, water, social security, and to civil and political rights. This stems from the fact that all human rights are universal, indivisible, interdependent and interrelated. Focus is however primarily put on aspects of the RtF.

1.2 Background

1.2.1 Emergency of Slums in Kampala City

The emergency of slums in Kampala City⁶ is described as having been gradual and sustained over a long period of time (Rugadya, 2007). Some of the factors highlighted to be behind this emergency include a failure of past Kampala Structure Plans to cater for the development of African neighbourhoods and areas, rapid urbanisation and growth of the urban population, poverty, low incomes and the land tenure system in Kampala City. Figures 1 and 2 respectively show the map of Kampala showing the different divisions and the distribution of slums in Kampala City.

⁵ See particularly General Comment No 12, article 9 where the adequate diet is mentioned.

⁶ For detailed information of how slums emerged up in Kampala see the report titled, "Situation Analysis of Informal Settlements in Kampala" (Rugadya, 2007) at <http://www.unhabitat.org/pmss/listItemDetails.aspx?publicationID=2335>. Accessed 4th April, 2010.

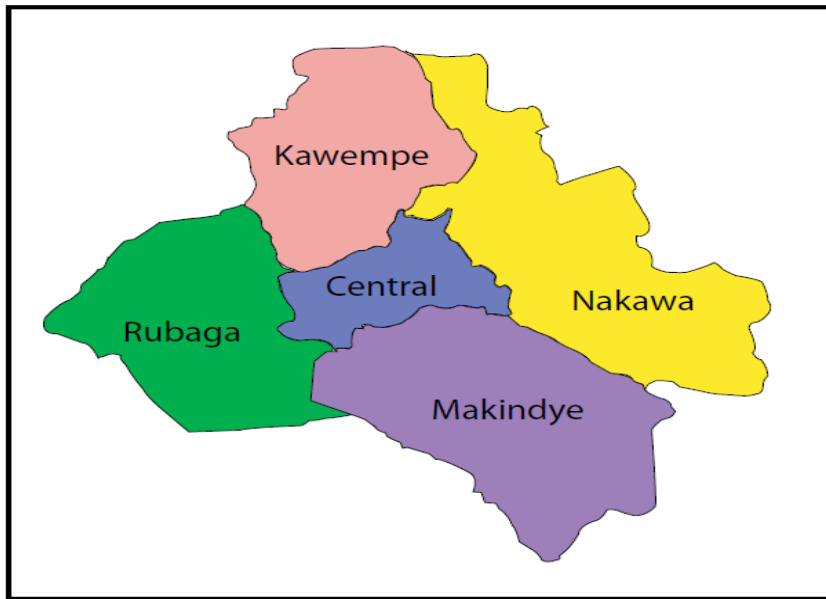


Figure 1 Map of Kampala Showing the different Divisions of the City

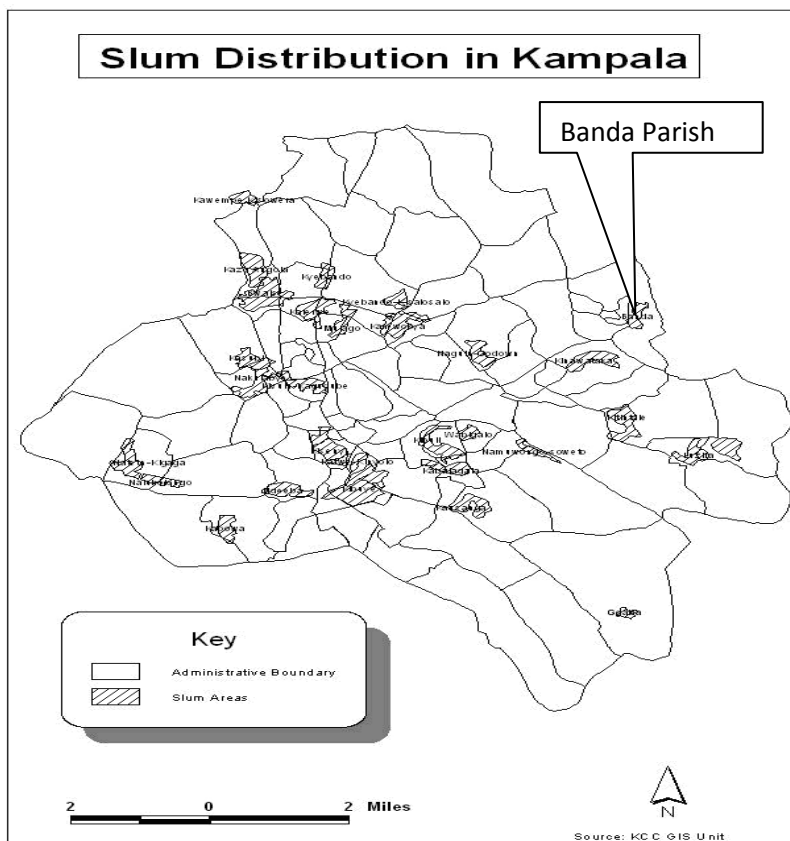


Figure 2 Map showing the distribution of slums in Kampala City

Source Figure 1 and 2: Rugadya, 2007

1.2.2 Description of study area

To improve on the understanding of challenges faced by Kampala slum dwellers in realising the RtF and to make the focus strong, a slum area that is part of Kampala city in Uganda⁷ - namely Banda Parish was selected. Banda Parish is one of the 23 parishes that make up Nakawa Division; which too is one of the five divisions making up Kampala City (Figure 1). All parish planning, resource mobilization and service delivery to the people of Banda is carried out by Nakawa City Division Council. Nakawa Division is a recognised local authority at the level of a sub county under the Uganda Local Governments Act 1997 and is mandated to undertake public activities in the division (Kampala City council, 2009). The Parish has 12 zones with a mixed population of students (university and secondary school students) and non students (other dwellers). The non student population comprised the population of interest for this survey because non students more typically represented people that mainly stay in Banda Parish even when students are on holiday. The population of Banda Parish has mixed ethnic and religious backgrounds and varies over the year; the density of people is higher during schooling days and lower when students are on holiday. The Uganda Population and Housing Census of (UBOS, 2002) reported the total population of Banda as being 12,267 with 3,312 HHs and an average HH size of 3.7 persons. Though no current official population statistics exist, it is probable that the population figures are currently higher than previously stated. While some areas have relatively well built residential places with seemingly good sanitation, the majority of the non student population stay in semi-permanent structures characterised with poor hygiene and sanitation. Most of the health services in this area are provided by private individuals operating small clinics that specialise in selling drugs and the treatment of minor ailments.

There is one local food market in the area serving as a central market from which people can purchase their food supplies, additionally a number of small shops selling various commodities are also in place. A large section of the population is reported to eat food from informal areas operated by highly mobile food vendors who are not medically examined and certified to sell food. Consumption of pre-packed vended water (in polythene bags) is also

⁷ Hundreds of thousands of people live in the expansive slums of Uganda's capital city, Kampala, most of whom migrated from their rural homes to escape poverty, only to encounter hardship, squalor and exposure to disease (<http://www.irinnews.org/Report.aspx?ReportId=39624>). Accessed on 23rd March, 2010.

Any other slum area could have been chosen but Banda was selected for ease of coordination of the research process it being that the parish is in close proximity to Kyambogo University where the researcher and the selected research team were based.

reported to be common though the water is said to be grossly contaminated and unsafe (Kampala City council, 2009).

By the time of the survey, the level of malnutrition in Banda could only be predicted based on the reported nutrition status of children less than five years in Kampala (Table 1). This was due to lack of nutrition data disaggregated to the Parish level in Kampala. Never the less, the level of malnutrition as shown in Table 1 is indicative of the non realisation of the RtF for certain segments of the population in Kampala. This is in line with the findings that slum dwellers of Kampala City in Uganda normally fall in the lowest wealth quintiles and are thus more likely to be faced with higher rates of hunger and malnutrition (UBOS, 2007). General Comment 12 (GC 12) however explicitly obliges every State to ensure for everyone under its jurisdiction access to the minimum level of adequate food which is safe and sustainable to ensure freedom from hunger and malnutrition (CESCR, 1999).

Table 1 Nutrition Status of Children Under Five Years in Kampala-Uganda

Height for Age		Weight for Height		Weight for Age		Total Number
% below -3SD	% below -2SD	% below -3SD	% below -2SD	% below -3SD	% below -2SD	
8.1	22.1	3.7	7.4	2.6	10.3	130

Source: UBOS (2007). Uganda Demographic and Health Survey

1.2.3 Normative content of the right to adequate food

The RtF is a human right of all people. The definition says that it is important “to have regular, permanent and unrestricted access, either directly or by means of financial purchases, to quantitatively and qualitatively adequate and sufficient food corresponding to the cultural traditions of people to which the consumer belongs, and which ensures a physical and mental, individual and collective fulfilling and dignified life free of fear” (CESCR, 1999).

Furthermore, the GC 12 says that “The RtF is realized when every man, woman and child, alone or in community with others, have physical and economic access at all times to adequate food or means for its procurement. The right to adequate food shall therefore not be interpreted in a narrow or restrictive sense which equates it with a minimum package of calories, proteins and other specific nutrients. The right to adequate food will have to be realized progressively” (CESCR, 1999).

Internationally, the right to adequate food is recognised under article 25⁸ of the Universal Declaration of Human Rights (UDHR) (United Nations, 1948), and article 11 of the International Covenant on Economic, Social and Cultural Rights (ICESCR). It is also addressed indirectly in article 24.2c of the Convention on the Rights of the Child (CRC). Further, at the World Food Summit (WFS) of 1996 all Heads of State and Government or their representatives “reaffirm[ed] the right of everyone to have access to safe and nutritious food, consistent with the right to adequate food and the fundamental right of everyone to be free from hunger” (FAO, 1996). Article 11.1 of the ICESCR urges States parties to recognize “the right of everyone to an adequate standard of living for himself and his family, including adequate food, clothing and housing, and to the continuous improvement of living conditions” while article 11.2 states that more immediate and urgent steps may be needed to ensure “the fundamental right to freedom from hunger and malnutrition” (United Nations, 1966)⁹.

Achieving adequate food and consequently a nutritionally adequate diet is still a challenge for various vulnerable groups in society partly because of violation(s) of these people’s right to adequate food. In discussing the identification of individuals whose right to food is being violated, Kracht (2005) asks, “Who are the people whose right to food is violated or not realised, where are they concentrated, why are they deprived of their right and what are the dynamics of that deprivation?”

FAO developed a generic classification of people considered particularly vulnerable to food insecurity into six vulnerable groups that include: urban marginal populations, people in at risk social groups, some or all members of low-income households (HHs) within vulnerable livelihoods, migrant workers and their families, dependent people living alone or in low-income HHs with large family size, and victims of war (FAO, 1999; Kracht, 2005).

According to this classification, residents of Banda Parish could be classified either as urban marginal populations or members of low-income HH within vulnerable livelihoods.

⁸ Article 25 paragraph 1 of the UDHR states that, “Everyone has the right to a standard of living adequate for the health and well-being of himself and of his family, including food, clothing, housing and medical care and necessary social services, and the right to security in the event of unemployment, sickness, disability, widowhood, old age or other lack of livelihood in circumstances beyond his control” (United Nations, 1948).

⁹ <http://www2.ohchr.org/english/law/cescr.htm>. Accessed on 10th August, 2009.

1.3 Understanding the RtF using a Human Rights-Based Approach (HRBA)

In a human rights-based approach, human rights are used as a guide to better understand the relationship between individuals and groups with valid claims (rights holders) and State and non-State actors with correlative obligations (duty-bearers). It identifies rights-holders and their claims and corresponding duty-bearers and their obligations. States that have ratified human rights conventions recognising the importance of the RtF as a central factor for livelihood improvement; and all countries are urged to take steps to the maximum of their available resources to see that this right is realised¹⁰. A HRBA could be used in capacity development activities, towards strengthening the capacities of rights-holders to make their claims, and of duty-bearers to meet their obligations (UNICEF, 2004). A HRBA further stresses that some duty bearers live in the community while others live outside, often having roles at higher levels of the society. This is why a HRBA should focus not only on HHs but also fully recognise the relationship between the HHs and higher levels of society. A HRBA should also propose ways and tools by which abolishing hunger is achieved. In doing this, an application of human rights principles must be integral to the process (FAO, 2004). This aspect of the HRBA was used in this thesis in examining gaps that were identified as hindering realisation of the RtF by the rights holders of Banda Parish vis-à-vis roles played by selected duty bearers concerned with promotion of the RtF in this area.

1.4 Objective of the study

This research aimed at identifying challenges faced by Banda slum dwellers in attaining adequate food¹¹. A major assumption of the study was that breaching of State obligations in ensuring progressive realisation of the RtF makes it difficult for vulnerable groups to realise the RtF and be free from hunger and malnutrition.

1.4.1 General objective

1. To determine whether the diet of Banda Parish slum dwellers is adequate in reference to the core content¹² of the right to adequate food, and

¹⁰ Article 2 of the ICESCR and article 4 of the Convention on the Rights of the Child (CRC).

¹¹ See particularly General Comment No 12, article 9 where the adequate diet is mentioned.

¹² General comment No 12 (GC 12) of the committee on Economic, Social and Cultural rights (CESCR) considers the core content of the right to adequate food as implying: The availability of food in a quantity and quality sufficient to satisfy the dietary needs of individuals, free from adverse substances, and acceptable within a given culture; The accessibility of such food in ways that are sustainable and that do not interfere with the enjoyment of other human rights (CESCR, 1999).

2. To identify and discuss existing constraints to attaining food adequacy, availability and accessibility in Banda Parish; factors herein considered necessary for effective implementation and respect of the normative content of the RtF.

1.4.2 Specific objectives

- 1.1 To assess the diversity of diets ¹³ eaten in Banda Parish.
- 1.2 To determine the nutritional status of children (06-60 months) and their adult care takers in Banda Parish.
- 2.1 To identify whether appropriate legal, regulatory and institutional structures considered necessary for the realisation of the RtF are available and accessible to the people of Banda Parish.
- 2.2 To assess for awareness of the right to food, employment status and level of education of rights holders in Banda Parish.
- 2.3 To assess the availability and accessibility to safe food¹⁴, water, health services, and the state of hygiene and sanitation in Banda Parish.¹⁵
- 2.4 To identify whether existing processes considered necessary for the realisation of the RtF in Banda Parish adhere to key human rights principles.

2. The Right to Adequate Food framework in Uganda¹⁶

Uganda ratified the ICESCR and the Convention on the Rights of the Child (CRC) which are the most relevant treaties to this work; having ratified these instruments the country is expected to implement provisions on the RtF as articulated in these instruments.

¹³ This is important because dietary diversity is often used as a proxy measure for dietary adequacy. Ruel (2002) defines dietary diversity as the number of different food groups consumed over a given reference period. A reference period of 24 hours was used; using a recall period of 24 hours is less subject to recall error, less cumbersome for the respondent and also conforms to the recall time period used in many other dietary diversity studies (FAO, 2008).

¹⁴ By safe food it is meant that “food is free from adverse substances, this is achieved through a range of protective measures by both public and private means to prevent contamination of food stuffs through adulteration and/or through bad environmental hygiene or inappropriate handling...care must also be taken to identify and avoid or destroy naturally occurring toxins” (CESCR, 1999).

¹⁵ All these influence food safety and nutritional status and should thus always be considered.

¹⁶ See also section 4.1 for more a detailed analysis of the RtF framework in Uganda.

2.1. The Right to Adequate Food in Uganda’s Constitution

Within the context of Uganda’s national constitution, the RtF as according to Makubuya (2003) may only be inferred from the country’s State objectives (objectives XIV¹⁷ and XXII¹⁸)-that are hortatory and non-binding-as well as from other human rights provisions related this right. It should be noted however that objectives XIV and XXII do not define the State’s (hereby State Party to ICESCR) obligations in terms of respect, protect and fulfil as specified in the GC 12 (CESCR, 1999) on the RtF. However article 45 in chapter four of the Constitution of the Republic of Uganda states that, “The rights, duties, declarations and guarantees relating to the fundamental and other human rights and freedoms specifically mentioned in this Chapter shall not be regarded as excluding others not specifically mentioned” (RoU, 1995).

2.2. Uganda Food and Nutrition Policy (UFNP)

Of particular importance regarding the RtF in Uganda is the Uganda Food and Nutrition Policy. The policy has as its overall goal to ensure, “food security and adequate nutrition for all the people in Uganda, for their health as well as their social and economic well-being” (MAAIF and MOH, 2003). It recognises food and nutrition as human rights and expressly cites national and international human rights law as its basis in addition to accepting and endorsing all the component of the RtF (MAAIF and MOH, 2003; Omara, 2007). To ensure dietary adequacy, section 3 of the UFNP focuses on improving food supply and accessibility, food processing and preservation, food storage, marketing and distribution, food standards and quality control.

The UFNP also identifies the Uganda National Bureau of Standards (UNBS) as the body mandated to set, monitor and implement food standards in the country. A Uganda food and nutrition Act was envisioned to be enacted to ensure implementation of the UFNP and provide for the establishment of the Uganda Food and Nutrition Council (UFNC) as a corporate body to guide and coordinate all food and nutrition activities in the country

¹⁷ The State shall endeavour to fulfil the fundamental rights of all Ugandans to social justice and economic development and shall, in particular, ensure that—(b) all Ugandans enjoy rights and opportunities and access to education, health services, clean and safe water, work, decent shelter, adequate clothing, food security and pension and retirement benefits (RoU, 1995).

¹⁸ The State shall: take appropriate steps to encourage people to grow and store adequate food; establish national food reserves; and encourage and promote proper nutrition through mass education and other appropriate means in order to build a healthy State (ibid.).

(MAAIF and MOH, 2003). This Act was not yet enacted by the time of the research though the process was ongoing.

2.3 Obligations and violations of the right to adequate food

Violations of the RtF¹⁹ are said to occur either through the direct action of States or other entities insufficiently regulated by States. While only States are parties to the Covenant and are thus ultimately accountable for compliance with it, all members of society - individuals, families, local communities, non-governmental organizations, civil society organizations, as well as the private business sector have responsibilities in the realization of RtF (CESCR, 1999).

Paragraph 15 of GC12 elucidates the three types of States obligations²⁰, the obligation to respect, to protect and to fulfil. The obligation to fulfil incorporates both an obligation to facilitate and an obligation to provide. The obligation to protect is probably the most important aspect of the RtF, “the state not as provider, but as protector” (Oshaug et al. 1994). As stated in GC 12 (CESCR, 1999), “The obligation to *respect* existing access to adequate food requires States parties not to take any measures that result in preventing such access. The obligation to *protect* requires measures by the State to ensure that enterprises or individuals do not deprive individuals of their access to adequate food. The obligation to *fulfil (facilitate)* means the State must pro-actively engage in activities intended to strengthen people's access to and utilization of resources and means to ensure their livelihood, including food security. Finally, whenever an individual or group is unable, for reasons beyond their control, to enjoy the RtF by the means at their disposal, States have the obligation to *fulfil (provide)* that right directly. This obligation also applies for persons who are victims of natural or other disasters.” In this study, these obligations were used as tools in the development of question lists and questionnaires, and later on in analysis, discussion and conclusion.

¹⁹ See also paragraphs 17 to 20 of General Comment 12(CESCR, 1999).

²⁰ See General Comment 12 (CESCR, 1999) for further elucidation of State obligations on the right to adequate food.

2.4 Approaches in implementing measures for the realization of the RtF

The Voluntary Guidelines to Support the Progressive Realisation of the Right to Adequate Food in the Context of National Food Security (VG)²¹ (adopted by the member countries in the FAO council in 2004) propose a range of guidelines to States in their implementation of the progressive realization of the RtF in the context of national food security (FAO, 2004). Guideline 9 of the VG mandates States to take measures to educate consumers about safe food storage, handling and utilization of food within the HH and to collect and disseminate information to the public regarding food-borne diseases and food safety matters (FAO, 2004).

The same guidelines call upon States to recognize that food is a vital part of an individual's culture, and they (States) are encouraged to take into account individuals' practices, customs and traditions on matters related to food (FAO, 2004).

Of equal importance, the VG call upon States to establish functional market systems as well as putting in place legislation, policies, procedures, regulatory and other institutions in place to ensure non-discriminatory access to markets and to prevent uncompetitive practices in markets (ibid.). To achieve dietary adequacy, the CESCR calls for measures to be taken to maintain, adapt or strengthen dietary diversity and appropriate consumption and feeding patterns, including breastfeeding, while ensuring that changes in availability and access to food supply as a minimum do not negatively affect dietary composition and intake (CESCR, 1999). This too is re-echoed in VG 10.1 (FAO, 2004).

3. Methodology

Achieving the objectives of this thesis required the use of two methodologies; one (qualitative content analysis) on assessing the RtF framework in Uganda and the other for the overall survey. The former method was driven by the need to carry out a fairly careful assessment of existing legislation on the RtF framework in Uganda based upon which survey data would be interpreted.

3.1 Qualitative content analysis

As described by Bryman (2008), qualitative content analysis comprises a searching out of underlying themes in the materials to be analysed without detailed specification of the

²¹ Food security exists when all people, at all times, have physical and economic access to sufficient, safe and nutritious food to meet their dietary needs and food preferences for an active and healthy life. The four pillars of food security are availability, stability of supply, access and utilization (FAO, 2004). This Guideline was developed by UN member countries under the umbrella of the Committee on World Food Security (CFS) of FAO.

process through which themes are extracted. While reviewing the selected documents, the researcher used a hermeneutic²² approach of being sensitive to the context within which documents were produced. This approach allowed for the comparison and interpretation of survey data (as regards to the RtF situation in the study area) to the existent RtF legislation in Uganda vis-à-vis international obligations on the RtF.

The selection of documents for content analysis was guided by the following principles: authenticity (documents had to be genuine and of unquestionable origin) and meaning (content of selected documents had to be clear and comprehensible). National documents reviewed for assessing the RtF framework in Uganda were the 1995 Constitution of the Republic of Uganda, the Uganda National Food and Nutrition Strategy (UFNS) (MAAIF and MOH, 2005), and the Uganda Food and Nutrition Policy (UFNP) of (MAAIF and MOH, 2003). Internationally, the analysis was guided by provisions on the RtF in the ICESCR, GC 12, UDHR and the VG.

3.2 Survey description and design

The survey was cross-sectional in nature using cluster sampling to select a representative sample of respondents (rights holders) from Banda Parish. Purposive sampling was used in selecting ministries/institutions hereby considered duty bearers who should promote the realisation of the RtF. Data collected for this survey was based on selected outcome, structural and process indicators (Appendix A) using both qualitative and quantitative methods.

3.3 Quantitative and qualitative methods for data collection

Given the multidisciplinary nature and diversity of indicators used for this research, the survey used both qualitative and quantitative methods to collect the required survey data. Quantitative methods were used for anthropometric measurements on children (aged 6-60 months) and adult respondents while qualitative methods and related techniques were used in obtaining data whose interpretation was intended to generate a broader understanding of the existing constraints to realising the RtF in Banda Parish. Following are the different tools and techniques that were used in data collection.

²² Hermeneutics refers to an approach that was originally devised in relation to the understanding or interpretation of texts and of theological texts in particular. The central idea behind hermeneutics is that the analyst of a text must seek to bring out the meanings of a text from the perspective of its author. This then entails attention to the social and historical context within which the text was produced (Bryman, 2008).

3.3.1 Directly administered questionnaires

Directly administered questionnaires (by interview) with mainly closed-ended questions were used for obtaining data from selected respondents. It is argued that use of closed-ended questions ensures that all subjects have the same frame of reference (Donald et al., 1996). To formulate closed ended questions that were used in the survey questionnaire, an open ended format of the questionnaire was initially tested on 20 respondents randomly selected from Banda Parish. While a single questionnaire format was used for all rights holders, context specific questionnaires were used for organisations/institutions (herein considered duty bearers) so as to adequately capture their responsibilities in promoting realisation of the RtF. Appendixes C, D, and E represent the different questionnaires that were used for this research.

3.3.2 Interviews

To understand the direct or indirect mechanisms instituted by Nakawa Division Council in protecting and promoting realisation of the RtF in Banda Parish, one individual from the Department of Environment and Public Health²³ was interviewed using a standardized open-ended interview guide²⁴ (Appendix F). The questions asked for the interview were developed after identifying the different forms of violations of the RtF in Banda parish and also after establishing existing mechanisms and legislation regarding realisation of this right in the Country.

3.3.3 Field observations

A field observation of the local food market in Banda Parish was done to assess the conditions under which food is sold. Additionally, visits to some water sources were also done. This was deemed useful in providing additional useful qualitative information for assessing the quality and or safety of food and water in this area. Use of a photo camera to take photos was found very useful for this task.

²³ The initial plan was to interview at least four heads of department (one head from either department). Management at the division however advised that only one representative from the environment and public health section is interviewed as it is in this section that issues relating to food and health handled.

²⁴ In a standardized open-ended interview, the exact wording and sequence of questions are determined in advance and all interviewees are asked the same basic questions in the same order. Questions are also worded in a completely open-ended format (Mikkelsen, 2005).

3.4 Sampling Criterion

3.4.1 Categories of Respondents selected for the study

There were two categories of respondents selected for the study; rights holders and duty bearers. Rights holders were selected using cluster sampling while duty bearers were purposively selected.

➤ Rights holders

All residents of Banda parish were considered rights holders; however priority was for the non student population as these more precisely represent the local population in Banda parish²⁵. For purposes of sampling, households (HH)²⁶ were considered the measurement units while one knowledgeable HH member (mainly a mother²⁷) acted as a respondent²⁸ for the selected household. For any selected HH, anthropometric measurements were taken for one child (aged 6-60 months) and the respective HH informant. All other survey data including data on dietary assessment was obtained from the selected HH informant.

➤ Duty bearers

Selected respondents for the category of duty bearers were individuals purposively selected on the basis that they were informative and in positions of authority in their respective institutions/ministries (herein considered the duty bearers). The initial number of respondents under this category and their respective institutions that was planned to be interviewed and the actual number that the researcher was able to interview is as summarised in Table 3 below.

²⁵ Refer also to section 1.2.2 of this report for a general description of the population in Banda parish.

²⁶ The term 'household' where ever used refers to a group of people who live and eat their meals together for at least 6 of the 12 months preceding the interview.

²⁷ Preference for the mother was based on the on an understanding that women are said to be responsible for food planning and preparation for the household (FANTA, 2008).

²⁸ For this survey, measurements units refer to the persons to whom the survey data refer, while respondents are the persons from whom the information is obtained (Magnani, 1997).

Table 2 Selected ministries/institutions (duty bearers) and number of respondents

Ministry/institution	Number of respondents planned	Number of respondents interviewed
The Uganda National Bureau of Standards (UNBS)	1	0
Uganda Human Rights Commission (UHRC)	1	1
Nakawa Division Council	4	1
Total number of respondents	6	2

3.4.2 Sample size of rights holders and number of Households to be contacted

Sample size

The sample size of rights holders was computed basing on the prevalence of child undernutrition (indicator 2 in Appendix A). Other indicators could have been used in determining the sample size but undernutrition was thought to be more demanding in terms of sample size. This was in agreement with the criterion suggested by Magnani (1997) that in a survey where the number of indicators to be measured is large; the sample size of respondents should be computed basing on the indicator that is more demanding in terms of sample size. In so doing he argues, “Requirements of all the other indicators will be satisfied” (Magnani, 1997).

By computation, the sample size of rights holders must have comprised at least 241 children; this figure was computed using ENA for SMART²⁹ a free nutrition software program basing on population statistics for Banda Parish as reported in the Uganda Population and Housing Census of 2002 and the Kampala City Council-Nakawa City Division Development Plan 2009/10-2010/11 where the total population of Banda was reported to be 12,267 with 3,312 HHs and an average HH size of 3.7 people. A 5% level of precision was used for calculating the number of respondents with a default design effect³⁰ value of 1 and a 20% estimated prevalence of child undernutrition.

²⁹ENA (Emergency Nutrition Assessment) for SMART (Standardized Monitoring Assessment Relief Transitions) is a free nutrition computer software available at <http://www.nutrisurvey.de/ena/ena.html>. Accessed 9th/August/2009.

³⁰ The design effect provides a correction for the loss of sampling efficiency resulting from the use of cluster sampling instead of simple random sampling. A default design effect of 2 is commonly used in

Number of Households to be contacted

Guidelines for nutrition survey methodology in Uganda (MOH, 2009) suggest that all eligible children in a selected household should be selected for a nutrition survey in Uganda. This study however, only selected one eligible child per HH. The selection of one eligible child per household is said to reduce sampling errors that may arise due to within HH clustering when all eligible children in a household are selected (Magnani, 1997). One informant (adult care taker of the child) was also selected per child; this translated to a total of 241 adult respondents. Since only one eligible child and one adult were to be selected per household, 241 households were needed to be contacted for the survey. Had all eligible children been measured in each household, then the number of households would have been calculated basing on the reported average household size of children (06-60 months) in Banda Parish (MOH, 2009).

It is always unlikely that all HH's would have a child of the required age category, to counteract this and to allow for any other contingencies such as non-responses, inability to measure children in selected households or having to exclude data from analysis during "data cleaning", the sample size of rights holders and hence number of households to be visited was increased by 10% to 265. Increasing the sample size by 10% is also recommended by the Uganda Guidelines for Nutrition Survey methodology (MOH, 2009).

3.4.3 Sampling procedure for selecting clusters and respective households

Cluster samples

There was no available up-to-date population register³¹ for Banda Parish and households were not organised in a way that could enable for their selection systematically. The lack of these could thus not allow for use of either simple random or systematic sampling³² methods given the limited time for carrying out the survey. Cluster sampling was thus used in selecting zones that were visited for the survey and only 5 of the 12 zones in Banda Parish

anthropometry (Magnani, 1997). However a design effect of 1 was used, this was based on Part A of the Guidelines on Nutritional Survey Methodology in Uganda (MOH, 2009) which advise using a design effect of 1 when the population is homogenous and or when the population is usually found within a small area, such as a sub-county.

³¹ The only available population statistics for Banda were those published in The Uganda Population and Housing Census 2002. Never the less population data was not disaggregated to zone level, as such it was not possible to tell from this data which zone in Banda had more people.

³² For one to be able to use either simple random sampling or systematic sampling there is need for prior up to date knowledge of the exact number of households; these households should also all be arranged in an orderly way (Magnani 1997;MOH, 2009).

were selected. Selected zones were those identified as having a lower percentage of students following the criteria below:

- i. Focus of the research was on the non student population of Banda parish as students are atypical of the local population of Banda.
- ii. Students stay in private student hostels with seemingly better social amenities than the local population.
- iii. Students do not stay as households with children yet assessing the nutritional status of children was an important aspect of this survey.

Though the exact population figures in each zone were not known, some zones were generally known as having more people than others. In deciding the number of households to be visited per zone, expert opinion of the Banda Parish chief³³ about the population characteristics of each zone in Banda Parish was sought. Based on his opinion (Banda Parish chief), more households were selected from zones that were known to have more people. Selected zones and number of households selected to be visited were; Zone 1 (73 households), Zone 2 (43 households), Zone 3 (53 households), Zone 9 (53 households), Zone 10 (43 households). The percentage of households in relation to the total number of households selected from each zone is as summarised in Figure 3.

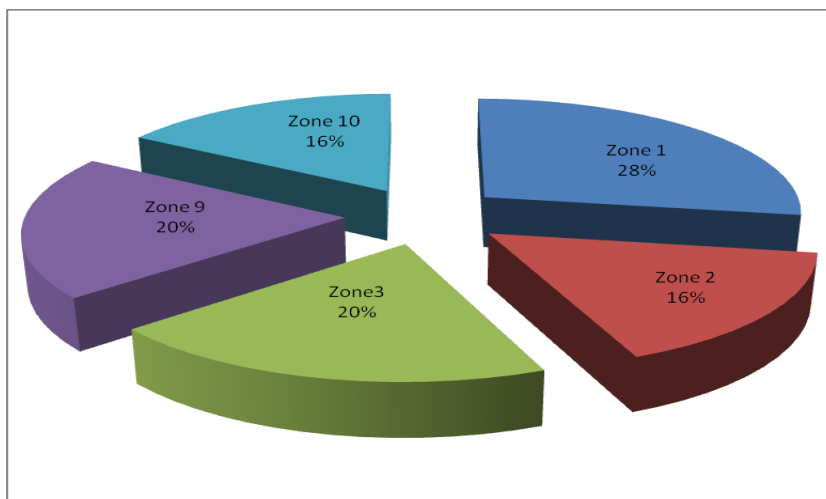


Figure 3 Percentage of households that were planned to be visited in each zone

Households to be visited

³³ Though commonly referred to as the parish chief by the people of Banda, his legal position is that of an administrative assistant for Banda Parish under Nakawa division council-City Council of Kampala.

Selection of households to be visited from the selected clusters (zones) was done by use of the EPI (Expanded Program of Immunization) method. This variant of the random walk method³⁴ was used following the procedure below;

- i. With the help of the local zone leader, a geographical centre was established in the particular zone.
- ii. From this centre, a direction was randomly chosen by spinning a pencil, or pen on the ground and noting the direction it pointed when it stopped (this was repeated for each group)³⁵.
- iii. Walking in the direction indicated, to the edge of the village.
- iv. Spinning the pen or pencil again until it pointed into the body of the zone and walking along this path randomly selecting one of the first nearest houses and choosing the next house on the right until the required number of households were visited

3.5 Variables measured

3.5.1 Anthropometric variables and indices for nutritional assessment

For all children, recommended anthropometric variables of age³⁶(months), weight (kg), sex and height (cm) were measured in addition to presence or absence of oedema³⁷. These anthropometric measurements³⁸ were carried out with an aim of calculating four indices namely, weight-for-age, length/height-for-age, weight-for-length/height and BMI-for-age whose analysis and interpretation using Standard deviation scores (SD) or Z scores gives a clear picture of the level of child malnutrition. Additionally, weight (kg) and height (cm)³⁹ of adult respondents (caretakers of measured children) was measured to compute the adult Body

³⁴ Two used variants of the random walk method in cluster sampling are either; selecting the starting point from a boundary map or using the EPI method when no boundary map is available (Magnani, 1997).

³⁵ The research team was divided in three groups each comprising two members.

³⁶ Exact age of children was read from child health cards or immunization cards. Where these did not exist, approximate age was recorded as age in months if date of birth (month and year) was known.

³⁷ Only children with bilateral oedema (pitting oedema on both feet) were to be diagnosed as being positive for nutritional Oedema (MOH, 2009).

³⁸ Recommended procedure for carrying out child anthropometric assessments can be found on <http://www.who.int/nutrition/databases/en/index.html>. Accessed 7th August, 2009.

³⁹ For both children and adults, weight was measured using a BEURER digital bathroom Scale model PS07. Height was measured using an infant/child/adult height/length measuring board. See <http://in.tolmol.com/BEURER%20-%20Digital%20Bathroom%20Scale%20-%20PS07/prices/1686609;jsessionid=E1B828DFE783FC753E7C2DE35753F553.tolmol2>. Accessed 3rd January, 2010.

Mass Index (BMI)⁴⁰-an index for classifying the nutrition status of adults. Excluded in all anthropometric measurements were pregnant women and all respondents (children and adults) that were physically handicapped at the time of the survey.

Description of anthropometric indices and cut off points

Length/height-for-age indicates stunting; which shows a failure to receive adequate nutrition over a long period of time and is also affected by recurrent and chronic illness. Weight-for-length/height indicates wasting which shows a failure to receive adequate nutrition in the period immediately preceding the survey. Wasting may be the result of inadequate food intake or a recent episode of illness causing loss of weight and the onset of malnutrition. Weight-for-age indicates underweight, this may reflect both past (chronic) and/or present (acute) undernutrition although it is unable to distinguish between the two (Cogil, 2003). BMI-for-age in children is similar to weight-for-length/height and is useful for screening for overweight and obesity. In using BMI, it is recommended to know that overweight and obesity can co-exist with stunting and also that BMI does not normally increase with age as do weight and height (WHO, 2008).

For all child anthropometric indices, children whose SD scores fall below minus two SD (<-2 SD) are classified as being moderately or severely malnourished. Those with SD in the range of <-2 SD and >=-3 SD with no oedema are moderately malnourished while those with SD <-3 SD and/or oedema are classified as severely malnourished. The cut off points for classification of adult's (caretakers) nutritional status according to BMI⁴¹ were as follows; underweight (<18.50), normal range (18.50 - 24.99), overweight (≥25.00) and obese (≥30.00)

3.5.2 Dietary diversity

Dietary quality of food eaten in Banda Parish was assessed using the individual dietary diversity score (IDDS)⁴². Assessment of dietary quality of foods eaten in an area is in line with the growing consensus from a nutritional perspective that the nutritional quality of food

⁴⁰ Body Mass Index (BMI) is a simple index of weight-for-height that is commonly used to classify underweight, overweight and obesity in adults. It is defined by World Health Organization as the weight in kilograms divided by the square of the height in metres (kg/m²). See http://apps.who.int/bmi/index.jsp?introPage=intro_3.html. Accessed on 25th April, 2010.

⁴¹ See also footnote 40.

⁴² FAO (2008) considers dietary diversity (DD) as a qualitative measure of food consumption that reflects household access to a wide variety of foods, and is also a proxy of the nutrient adequacy of the diet for individuals.

is as important, if not more important, than the quantity of food (FAO, 2009). Actually paragraph 9 of GC 12 calls for measures to maintain, adapt or strengthen dietary diversity and appropriate consumption if dietary needs⁴³ of a population are to be met (CESCR, 1999). The format of the IDDS questionnaire and interpretation of DD scores was based on the procedure described by FAO (2008).

3.6 Indicators

To achieve the thesis objectives, selected outcome, structural, and process indicators were used vis-à-vis human rights principles, the normative content of the right to adequate food, and types of State obligations (Table 3 and Appendix A). Except for modifications in the wording and units of measurement, indicators used for this study were selected based on the IBSA⁴⁴ report of the project, “Measurement Developments in the Realization of the Right to Food by Means of Indicators” (Söllner, 2006). Refer to Appendix A for a detailed description of all indicators that were used for this survey along with the aspect of the RtF measured by the given indicator. The rationale for selecting each of the indicators is given in Appendix B. Following is a general description of the different categories of indicators as follows.

3.6.1 Outcome indicators

Outcome indicators provide summary information on the extent of realisation of a human right; the RtF in this case. They are said to relate more directly to the realisation of a right with a clearly defined content. As such, indicators measuring the various components of the core content of the RtF are outcome indicators (FAO, 2008; Söllner, 2006). In this survey, outcome indicators were used to assess the status of the population’s enjoyment of the RtF by measuring results achieved by means of policies, programs, projects, and community actions. The different types of outcome indicators that were used for this survey are as given in Appendix A.

3.6.2 Structural indicators

Structural indicators measure whether or not appropriate legal, regulatory and or institutional structures considered necessary for the realization of the RtF are in place. Examples include

⁴³ Dietary needs imply that the diet as a whole contains a mix of nutrients for physical and mental growth, development and maintenance and physical activity that are in compliance with human physiological needs at all stages throughout the life cycle and according to gender and occupation (CESCR, 1999).

⁴⁴ IBSA (Indicators, Benchmarks, Scoping and Assessment), full description of the indicators and their rationale can be found online in a publication entitled “Right to Food Indicator Description” (Söllner, 2006). Available at http://ibsa.uni-mannheim.de/5_-_Right_to_Food_Indicator_Description.pdf. Assessed 6th August, 2009.

legal status of the right to food, mandates of institutions with responsibilities for the core content of the right to adequate food, food security and nutrition policies and strategies. They are mainly qualitative in nature and constitute a yes or no answer; additional follow up questions may be used for clarification and to capture qualitative dimensions of the law or policy (FAO, 2008; Söllner, 2006). See Appendix A for types of structural indicators that were used for this survey.

3.6.3 Process indicators

Process indicators provide information on the processes by which human rights are implemented specifically through laws, policies, programs, and regulatory measures (for types of process indicators that were used, refer Appendix A). They for instance capture quality of a process in terms of its adherence to key human rights principles (i.e. is the process non-discriminatory, does the process address accountability and can duty bearers be held accountable?). They also capture participation thus indicating whether the process is empowers people. Like structural indicators, process indicators measure aspects of the State obligations of conduct (FAO, 2008; Söllner, 2006).

3.6.4 Linking research objectives to indicators

Each category of indicators that was used for this survey measured a different aspect of the RtF. The focus on using indicators was due to the need to assess the extent of realisation of the RtF based on the core content of this right. As shown in Appendix A, some indicators encompassed all components of the core content of the RtF, while others only measured one or two aspects of this content. The rationale used in selecting these indicators (as explained in Appendix B) was similar to that described in the IBSA report⁴⁵.

To ensure that questions included in the research questionnaires matched with the selected indicators and research objectives, Table 3 linking indicators and objectives to the different questions was created. In Table 3, all questions that assess a similar indicator were matched with that indicator and the respective research objective. Indicators in Table 3 also carry the same numbering as is in Appendix 1. Question numbers (QN) indicated in Table 3 are also of the same position from the respective questionnaires. The Questionnaire codes (QC) as used in Table 3 refer to the different questionnaires that were used; these questionnaires are herein

⁴⁵ Refer also to footnote 44.

attached as Appendixes C, D, and E for questionnaires A, B, C and Appendix F for the interview guide (IG).

Table 3 Linking research objectives to indicators and respective question numbers

Specific objective number	Category of indicator(s)	Indicator number (as in Appendix 1)	Questionnaire code (QC) and question number(s) (QN)
1.1. To assess the diversity of diets eaten in Banda Parish	Outcome	1. Individual dietary diversity score (IDDS).	QC A-QN. 045-059
1.2. To determine the nutritional status of children (06-60 months) and adults in Banda Parish	outcome	2. Undernutrition (stunting, wasting, underweight, BMI)	QC A-QN. 060-065
2.1. To identify whether appropriate legal, regulatory and or institutional structures considered necessary for the realization of the RtF are available and accessible to the people of Banda Parish	Structural indicators	6. Recognition of the RtF and related rights at National and local level	QC B-QN. 003-006 QC C-QN. 002-004, 005-006
		7. Presence of independent National Human rights institution	QC C-QN. 004,017
		8. Presence of administrative, quasi judicial and judicial mechanisms to provide adequate remedies regarding violations of the RtF	QC A-QN. 031-035 QC C-QN. 010-014 IG 1-QN. 011
		9. Presence of a national strategy for implementing the RtF even in slum areas	QC B-QN. 004 QC C-QN. 003
		10. Existence of food safety and consumer protection legislation mechanisms	QC A-QN. 022-027 QC B-QN. 008, 012-015, 018-020, 023, 024, 027 IG 1-QN. 009
		11. Regulations to ensure cultural or consumer acceptability of food	QC A-QN. 042-043 QC B-QN. 025
		12. Protection of labour conditions and enhancement of access to labour	QC A-QN. 018-019
		13. Availability of social transfer schemes for people in slum areas	QC A-QN. 039-041 QC C-QN. 007-009
		14. Existence of mechanisms protecting consumers from fraudulent market practices and unsafe food	QC A-QN. 028-030 QC B-QN. 009-011 IG 1-QN. 010

	Process indicators	15. RtF complaints by slum dwellers filed, investigated and adjudicated in court (complaints particularly concerning the right to be free hunger).	QC C-QN. 018-019
		16. Presence of Right to food claimants benefiting from legal aid	QC B-QN. 016 QC C-QN. 015-016
		19. Frequency of food inspections to regulate and monitor food standards	QC B-QN. 021-022.
2.2. To assess for awareness of the right to food, employment status and level of education of household heads in Banda Parish	Process	17. Presence of programs for awareness raising on the RtF	QC A-QN. 006-008 QC. B-QN. 001-002,007 QC C-QN . 001, 020-022 IG 1-QN. 001-004
		18. Presence of community programs on nutrition education and awareness	QC A-QN. 015-016 QC B- QN. 017 IG 1-QN. 005
	Outcome	3. Employment status of head of household	QC A-QN.017
2.3. To assess the availability and accessibility to safe food, water, health services, state of hygiene and sanitation in Banda Parish.	Outcome	4. Percentage of respondents without access to an improved water source	QC A-QN. 009-010 IG 1-QN. 006
		5. Percentage of respondents without access to improved sanitation	QC A-QN. 011-012, 014 IG 1-QN. 007
		1. Percentage of respondents without access to improved sanitation	QC A-QN. 011-012, 014 IG 1-QN. 007
2.4. To assess whether existing processes considered necessary for the realisation of the RtF in Banda Parish adhere to key human rights principles	Process	22. Human rights principles	QC B-QN 026 QC C-QN. 023-024 IG 1-QN. 012-014

3.7 Data Analysis and presentation

Statistical analysis of all data was done using computer –based data processing packages.

Child anthropometric data was analysed using the World Health Organization (WHO)

nutrition software ‘WHO Anthro version 3.0.1’⁴⁶. This software is based on the new child growth standards published by WHO in 2006. All anthropometric data was analysed and presented in form of tables. Other quantitative data was analysed using SPSS (Statistical Package for Social Scientists) version 16. Initially descriptive statistics were done to gain an understanding of the survey data based upon which any further statistical tests were carried out. Probabilities are not done, so the results will speak for themselves and be interpreted by the reader.

3.8 Conceptual framework for understanding the causes of malnutrition and violation of the right to food in Banda Parish

Causality analysis is said to be an important factor in any right to food assessment (FAO, 2009). An analysis of the underlying and root causes of malnutrition is argued to be able to reveal the best entry points for the implementation of any measures and actions aimed at promoting realization of the RtF. Such measures (depending on the assessment) could range from instituting an appropriate legal framework for implementing policies, strategies or programmes that target people in greatest need (ibid.).

The UNICEF conceptual framework for understanding the causes of malnutrition (Figure 4) was adopted for this survey. This framework enables studying the interrelationships among different factors and how these influence the overall nutrition status in a community.

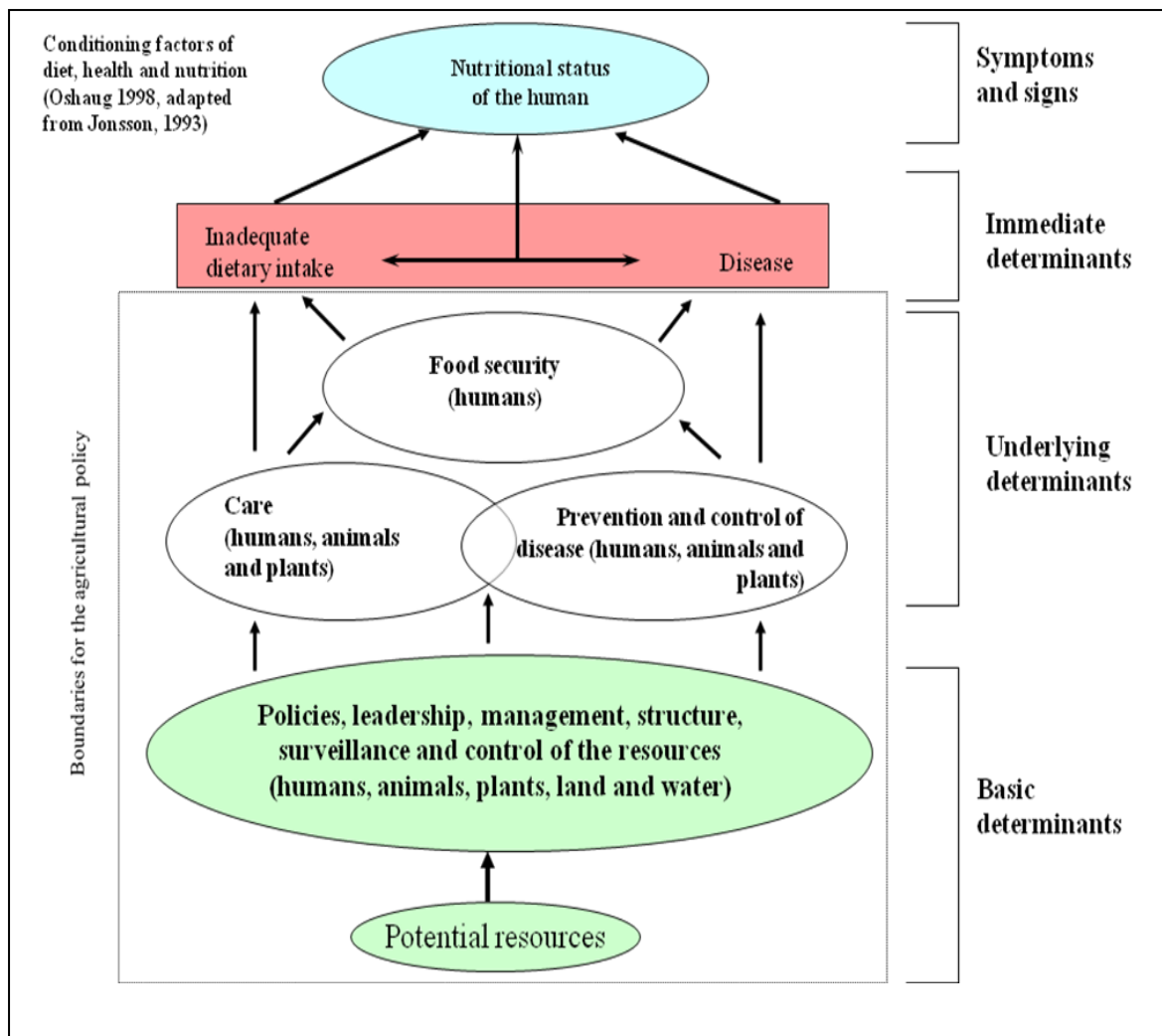
Although many factors influence overall nutrition outcomes, the objectives of this thesis were linked to the UNICEF conceptual framework in the following ways:

- Determining the nutrition status provided outcome information on the status of enjoyment of the RtF in Banda Parish.
- Assessing dietary diversity provided information on food/dietary intake which is an immediate determinant of malnutrition.
- Assessing the availability and accessibility to safe food, water, health services, and the state of hygiene and sanitation provided information on the underlying determinants of malnutrition

⁴⁶ This software can freely be downloaded from the WHO website <http://www.who.int/childgrowth/software/en/>. Accessed 9th August, 2009.

- Assessing for the awareness of the right to food, employment status and level of education of household heads in Banda Parish also provided information on the underlying determinants of malnutrition
- Identifying whether appropriate legal, regulatory and or institutional structures considered necessary for the realisation of the RtF were available and accessible to the people of Banda provided information on the basic determinants of malnutrition.
- Assessing whether existing processes considered necessary for the realisation of the RtF adhere to key human rights principles in Banda Parish also provided information on the basic determinants of malnutrition.

Figure 4 UNICEF Conceptual Framework for Understanding the Causes of Malnutrition



3.9 Ethical considerations

Before pre-testing survey questionnaires and actual data collection, permission for furthering with this research was sought from the Uganda National Council of Science and Technology (UNCST)⁴⁷. The consent form obtained from UNCST is as attached in Appendix H. At parish level, permission was sought from chairpersons of selected zones⁴⁸ through the Banda Parish chief. Still written consent was obtained from the actual respondents before administering the survey instruments. To obtain this consent, aims of the survey were fully explained to each respondent before administering the questionnaire.

3.10 Resources

3.10.1 Research assistants and financial resources

The researcher identified six assistants who assisted in carrying out anthropometric measurements, administration of researcher questionnaires and in the movement of research materials. These assistants were selected from a group of third year students pursuing a bachelors of Science degree in Human Nutrition and Dietetics at Kyambogo University, Kampala, Uganda. In collecting research data, these assistants were divided into 3 groups with each group assigned a local person⁴⁹ selected from the zone that was to be surveyed. The local personnel were identified from the respective zones by zone chairpersons on the basis that they were known and influential in the community. Here, the research took a supervisory role in ensuring that recommended research procedures were adhered to by the respective teams.

Financial resources used for carrying out the research were covered by the student summer loan advanced to the researcher by the Norwegian Students Quota Scheme through Akershus University College, Lillestrom, Norway. A summary of research expenditure is as attached in Appendix G.

⁴⁷ National body mandated by the constitution of Uganda to examine and provide clearance to all studies involving human respondents, and other studies of national significance, interest and sensitivity. Link on clearance of research by this body can be found at <http://www.uncst.go.ug/>. Accessed on 4th June 2009.

⁴⁸ The objectives of the survey were fully explained to all chairpersons of the selected zones so that they were fully informed about the survey. This approach was found particularly beneficial to the whole field process in terms of mobilising the locals to actively participate in the survey.

⁴⁹ The local persons would help in introducing the research teams to the respondents. This tactic was employed to increase on the willingness of respondents to participate in the survey and was devised through consultation from the Banda Parish chief based on his previous experience of research carried out in Banda Parish.

3.10.2 Institutional collaborators

This research was made possible due the collaboration of the researcher with the department of Health, Nutrition and Management at Akershus University College (AUC), Lillestrom. Norway (were the researcher was also a Msc student) and the department of Human nutrition and Home Economics of Kyambogo University, Kampala. Uganda.

4 Results and discussion of findings

This chapter includes the presentation and discussion of results of this study. As a starting point, the chapter begins with results of the assessment of the environment for the RtF in Uganda (based on objective 2.1). This is intended to provide a basis against which all other survey results and discussion should be judged. Except for beginning with objective 2.1 as has been explained, the results are presented and discussed according to the specific objectives described in section 1.4.2 and in Table 3 (section 3.5.4). All statistical results are based on responses of 235 respondents that were found to have valid⁵⁰ responses upon data entry. Qualitative information from duty bearers is (where appropriate) included in the results to make the focus of the presentation stronger.

Overall, the survey was carried out in the months of October and November 2009. Initially, a computed sample size comprising at least 241 children was required for this survey. This figure was however increased by 10% to 265 children so as to cater for contingencies that could arise in the research process⁵¹. Despite this measure, only 235 questionnaires were valid upon data entry. A summary of the percentages of respondents from each zone whose responses were included in data analyses is shown in Figure 5.

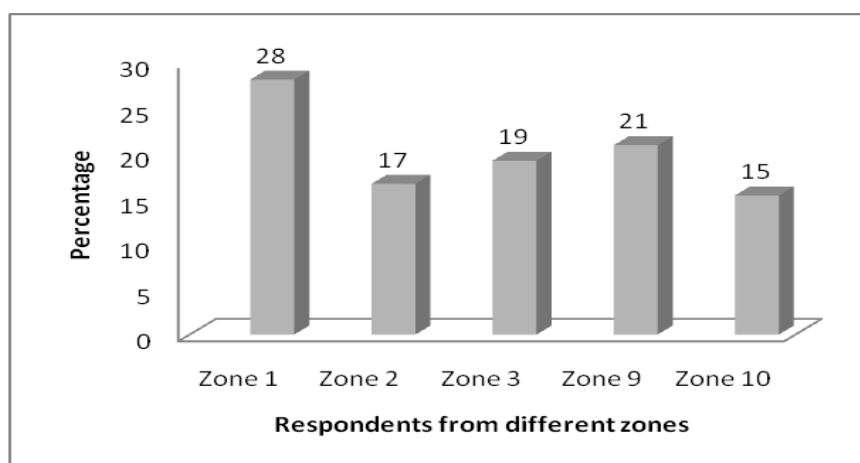


Figure 5 Percentage of respondents with valid responses (n=235)

⁵⁰ As a screening measure, all questionnaires found to be with wrong anthropometric measurements (refer also to section 3.5.1) and those with no entries on food intake data (Appendix A, questions 046-060) were considered invalid and thus excluded from any analyses.

⁵¹ Refer also to section 3.4.2 of this document.

4.1 Availability and accessibility of structures considered necessary for the realisation of the RtF in Banda Parish

An assessment of the existing legal, regulatory and institutional structures⁵² considered necessary for realization of the RtF in Uganda was done for the purpose of determining the conduciveness of the environment to the progressive realization of the RtF of slum dwellers in the study area. The assessment was mainly done by reviewing documentation on the RtF in Uganda vis-à-vis International documents on this right (mainly UDHR, ICESCR, GC 12 and the VG) coupled with information from rights holders and duty bearers that were interviewed for the survey. Results of this assessment are presented in three different but interrelated sections. The first section is on the legal structure of the RtF while the second and third sections more comprehensively deal with institutional and regulatory structures.

4.1.1 International obligations on the RtF and their adoption in Uganda national law

a) Recognition of the RtF and related rights at National and Local level (indicator 6)

It is argued that recognition of the RtF and related rights is a fundamental first step for a State to realize Art. 11 of the ICESCR as it is essential for the justiciability of this right (Söllner, 2006). At the international level, Uganda ratified the International Covenant on Economic, Social and Cultural Rights (ICESCR) in 1987, and thus recognises the RtF as a human right.

Nationally, the need to fulfil the fundamental right of all Ugandans to adequate food is fairly recognised in objectives XIV⁵³ and XXII⁵⁴ under the section of social and economic objectives of Uganda's 1995 Constitution (RoU, 1995). Much as Uganda's Constitution has a provision for recognising the RtF, the respondent at the Uganda Human Rights Commission cited a lack of clear understanding of the RtF in Uganda's Constitution as objectives XIV and XXII are not explicit on this right. Objectives XIV and XXII of the Constitution of Uganda also make no mention of the State obligations on the RtF in terms of respect, protect and fulfil as specified in GC 12 (CESCR, 1999). This arises from the fact that the Constitution was adopted in 1995 while GC 12 was adopted by CESCR in 1999.

⁵²Legal, regulatory and institutional structures as mentioned in this thesis collectively give a view of the RtF framework in Uganda. See also VG 3.2 on assessment of the environment for the RtF (FAO, 2004)

⁵³ The State shall endeavour to fulfil the fundamental rights of all Ugandans to social justice and economic development and shall, in particular, ensure that—(b) all Ugandans enjoy rights and opportunities and access to education, health services, clean and safe water, work, decent shelter, adequate clothing, food security and pension and retirement benefits (RoU, 1995).

⁵⁴ The State shall: take appropriate steps to encourage people to grow and store adequate food; establish national food reserves; and encourage and promote proper nutrition through mass education and other appropriate means in order to build a healthy State (ibid.).

Lack of a clear definition of the State obligations on the RtF in Uganda's Constitution raises an issue of justiciability of this right in Uganda. The informant at the Uganda Human Rights Commission however explained that:

Although justiciability of the RtF is not explicitly stated in Uganda's Constitution, it is seconded by article 45 of the Constitution. He added that, there is however a lack of awareness about the justiciability of the RtF, hence those whose right to food is violated do not take their complaints to court.

Article 45 of the Constitution of the Republic Uganda states that, "The rights, duties, declarations and guarantees relating to the fundamental and other human rights and freedoms specifically mentioned in this Chapter shall not be regarded as excluding others not specifically mentioned" (RoU,1995). This in essence means that Uganda is bound by international obligations on the RtF whether or not these are incorporated in domestic law.

b) National strategy for implementing the right to adequate food (indicator 9)

There existed a National Food and Nutritional Strategy (UFNS) in Uganda adopted by the Ministry of Agriculture, Animal Industry and Fisheries (MAAIF) and Ministry of Health (MOH) in November 2005. The UFNS was formulated as a guide to action for the Uganda Food and Nutrition Policy (UFNP)⁵⁵ and had as its overarching goal, "To transform Uganda into a properly nourished country within 10 years" (MAAIF and MOH, 2005). The UFNS also presented an agenda of action that the Government of Uganda intended to take to fulfil its legally binding international and national obligations of eradicating hunger and malnutrition. It is clearly stated that the design of the UFNS was guided by several concerns including: vulnerability and gap analyses, attention to human rights and gender differences, decentralisation, and the cross sectoral nature of effective measures that can redress food and nutrition insecurity (MAAIF and MOH, 2005).

c) Presence of Independent National Human Rights Institutions (indicator 7)

Independent national human rights institutions are considered essential for the justiciability and eligibility of the right to food as well as for the identification of the accountability of the different branches of the State (Söllner, 2006). There indeed existed a human rights

⁵⁵ Refer also to section 2.2 of this document.

institution in Uganda known as *The Uganda Human Rights Commission* (UHRC). This Commission had as its mission:

To protect and promote human rights as guaranteed by the Constitution of Uganda and other binding human rights instruments, guided by the requirements of its legislative mandate, by international and regional human rights standards and working through partnerships⁵⁶.

In accordance to the UHRC mission, the respondent at UHRC highlighted several roles the Commission had played in promoting realization of the RtF. These were however broadly presented with a lack of specificity on what had particularly been done to highlight the plight of slum dwellers in realizing their RtF. Take for instance the role of reporting on issues relating to violation of human rights in Uganda. UHRC publishes periodic reports on its findings⁵⁷ and it submits annual reports to Parliament of Uganda. This presents a great opportunity of putting across the RtF to the agenda of policy makers in the country. However a look at the latest UHRC annual report indicated that only 1 case out of 82 cases decided upon by the Commission tribunal pertained the RtF (UHRC, 2008). Also, no mention of the need to promote realization of the RtF of slum dwellers was mentioned any were in that report. None the less, the 10th UHRC report (UHRC, 2007) dedicated a section on the RtF that highlighted problems of access to adequate food, and also made useful recommendations of the need to respect other rights that have immediate bearing on the RtF. It however did not precisely call upon the State to respect, protect and fulfil the RtF of slum dwellers.

4.1.2 National Legislation on the Right to adequate food

It is recognised that effective protection of the RtF needs to be ensured at the statutory level through sector legislation dealing with issues such as food safety, social security legislation, labour laws⁵⁸ (FAO, 2009). This section presents results of a review on some of the legislation mechanisms necessary for promoting realization of RtF in Uganda that were identified as being important for the purposes of this survey. This review was based on selected indicators as shown in Appendix A and is often punctuated with responses from both rights holders and duty bearers that were interviewed during this survey.

⁵⁶ Further readings on the mandate of UHRC can be found at <http://www.uhrc.ug/>. Accessed on 12th April, 2010.

⁵⁷ See annual reports by UHRC on http://www.uhrc.ug/index.php?option=com_docman&Itemid=111. Accessed 28th April, 2010.

⁵⁸ See VG 8,9,13 and 14 (FAO, 2004).

a) Food safety and consumer protection legislation in Uganda (indicator 10)

It was identified that the primary duty of safeguarding food safety for all people of Uganda lay with the Uganda National Bureau of Standards (UNBS)⁵⁹. On the contrary however, activities of regulating food safety in Banda Parish were identified as being implemented by different agencies and authorities. As though this was not enough, the mandates for these agencies and authorities are stipulated or provided for under different Laws and Regulations (Table 4 for a list of food laws/Acts in Uganda). For instance, when asked of whom was responsible for regulating food safety and consumer protection for the people of Banda Parish, the respondent at the Nakawa Division Council asserted that:

The primary duty of regulating food standards in Nakawa Division lies with UNBS. Nakawa Division Council works as a watchdog in ensuring that malpractices in selling food are reduced, and also that food is sold in a standard hygienic environment. Inspections on meat slaughter areas and butcheries are carried out by the Ministry of Agriculture so as to ensure that meat sold to consumers is slaughtered and sold in hygienic conditions. Ensuring that milk sold to consumers in Banda Parish conforms to set standards is done by the Uganda dairy development authority.

Although a few players in regulating food safety were mentioned as above, it has been shown that several food laws/Acts exist in Uganda (Table 4). With such legislation it would be expected that vigilance in ensuring food safety is maintained at all levels in Uganda-including in slum areas so that even the marginalised poor have access to safe food. In doing this however, it would also be important that slum dwellers know which government institutions are concerned with safeguarding food safety and or food quality standards. Astonishingly however, about 87% of the respondents were not aware of the existence of a State body mandated to monitor and regulate food standards in the country (Table 5). And of the few who seemed to be aware, only 32% could clearly identify UNBS as being primarily responsible for setting, monitoring and regulating food standards.

⁵⁹ See this link for more information on the role of UNBS, <http://www.unbs.go.ug/>. Accessed 28/04/2010.

Table 4 List of Food laws/Acts in Uganda

1. Uganda National Bureau of Standards Act (1983)
2. The Uganda National Bureau of Standards (Certification) Regulations (1995)
3. The Uganda National Bureau of Standards (Import Inspection and Clearance) 2003
4. Food and Drugs Act (1964)
5. Fish Act (1964)
6. Public Health Act (1964)
7. Water Statute 1995
8. National Environment Statute 1995
9. Agricultural Chemicals (Registration and Control) Statute 1993
10. Fish Quality Assurance Rules 1998
11. The Animal diseases Act 1964
13. Cattle Traders Act 1964
14. The Hides and Skins Act 1964
15. Meat Inspection Code of Uganda 1973
16. The Public Health Act (Meat and Milk Rules)
17. The Veterinary Surgeons Act 1964

Source: Codex Alimentarius Committee (2005)

Table 5 Awareness of the National body mandated to set, monitor and regulate food standards

Awareness of National body that regulates food standards	No.	Valid Percent
Yes	31	13.2
No	204	86.8
Total	235	100
Name of National body that regulates food standards		
UNBS	10	32.3
Don't know	12	38.7
Forgotten	9	29
Total	31	100

Mechanisms to protect consumers from fraudulent market practices and sale of unsafe food (indicator 14)

Analysis of data showed that fraudulent market practices were almost a norm in Banda Parish with about 81% respondents reporting having ever been fraudulently cheated at least once. The fraudulent practices (as reported by respondents) ranged from consumers being sold to poor quality food, less quantities of food compared to that actually paid for, and sell of adulterated foods, expired foods or highly priced food (Table 6).

In a RtF approach, such practices limit rights holders access to adequate food. These fraudulent market practices could however be adequately catered for by existing food legislation laws in Uganda (Table 4).

Table 6 Ways in which fraudulent food sellers cheat consumers on Banda Parish

Ever been cheated by a food seller	No.	Valid percent
Yes	187	81.3
No	43	18.7
Total	230	100
How respondent was cheated		
Less quantity	96	51.9
Poor quality	35	18.9
Adulterated	29	15.7
Expired food	8	4.3
Highly priced food	17	9.2
Total	185	100

Frequency of food inspections to regulate and monitor food standards (indicator 19)

It was not possible to ascertain how regularly the UNBS carries out inspections to monitor food standards in Banda Parish as the researcher was unable to interview any respondent from this body. Also since only 10 of the respondents (Table 5) knew that UNBS was the statutory body primarily concerned with setting, monitoring and regulating food standards, this number was so small to be based on in making conclusions.

Regulations to ensure cultural or consumer acceptability for food (indicator 11)

It had been planned for this survey to identify the kinds of measures undertaken by the UNBS so as to ensure that available and accessible foods were culturally acceptable. Identification of these measures was however not possible as the researcher failed to get audience from UNBS. None the less, the IBSA report of the project, “Measurement Developments in the Realization of the Right to Food by Means of Indicators” (Söllner, 2006) identified the

following aspects as being important in ensuring cultural or consumer acceptability of accessible foods:

- i. The need for labelling of products in accordance with culture/tradition
- ii. Ensuring that food aid is culturally acceptable, and
- iii. Undertaking programs for duty bearers to respect/protect/fulfil cultural or traditional food use and nutrients.

Of the above, assessing cultural acceptability of food aid by rights holders was done. Of the 8 respondents who acknowledge to be receiving food aid (Table 8), 7 respondents said the food was culturally acceptable to them. The number of respondents receiving food aid was however so small to make any meaningful inferences.

Social transfer schemes for people of Banda Parish (indicator 13)

Whenever an individual or group is unable for reasons beyond their control to enjoy the RtF by means at their disposal, States have the obligation to fulfil (provide) that right directly (CESCR, 1999).

Information gathered showed no direct government involvement in the provision of social assistance to meet food needs even to those individuals who could ill afford meeting their dietary needs. Instead, the few individuals that acknowledged receiving assistance to meet their dietary needs (Table 7) either received assistance from relatives (7 respondents) or a Non Government Organisation (NGO) (6 respondents). The forms of assistance received were either in terms of money to buy food or direct provision of food (food aid).

When asked whether Uganda had laws relevant to the RtF covering social security for those who can not access food in slum area, the respondent at the UHRC appeared noncommittal but was of view that provision of social security is covered by the section on social and economic objectives in the 1995 Constitution of the Republic of Uganda, stressing that:

There are currently no forms of social security from the Government benefiting slum dwellers in particular. This is mainly because the Government still considers it a responsibility of families to fend for themselves rather than being provided with social assistance. It is only in cases of disasters that the government tries to directly provide food.

The above response appears to correspond with the findings in Banda Parish that indicated that the government was not directly involved in offering social assistance even to the very needy respondents.

Table 7 Type and source of social assistance received by respondents in Banda Parish

Social assistance to meet food needs	No.	Valid Percent
Has household received any form of assistance		
Yes	13	7.1
No	170	92.9
Total	183	100
Type of assistance		
Financial assistance	5	38.5
Food aid	8	61.5
Total	13	100
Cultural acceptability of food aid		
Yes	7	87.5
No	1	12.5
Total	8	100
Source of assistance		
Relative	7	53.8
Non government Organization	6	46.2
Total	13	100

Protection of labour conditions and enhancement of access to labour (indicator 12)

Protection of labour conditions enhances economic accessibility of households to adequate food more so for residents who are dependent on the market for food. However, when asked for their opinion, about 75% of the respondents were of a view that the government had not protected the working conditions of people in Banda Parish (Table 8). Several reasons were given as evidence pertaining to how government had failed to protect labour conditions for the people of Banda Parish. These included poor working conditions (about 31% of the respondents), inadequate pay (about 39%), job insecurity (about 15%) and job scarcity (about 16%).

Table 8 Respondents opinion of the work conditions in Banda Parish

Has government protected working conditions	No	Valid Percent
Yes	35	15.1
No	175	75.4
Don't know	22	14.7
Total	232	100
Reasons given as to why government had not protected work conditions		
Poor working conditions	52	30.6
Inadequate pay	66	38.8
Job insecurity	25	14.7
Job scarcity	27	15.9
Total	170	100

4.1.3 Availability of recourse mechanisms for violations of the right to food

a) Presence of administrative, quasi judicial and judicial mechanisms (indicator 8)

Adequate remedies especially for the marginalized and disadvantaged groups form the normative basis for the enforceability of the RtF; they promote justiciability and accountability for aspects of the RtF (Söllner, 2006). As earlier mentioned (section 4.1.1 a), justiciability of the RtF in Uganda was reported as being seconded by article 45 of the 1995 Constitution of Uganda.

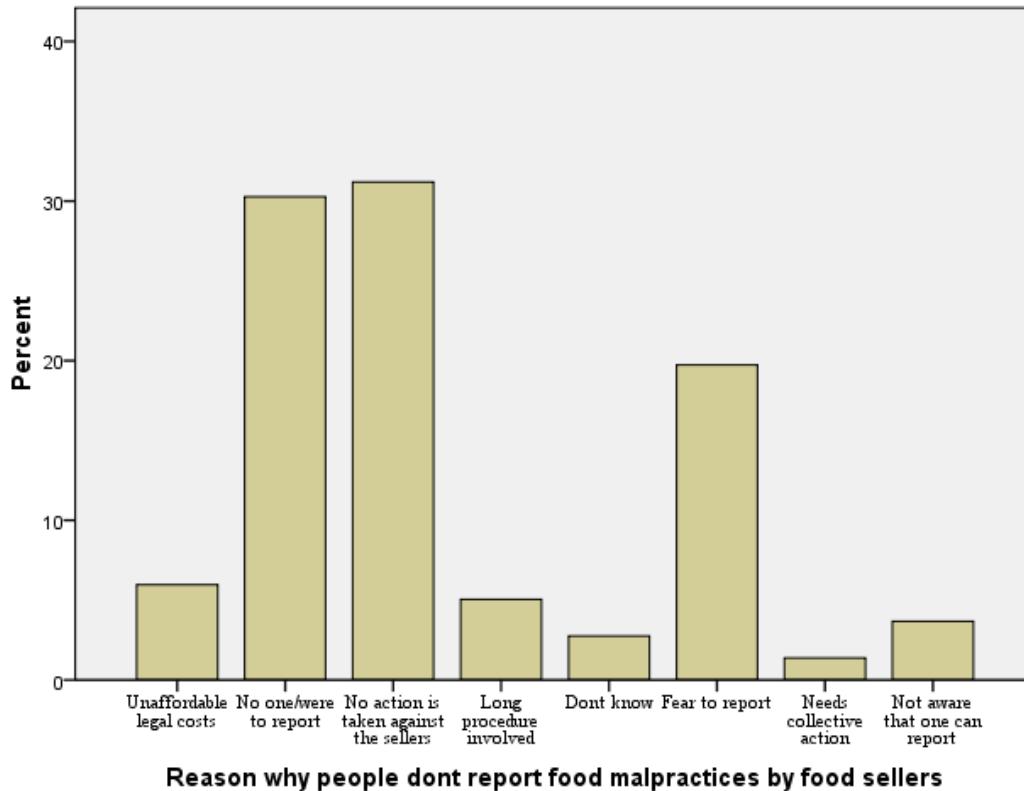


Figure 6 Reasons why of Banda Parish do not report fraudulent food sellers (n=218)

However, when respondents of Banda Parish were asked whether they had ever been fraudulently cheated by food sellers and whether they had ever reported fraudulent food sellers to any authority, only 4 respondents reported having ever taken the initiative to report to an authority. Respondents gave various reasons as to why they do not report fraudulent market practices. Notable among the reasons (Figure 6) was the lack of action taken against fraudulent food sellers (31% of respondents), no one/where to report to (30%) and fear of reporting fraudulent food sellers (20%).

When asked whether there existed complaint and redress mechanisms accessible to residents of Banda Parish in case of a violation of their RtF, the respondent from Nakawa Division Council made the following comments:

Ideally it is considered that complaints can be addressed to the council, it is then the council’s responsibility to proceed with taking these matters to court. In this case the council becomes the complainant. However, few cases are addressed to the council as

many people are used to the prevailing conditions to an extent that they... consider them as being normal. In instances when the council decides to take matters to court:

- Court procedures take long so justice is not exercised timely.
- The council is requirement to show that foods are of low standards; this needs analysis by the government chemist and requires money to be paid which the council normally does not budget for. So some cases may not even be taken to court because of this requirement.

On the whole some routine awareness is done in Banda Parish although complaints and redress mechanisms have not really been emphasised. There are no explicit complaint mechanisms at the ground level but individuals are expected to direct such cases to either their local leaders or to report these issues to the division. When reported to the council some cases are forwarded to court.

b) Number of Right to food complaints by slum dwellers filed, investigated and adjudicated in court (indicator 15)

This indicator was intended to provide insight as to whether any violation(s) of the RtF in slum areas have been addressed through use of legal procedures. It was however not possible to establish whether any RtF complaint(s) by slum dwellers had ever been filed, investigated and adjudicated in court in the period preceding this survey. The respondent at UHRC was also uncertain of any such records maintaining that, “People from slum areas have so far not sought legal redress for violations of their right to food partly because they are essentially unaware of the provisions on the justiciability of this right”.

c) Presence of Right to food claimants benefiting from legal aid (indicator 16)

For the effective realization of the RtF it is necessary to provide adequate, effective and prompt legal remedies for violations of this right. To have a non-discriminating effect of such legal remedies, marginalized and disadvantaged groups often need legal aid to enforce this right (Söllner, 2006). Having asserted that people hardly ever seek legal redress for violations of their right to food, the respondent at UHRC could not precisely say whether or not legal assistance indeed existed to help slum dwellers seek legal redress for violation of their RtF. Also, respondents representing rights holders of Banda Parish were not asked about issues

related to legal aid so it could not be identified whether legal aid could be sought for violations of the RtF.

4.1.3 Summary on the availability and accessibility to appropriate legal, regulatory and institutional structures for the RtF in Banda Parish

For people to realize the RtF there is need for creation of conditions under which the normative standards of the RtF can be implemented and respected in practice (Eide, 2002). From the results it is evident that Uganda ratified the most relevant documents on the RtF (i.e. the UDHR and the ICESCR). Further Uganda's Constitution of 1995 fairly recognises the right of people to adequate food and has a provision (article 45) that could facilitate justiciability of the RtF in case of violation of this right. This is in addition to a national strategy (i.e. UFNS) that presents an agenda of action that the Government of Uganda intended to take to fulfil its legally binding international and national obligations of eradicating hunger and malnutrition. There also exists a human rights body (UHRC) concerned with promoting realization of human rights.

There exists supportive legislation in Uganda (in form of food laws/Acts) that could facilitate access to adequate food (with emphasis on food safety) by all people living in the country. However, these laws/Acts seem either not effectively implemented or adhered to. Further, food safety laws appear to be implemented by different agencies and authorities whose mandate is provided for under different laws and regulations. This may pose challenges in the implementing food safety laws. Results also seem to show laxity on part of the government to facilitate access to labour (which would allow economic access to adequate food) and to the direct provision of social security to even the needy people of Banda Parish.

The availability of recourse mechanisms for violation of the RtF for people of Banda Parish seems to be contentious. To this author, fraudulent market practices seem to be almost a norm in Banda Parish. However, rights holders cite lack of action taken against fraudulent food sellers, absence of authority(ies) to report to, and a fear of reporting fraudulent food sellers as being the main reasons why these practices are not reported. Never the less, there appears to be no particular authority in Banda Parish who is mandated to receive RtF complaints arising due to fraudulent market practices, as such it is seemingly expected that rights holders report any fraudulent market practices to Nakawa Division Council. The decision to take forward complaints to court for redress is then left upon Nakawa Division Council.

It could neither be ascertained whether any RtF complaint(s) by slum dwellers had ever been filed, investigated and adjudicated in court in the period preceding this survey nor that legal aid could be sought for violations of the RtF of slum dwellers.

4.2 State of dietary diversity in Banda Parish

The nutrition adequacy of diets in Banda Parish was assessed by use of an individual dietary diversity score (IDDS) ⁶⁰(indicator 1 in Appendix A) that was based on 14 different food groups. Results of the analysis of IDDS (Figure 7) showed the minimum and highest IDDS as having been 1 and 7 respectively; with each representing about 0.4% of the respondents. The mean IDDS was 4; this apparently also represented the highest IDDS (about 29% of respondents). Analysis also showed that respondents who had their IDDS ranging from 1 to 4 comprised about 71% of the total number of respondent's that were surveyed.

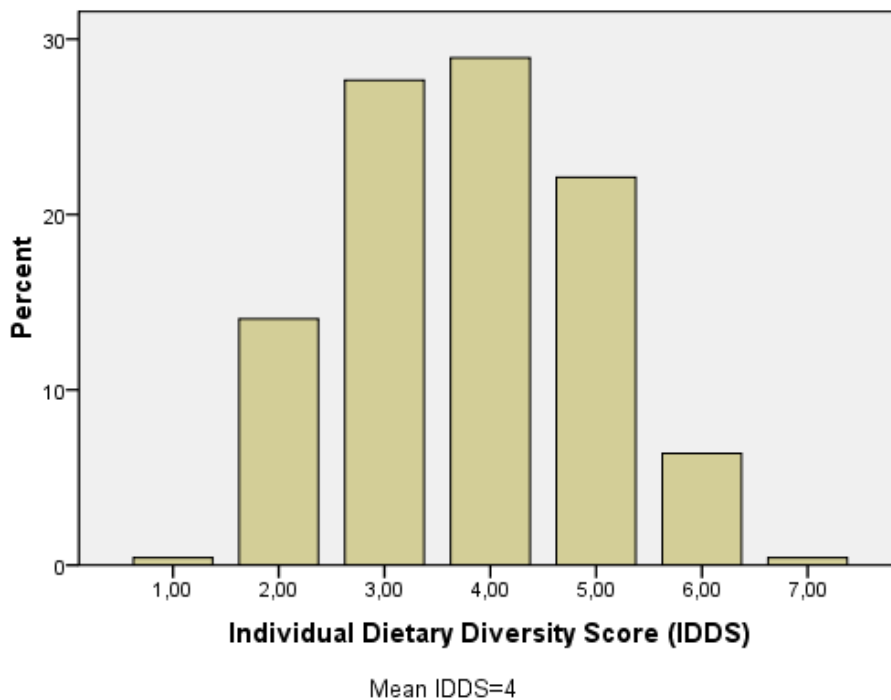


Figure 7 Percentage Individual Dietary Diversity Scores in Banda Parish (n=235)

⁶⁰ IDDS is one of the indicators of dietary diversity the other being household dietary diversity score (HDDS). While the individual dietary diversity score (IDDS) is used as a proxy measure of the nutritional adequacy of an individual's diet, the HDDS is used as a proxy measure of the socio-economic level of the household (Swindale et al., 2006). Any of these could have been used but focus of the research was on nutrition adequacy thus the use of IDDS.

Many studies in several different age groups have shown that an increase in IDDS is related to increased nutrient adequacy of the diet (FAO, 2008). However a calculated mean IDDS of 4 out of 14 different food groups (Figure 7) may be low for rights holders to attain an adequate diet. This may lead to nutritional deficiencies which are a clear indication of non realization of the RtF by rights holders. It should be noted however that the IDDS is a qualitative measure of diet diversity and does not establish a real threshold below which individuals can be said to be eating totally inadequate diets (FAO, 2008).

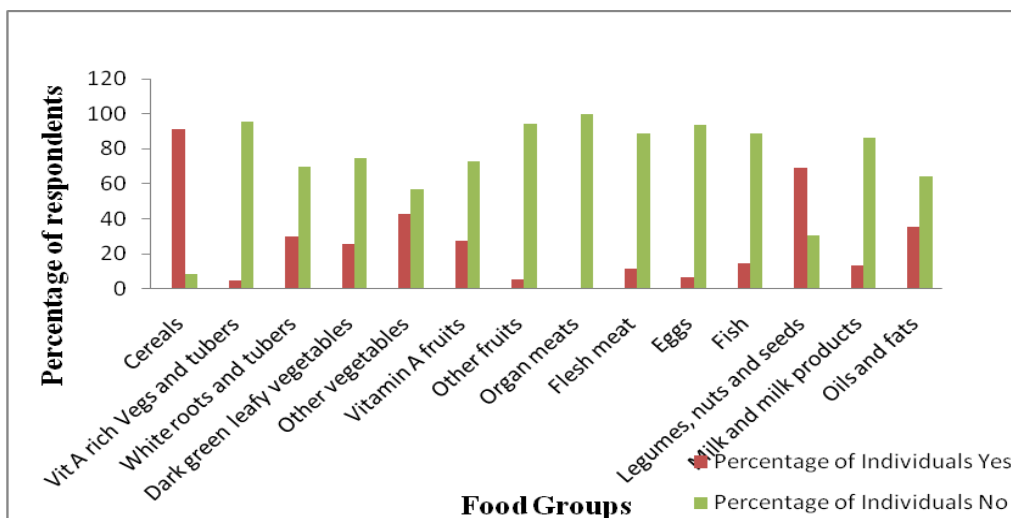


Figure 8 Percentage of respondents consuming each food group (n=235)

Further analysis aimed at revealing the particular food groups that mainly constituted the diet of respondents in Banda Parish (Figure 8) showed that cereal based foods were the most commonly used foods (about 92% of respondents) followed by the legume seeds and nuts food group (about 69% of respondents). Overall, there was a lower consumption of animal based food groups (fish, eggs, flesh meat, organ meat, milk and milk products) in Banda Parish compared to plant based food groups. The imbalance in intake of animal based foods may be indicative of inadequate protein intake.

4.2.1 Summary of dietary diversity in Banda Parish

Out of a total of 14 different food groups, respondents in Banda Parish had a mean IDDS of 4 food groups. A mean IDDS of 4 may be indicative of sustenance on of individuals of Banda Parish on inadequate diets. Respondents that had their IDDS ranging from 1 to 4 food groups

comprised the highest percentage (about 71%) compared to those that had their IDDS ranging from 5 to 7. In general, cereal foods were the most commonly used foods. Also there was a tendency for people to select more of the plant based foods compared to animal based foods for their meals.

4.3 Nutritional status of children and their caretakers in Banda Parish

Undernourishment (indicator 2 in Appendix A) is arguably the most recognizable symptom of inadequate food intake and therefore the most important outcome indicator for RtF. The nutrition status of children in Banda Parish was assessed using anthropometric indices namely weight-for-age (an indicator of underweight), length/height-for-age (an indicator of stunting), weight-for-length/height (an indicator of wasting) and BMI-for-age. While the nutrition status of caretakers was assessed using the body mass index (BMI). See section 3.5.1 for a description of anthropometric indices and cut-off points that were used for this study.

4.3.1 Nutritional status of children aged 06-60 months

Table 9 shows that for all children measured in Banda Parish, moderate and severe stunting ranked highest (about 22 %), followed by underweight (about 10%) and wasting (about 7%) in this analysis. When nutrition status results are interpreted based on the sex of the child, Table 9 further shows that a higher percentage of male children appeared to be more undernourishment compared to the females. Disaggregating anthropometry results by age reveals that; underweight was more prevalent in children of the age group of 24-35 months (about 18%), stunting was more prevalent in the age group of 36-47 months (about 30%) while wasting was more evenly spread out amongst all age groups.

For all children in Banda Parish, anthropometric results in Table 9 are similar to those reported by UDHS (Table 1). However, results of this survey go a further step in disaggregating anthropometric data by age and sex of the children. Still results show a proportionately high level of malnutrition. While deliberating on the causes and consequences of malnutrition, Horton (2008) commented that, “Governments need national plans to scale-up nutrition interventions, systems to monitor and evaluate those plans, and laws and policies to enhance the rights and status of women and children”, concluding that none of these solutions are separable from global treaties.

Table 9 Nutrition status of children aged 06-60 months

Percentage of children (06-60 months) classified as being malnourished according to three anthropometric indices of nutritional status: weight-for-age, Length/height-for-age, and Weight-for-length/height										
Age of children (0-60 completed months)	Weight-for-age %			Length/height-for-age %			Weight-for-length/height %			Total No.
	% < -3SD	% < -2SD	Mean	% < -3SD	% < -2SD	Mean	% < -3SD	% < -2SD	Mean	
6-11	0	11.4	-0.26	0	14.3	-0.5	0	8.6	0.1	35
12-23	0	4.7	-0.67	0	26.6	-1.17	1.6	7.8	-0.16	64
24-35	1.8	17.5	-0.75	1.8	21.1	-1.17	1.8	7	-0.19	57
36-47	0	10.6	-0.62	0	29.8	-1.16	2.1	6.4	0.07	47
48-60	0	6.9	-0.62	0	13.8	-1.03	0	6.9	-0.01	29
Total	0.4	10.3	-0.61	0.4	22.4	-1.05	1.3	7.3	-0.06	232
(95% CI)	(0%, 1.5%)	(6.2%, 14.5%)		(0%, 1.5%)	(16.8%, 28%)		(0%, 3%)	(3.8%, 10.9%)		
Male	1	13.7	-0.84	1	27.5	-1.19	2	10.8	-0.28	102
Female	0	7.7	-0.43	0	18.5	-0.94	0.8	4.6	0.11	130

Note: %<-2SD includes %<-3SD and also that no children were diagnosed with nutritional oedema

Table 10 Nutritional Status of Children 06-60 months based on BMI-for-Age

Percentage of children (0-60 months) classified as being malnourished according to BMI-for-age							
Age of children (0-60 completed months)	% < -3SD	% < -2SD	% > +1SD	% > +2SD	Mean	Total No.	
6-11	0	5.7	17.1	5.7	0.05	35	
12-23	1.6	12.5	23.4	3.1	0.04	64	
24-35	1.8	7	19.3	5.3	-0.04	57	
36-47	2.1	4.3	27.7	2.1	0.17	47	
48-60	0	6.9	17.2	3.4	0.02	29	
Total	1.3	7.8	21.6	3.9	0.05	232	
(95% CI)	(0%, 3%)	(4.1%, 11.4%)	(16%, 27.1%)	(1.2%, 6.6%)			
Male	2	10.8	16.7	3.9	-0.15	102	
Female	0.8	5.4	25.4	3.8	0.21	130	

Note: %<-2SD includes %<-3SD, %>+1SD includes %>+2SD and %>+3SD; No children were >+3SD

The new WHO Child growth standards allow for the analysis of the nutrition status of children using BMI-for-age as an index for measuring child underweight, overweight or obesity. Analysis of the nutritional status of children using BMI-for-age (Table 10) shows that in total, about 8% of children were calculated as underweight, with a higher percentage (about 11%) of male children being listed as underweight compared to the females (about 5%). Also, about 22% of children were calculated as overweight with a higher percentage of females (about 25%) being more overweight compared to the males (about 17%). The numbers of females over males does not seem to be an explanatory factor here.

4.3.2 Nutritional Status of caretakers in Banda Parish

In a RtF perspective being underweight, overweight and or obese indicates sustenance of an individual on an inadequate diet; this indicates a violation of that individuals RtF. Results of the nutritional assessment of caretakers (Table 11) show that about 8% of adult respondents were underweight, most of them (about 66%) seemed to be of normal weight, about 18% overweight, while about 8% were calculated as obese. A chi-square goodness-of-fit test however indicates there was a significant difference in the BMI categories, $\chi^2 (3, N=235) = 217.07, p=.00$

Table 11 Nutritional Status of caretakers using Body Mass Index (N=235)

Body mass index (BMI) of caretakers in Banda Parish		
BMI range (Kg/m ²)	Frequency	Valid Percent
Underweight (BMI less than 18.5)	18	7.7
Normal (BMI of 18.5-24.9)	155	66.0
Overweight (BMI of 25-29.9)	43	18.3
Obese (BMI greater than 30)	19	8.1
Total	235	100.0

4.3.3 Summary of the nutritional status of children (06-60 months) and their caretakers in Banda Parish

Nutritional assessment of children in Banda Parish reveals that about 22% of the children were stunted, about 10% were underweight while about 7% were classified as wasted. Furthermore, results based on BMI-for-age show that about 8% of the children were underweight while about 22% of the children were overweight and or obese in this assessment. Assessment of the nutritional status of caretakers indicated that about 8% were

underweight, about 18% were overweight while about 8% were obese. Also more than half of the caretakers seem to have normal BMI. Robert et al. (2008) have explained that maternal and child malnutrition is highly prevalent in low-income countries and has resulted in substantial increases in mortality and overall disease burden. Arguing that addressing general deprivation and inequity would result in substantial reductions in undernutrition.

4.4 Awareness of the RtF, employment status and level of education of rights holders in Banda Parish

For realization of the RtF and other related rights awareness is essential⁶¹, conversely duty bearers need to be aware of this right if they are to promote or seek its implementation. This section presents results of the assessment of awareness of the RtF by both rights holders and duty bearers (mainly Nakawa Division Council staff). This is followed by a comparison of the level of education of household heads to the kind of employment they are engaged in and how these may influence accessibility to food.

4.4.1 Presence of programs for awareness raising on the RtF (indicator 17)

As one would expect, awareness of the RtF by residents of Banda Parish was low (Table 12). Of the 235 respondents, only 32 respondents acknowledged having ever heard about the RtF and its provisions in Uganda. This was in conformity with the response by the respondent of UHRC who from the onset cited general unawareness of not only the RtF but also other human rights amongst the public. It was interesting to note though that some rights holders could identify some important aspects of the RtF (Table 12).

Avenues through which rights holders acknowledged having received RtF information were identified as radio (26 respondents), TVs (2 respondents) and healthy workers (4 respondents).

Since UHRC is generally concerned with promoting adherence to issues of human rights in Uganda, the respondent from UHRC was asked whether UHRC carries out programs aimed at creating awareness of the RtF; the respondent replied that:

The main focus has been on civil rights and some few social economic rights. UHRC has however endeavoured to train some members of district local governments on

⁶¹ See also VG 11 on education and awareness raising (FAO, 2004).

issues related to human rights in general with a view that local governments could further sensitise communities about human rights including the RtF.

The above response was further confirmed by the respondent at Nakawa Division Council who was in agreement that some training had indeed been received by the staff of Nakawa Division Council as regards some human rights principles like good governance and accountability although no explicit training on the RtF, adding that, “Very few of the staff at Nakawa Division Council if any understand the meaning of the RtF”.

As a recommendation to what could be done to promote awareness of the RtF for people in slum areas, the respondent of UHRC cited the need for carrying out sensitisation in communities about the importance of the RtF and its associated rights; this in addition to putting in place effective laws that should be enforced by local authorities to ensure that rights holders can claim for their rights.

Table 12 Level of awareness of the RtF by rights holders of Banda Parish

Heard about the RtF	No.	Valid Percent
Yes	32	13.6
No	203	86.4
Total	235	100
What have you heard about the RtF		
Provision of food to needy	8	25.0
Availability of food in the market	8	25.0
Access to food	6	18.8
Forgotten	3	9.4
Food should be safe	5	15.6
Government’s role to ensure food quality	2	6.2
Total	32	100
Source of RtF information		
Radio	26	81.2
Tv	2	6.2
Health worker	4	12.5
Total	32	100

4.4.2 Community programs on nutrition education and awareness (indicator 18)

Nutrition education and awareness may help the population to choose from available foods that satisfy the dietary needs and are free from adverse substances⁶². However, findings of this survey (Table 13) revealed that only 23 (about 10%) rights holders appeared to be aware of the existence of such programs. Of this number, 9 (about 39%) could not tell the name of the organization carrying out the nutrition education. Identified organizations carrying out nutrition education were Goal Banda and Reach Out Mbuya. Goal Banda is a community health centre in Banda Parish that mainly deals with the treatment of minor illnesses while Reach Out Mbuya⁶³ is a community initiative that provides support to people living with HIV/AIDS. It should be noted that Reach Out Mbuya is situated in Mbuya Parish and not Banda Parish.

Table 13 Community Programs carrying out Nutrition Education and Awareness in Banda Parish

Awareness of any program on nutrition education	No	Valid Percent
Yes	23	9.8
No	212	90.2
Total	235	100
Name of organization carrying out the program		
Goal Banda	8	34.8
Reach out Mbuya	6	26.1
Not sure of exact name	9	39.1
Total	23	100

Not to be downplayed, the respondent from Nakawa Division Council hinted that as a measure to address health and nutrition in the whole of Nakawa Division, the Division was involved in implementing a program that promotes health and nutrition. This program was described as being centred on educating individuals on aspects of health, nutrition, environmental hygiene and sanitation; mothers comprising the primary target group for the program. Further, the program was said to be implemented on special occasions like “Child

⁶² Refer also to VG 11 on education and awareness raising.

⁶³ Information about activities of this organization can be seen at <http://www.reachoutmbuya.org/>. Accessed on 14th April, 2010.

Days Plus⁶⁴. The respondent however identified the following challenges as being obstacles to implementing nutrition programs in Banda Parish:

- i. Banda parish is normally used as a temporary settlement for many individuals migrating to the city. After a short while these individuals settle in other areas. So the Parish often has new settlers who cannot always be reached with programs on health education.
- ii. People of Banda Parish do not always bother to spend time on for health/nutrition meetings.
- iii. People have a poor attitude even to helpful projects and in most cases want to be rewarded (paid) for spending time to attend meetings; this the Council cannot afford.
- iv. Nakawa Division Council has inadequate resources; this derails implementation of councils planned activities.
- v. Political interference in councils activities

Despite the above setbacks, the respondent said Local Council members from all Parishes of Nakawa Division are always advised to notify health officials in case they identify severely malnourished children in the community.

4.4.3 Employment status and level of education of household heads in Banda Parish (indicators 3 and 21)

Economic accessibility of food requires that personal or household financial costs associated with acquisition of food for an adequate diet are at a level such that the attainment and satisfaction of other basic needs are not threatened or compromised (CESCR, 1999).

Information on the status of employment and highest level of education attained by household heads in Banda Parish was collected and is as summarised in Table 14. Overall, Table 14 shows that gainfully employed household heads comprised the least percentage (about 8%). Underemployed household heads comprised the highest percentage (about 79%)

⁶⁴ The Government of Uganda began the *Child Days* initiative in 2002. Child Days are a period of accelerated action, organized during two months each year, to provide preventive health services at health facilities, regular community outreach sites, and primary schools. Health workers provide routine and catch-up immunization and vitamin A supplementation for all children under five years and deworming for children from 1 to 14 years. Women of reproductive age are immunized against tetanus. Health workers also offer education on healthy family practices such as breastfeeding, hygiene, and malaria prevention (<http://www.manoffgroup.com/resources/childdaycasestudy.doc>). Accessed 10th April, 2010.

followed by the unemployed (about 12%). In total, as high as about 88% of respondents were employed even though most of them underemployed. However, it should be noted that a low level of unemployment masks the inherent reality that individuals in Uganda are reportedly compelled to engage in some work even for a few hours with very little pay so as to be able to subsist for their families (UBOS, 2006).

Additionally, Table 14 shows that the highest percentage of household heads were O' level graduates (about 46%), followed by primary school leavers (about 25%), and A' level graduates (about 17%). Household heads that had attained diploma/degree/vocational training were only about 9%. When employment status was compared to the level of education (excluding household heads with no formal education), underemployment appeared to be least amongst household heads that had attained a diploma, degree or vocational training.

Table 14 Employment status by level of education attained by household heads (N=226)

Employment status (%)	Highest level of education attained					Total
	Primary	O' level	A' level	Diploma/Degree/ Vocational training	Never attended school	
Unemployed	4.0	3.1	2.2	2.2	0.9	12.4
Underemployed	19.5	39.8	13.3	4.9	1.8	79.2
Gainfully* employed	1.8	3.1	1.3	2.2	0.0	8.4
Total	25.2	46.0	16.8	9.3	2.7	100.0

* Household heads that reportedly earned enough money to meet household financial needs

Going by the reasoning that unemployment and underemployment lead to non existence of economic access to food and that high education is associated to better paying jobs, Table 14 shows that sustainable economic access to adequate food by households in Banda Parish appears to be impeded by high levels of underemployment coupled with low levels of education of household heads in this area.

4.4.4 Summary on awareness of the RtF, employment status and level of education of household heads in Banda Parish

Rights holders seem to be grossly unaware of the RtF, the very few who seem to be aware of this right got information either from radio, TV or from health workers. The respondent of UHRC acknowledged unawareness of not only the RtF but also other human rights amongst the public. However, UHRC was reportedly involved in training members of local governments in human rights with a view that they (members of local governments) would further carry out awareness of human rights in the communities under their jurisdiction.

Despite the said training in human rights by the respondent at UHRC, the respondent of Nakawa Division Council doubted whether any of the staff of Nakawa Division Council understood the meaning of the RtF; pointing out that training in human rights at Nakawa Division Council had only been about governance and accountability but not on the RtF in particular.

As regards programs on nutrition education and awareness, a high percentage of rights holders appeared unaware of any such program in Banda Parish. The very few who said they were aware identified Goal Banda and Reach out Mbuya as being organizations that carry out nutrition education and awareness to the people of Banda Parish. It should be noted however that both these organizations are established as small community health centres that (as is the norm) offer nutrition education and awareness to only those who seek such services from the centre. Nakawa Division Council also reportedly carries out nutrition education on Child Days Plus; the Council is however said to be faced with financial constraints that limit implementation of nutrition programs. The migratory patterns of people of Banda Parish, attitude towards nutrition programs and political interference in Council activities were also cited as probable hindrances to implementing nutrition programs in this area. Economic accessibility to adequate food in Banda Parish appears to be hampered by high underemployment of household heads. High underemployment also appears to be related to the low levels of education attained by household heads.

4.5 Availability and accessibility to safe food, water, health services and the state of hygiene and sanitation in Banda Parish

Requirements for food safety involve taking protective measures by both public and private means to prevent contamination of foodstuffs through adulteration and/or through bad environmental hygiene or inappropriate handling at different stages throughout the food chain. This is in addition to taking care to identify and avoid or destroy naturally occurring food toxins (CESCR, 1999).

4.5.1 Availability and accessibility to safe food

Table 15 shows that about 50% of the respondents bought their household food from the local food market. However respondents also said that bought food from local shops and from people selling food at the roadsides. Majority of the respondents (about 77%) reported their households as having gone with little or almost no food in the past month. Out of the total number of households going with little or no food, about 29% of respondents reported having

gone without food for more than 10 times in a month. Lack of resources (money) to buy food was reported to be the biggest challenge to accessing food (about 71% of respondents). This was followed by high food prices (about 26% of respondents). Unavailability of desired food(s) was not a big challenge to almost all the respondents.

Table 15 Sources of food and factors hindering access to safe food in Banda Parish

Main Source of food	No	Valid Percent
Roadside food sellers	39	16.6
Local shops	78	33.2
Local food market	118	50.2
Total	235	100
Are there times households go with little or no food		
Yes	182	77.4
No	53	22.6
Total	235	100
Number of times with little or no food		
Rarely (1-2 times in past month)	64	35.2
Sometimes (3-4 times in past month)	66	36.3
Often (more than 10 times in past month)	52	28.6
Total	182	100
Factors hindering access to safe food		
Unavailability of desired food	4	1.7
Lack of resources to buy food	166	70.6
High food prices	61	26
None of the above	4	1.7
Total	235	100

The revelation that lack of enough money to buy food is more of a constraint to accessing adequate food in Banda Parish is consistent with Amartya Sen's argument on the relationship

between poverty and entitlements⁶⁵ and could also be linked to apparently high levels of unemployment as was discovered in Banda Parish.

When asked to comment on the nature of the food market in Banda Parish (as regards to possibility of food contamination), the respondent of Nakawa Division had this to say:

The food market in Banda Parish is owned by a private individual who also runs it. However, the general condition of the market is poor due to lack of proper food storage, poor hygiene and sanitation. The council however tries to offer advice on how to maintain good hygiene and sanitation so as not to contaminate foods sold from the market. Currently the council has no plans of constructing a modern market in the area and as such people are advised to use Nakawa Central market which has better facilities and is considered to be a bit more hygienic.

4.5.2 Availability and accessibility to safe water (indicator 4)

Four main sources of water for households were identified in Banda Parish (Table 16).

Table 16 Main source(s) of water for residents of Banda Parish

Source of water	No	Valid Percent
Unprotected well or spring	10	4.3
Piped to house	8	3.4
Bought from public tap	140	59.6
Protected well or spring	77	32.8
Total	235	100
Ability to always buy water		
Yes	57	40.7
No	83	59.3
Total	140	100

Of these, a higher percentage (about 60%) of respondents interviewed indicated public taps as being their main source of water, these were followed by respondents who got water from protected wells or springs (about 33%). Although relatively few (about 4%) of the

⁶⁵ Sen (1991) argues that “Starvation is the characteristic of some people not *having* enough food to eat. It is not the characteristic of there *being* not enough food to eat”.

respondents reported their main source of water as being unprotected wells or springs. See the photos below for a typical appearance of an unprotected spring and a protected well in Banda Parish.



Unprotected spring



Protected well

Photos taken in Banda Parish by Kato Peterson Kikomoko

It should be remembered that Nakawa Division Council reported that water from wells and springs (whether protected or unprotected) in Nakawa Division was grossly contaminated. This means that only 63% of the respondents who reported using water from taps had access to safe water. Never the less, of the 140 respondents who bought water from public taps, about 59% found it a challenge to always buy water in the amounts required by their households.

As regards availability and accessibility to safe water, the respondent of UHRC said that attempts to provide clean and safe water had been done although the poor were not effectively targeted. An example given was the construction of water lines mainly nearer the main roads with very minimal inland penetration to the places occupied by the poor. On the part of Nakawa Division, the respondent made several comments regarding accessibility to water as shown below:

- i. The division in collaboration with National Water and Sewerage Cooperation tried to extend water connection points near to the zones, what remains is for the landlords to pay up for water connection to these points.

ii. Protected wells and or springs were put in place however the water is considered to be contaminated partly due to general poor sanitation in the area and also due to the presence of an industrial area that contributes to water contamination. To reduce on water contamination:

- Diversion channels are being constructed before the water source to divert any flowing water
- Springs have been fenced off to avoid animals contaminating water
- Grass is being planted on water spring boxes
- People are being discouraged from washing around the water spring boxes
- Sign posts of how to make water safe for consumption are envisioned to be put in place

4.5.3 State of hygiene and sanitation in Banda Parish (indicator 5)

Table 17 indicates that the majority of respondents (about 67 %) seem not to have access to adequate toilet facilities⁶⁶ in Banda Parish. While in the field, some respondents described the lack of toilet facilities as being a big challenge to them since they had to always pay money to be able to use available public toilets in the area. Since many could not always afford to pay money for each individual in the household, it was reported that some household members make use of polythene bags which they later dispose off with the rubbish.

The respondent at Nakawa Division Council said that:

To provide public toilets, the Council needs to own land onto which public toilets can be constructed. The Council however does not own any such land and people have refused to avail free land that can be utilised by the Council. With help from Red Cross, an Ecological Sanitation (EcoSan) toilet was constructed in Zone 3 but this was misused by the public and is now non functional.

Waste disposal in Banda Parish was found to be inappropriate. As shown in Table 17, the highest percentage of respondents (about 48%) reported to be disposing waste in open pits, about 28% reported to be disposing waste in open pits and later burning it, while about 6%

⁶⁶ Refer to indicator 5 in Appendix A for a description of what is meant by adequate toilet facilities.

buried the waste in open pits. About 13% of the respondents said they disposed off waste at division collection points. The point of contention was that a visit to the mentioned waste disposal sites showed that most sites were filled up with un-burnt or buried waste as shown in the photo below. Also division waste collection points could not be clearly identified in the different zones.

Table 17 Toilet facilities and waste disposal in Banda Parish

Nature of Toilet facilities	No	Valid Percent
Adequate	78	33.2
Inadequate	157	66.8
Total	235	100
Place for waste disposal		
Open pit	113	48.1
Open pit and burnt	66	28.1
Open pit and buried	13	5.5
Division waste collection point	30	12.8
No particular place	13	5.5
Total	235	100

On how Nakawa Division had dealt with waste disposal, the respondent at the Council reported that:

It is considered the duty of a person who generates waste to properly dispose of that waste. The division initially operated waste skips but these were phased out because landowners where the skips were being placed always wanted the Council to rent the land an act that was considered expensive for the Council. This was made worse by the fact that the Council does not own land were such skips could be placed in Banda Parish. This situation makes waste disposal difficult. Were waste skips could still be placed, removal of these skips took long even after the skips were full. This was due to lack of enough vehicles that can timely collect waste from the various zones. Land owners over complained of this delay leading the council to phase out use of waste skips.



Waste disposal site in one of the zones of Banda Parish. Photo taken by Kato Peterson Kikomoko

4.5.4 Access to health facilities by residents of Banda Parish

The highest percentage of respondents interviewed (about 69%) said that in case any of their household members fell sick, immediate treatment was sought from private clinics (Figure 9). These were followed by about 16% of respondents who would go to established community health centres for treatment. Respondents who directly sought treatment from a hospital were only about 7% of the total respondents. Still some respondents reported to use self medication in case of disease. Important in this study was to identify accessibility to a health worker whether in the community or outside, therefore as such this study did not establish why a far higher percentage of respondents went to private clinics that only deal with the treatment of minor ailments instead of going to established community health centres or a hospital. It seems evident however that over 90% of the respondents in Banda Parish could have access to a health worker in case of disease.

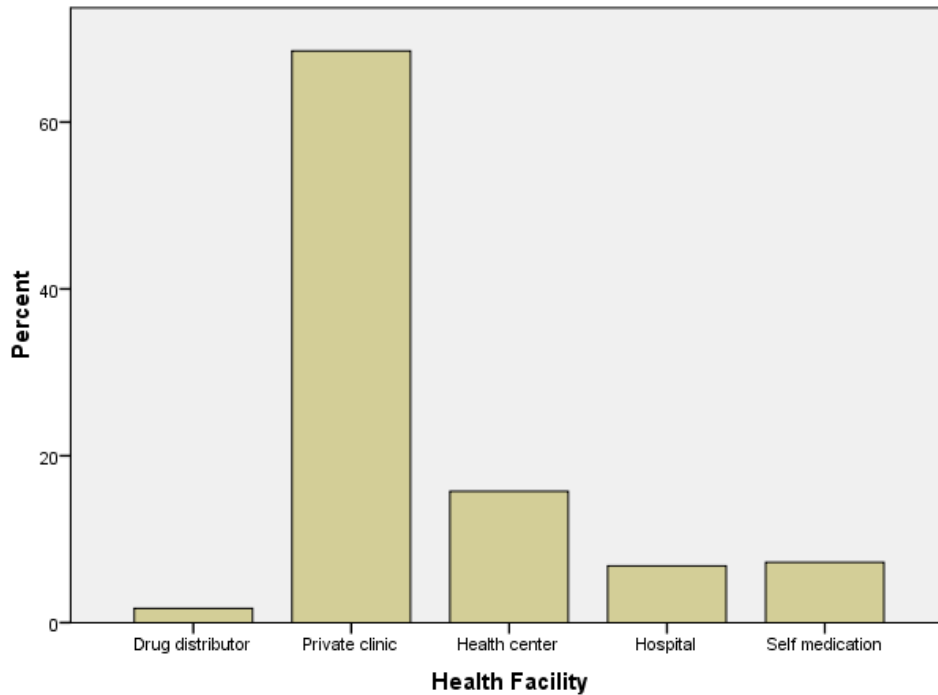


Figure 9 Percentage of rights holders having access to Health Facilities (No=235)

4.5.5 Summary on the availability and accessibility to safe food, water, health services and state of hygiene and sanitation

Almost all right holders interviewed in Banda Parish buy rather than grow food needed by their households. The highest percentage of respondents (about 50 %) interviewed reportedly bought their food from the local food market. Other sources for food were roadside food sellers, and the local food shops. About 71% of the respondents who acknowledged having at least gone with little or almost no food cited lack of money to buy enough food as the most limiting factor to accessing safe food; this was despite that food is available in the market.

The level of food safety in the food market was reported to be compromised by lack of proper food storage, and general poor hygiene and sanitation in the market. Suffice to say that general environmental hygiene and sanitation was also poor in the Parish with about 67% of the respondents having no access to adequate toilet facilities. Making matters worse waste is poorly disposed off into pits or surfaces that are left unattended for long even when full. Nakawa Division Council was reportedly constrained by lack of resources to buy land onto which to construct public toilets and or place garbage collection skips so as to improve on environmental hygiene and sanitation in Banda Parish.

As regards to water and accessibility to health facilities, most of the respondents had access to piped water (about 63%). Never the less, about 59% of respondents that bought water from public taps found the water to be expensive for them to buy it in required amounts. Despite efforts to construct protected wells and springs in Banda Parish, a percentage of respondents (about 4%) still used water from unprotected wells and springs. Even then, underground water in Banda Parish was reported to be grossly contaminated because of the adjacent industrial area that was thought to contribute to water contamination. In this case whether wells are protected or not, the water seems already to be exposed to industrial pollutants. As stated by a respondent at UHRC, accessibility to safe water is constrained by ineffective targeting of the poor as water lines are mainly only laid along main roads, away from where the poor stay. Impressively, above 90% of respondents had access to a health worker in case of a disease infection. Sadly however, 69% of the respondents sought treatment from private clinics in the area; these clinics only deal with the treatment of minor ailments.

4.6 Adherence of existing processes considered necessary for the realization of the RtF in Banda Parish to key human rights principles (indicator 22)

The last but not least objective of this survey was to identify some of the human rights principles that appear to be violated by duty bearers of Banda Parish in implementing would be RtF related activities. This was made possible through the interviews that were carried out with duty bearers while at the same time drawing from responses made by rights holders.

Both duty bearers that were interviewed said corruption was the biggest hindrance to implementation of the RtF. Other issues identified included; not giving the RtF the same interest as that given to civil and political rights, political interference in implementing human rights, poor targeting of policies to the vulnerable groups, and a failure to include the local community in the implementation of all local projects.

However, as regards to including rights holders in the implementation of local projects, the respondent at Nakawa Division Council emphasised that the Council sometimes involves local communities in choosing developmental projects to be undertaken in the Parish. An example was given of a case where Banda community members on being consulted chose construction of roads, water drainage channels, and the improvement in garbage collection as their areas of interest.

5. Conclusion

5.1 State of dietary diversity in Banda Parish

The nutrition adequacy of diets, indicated by dietary diversity, in Banda Parish was inadequate and did not reach the normative specification corresponding to the specifications in GC 12. Overall, there was a lower consumption of animal based food groups compared to plant based food groups.

5.2 Nutritional status of children (06-60 months) and their adult care takers in Banda Parish

The level of malnutrition in Banda Parish is high. This is contrary to the obligation that States should ensure freedom from hunger and malnutrition for all people under their jurisdiction as specified in GC 12. Rights holders should not be satisfied with this situation.

5.3 Availability and accessibility to appropriate legal, regulatory and institutional structures considered necessary for the realisation of the RtF of people of Banda Parish

Having ratified the ICESCR, Uganda is internationally bound to ensure progressive realization of the RtF for all people living in the country. The RtF is included in Uganda's constitution and it appears this right could be justiciable under article 45 of the same constitution. However, even with the presence of the UHRC, the availability of recourse mechanisms for violations of the RtF for people of Banda Parish appears to be contentious. This seems to be further complicated by the likely lack of an authority recognised by rights holders as being mandated to receive RtF complaints in Banda Parish.

5.4 Awareness of the RtF, employment status and level of education of rights holders in Banda Parish

As identified, rights holders seemed grossly unaware of the RtF. This may mean that if left unaware, rights holders will never claim for this right even when it is violated. Duty bearers (such as the Nakawa Division Council members) seem also unaware of the provisions of the RtF. Further more, a high percentage of rights holders appeared unaware of the existence of programs promoting nutrition education and awareness in Banda Parish.

The high level of underemployment of household heads coupled with low levels of education also appears to be a hindrance to realization of the RtF for slum dwellers of Banda Parish.

5. 5 Availability and accessibility to safe food, water, health services and the state of hygiene and sanitation in Banda Parish

Almost all rights holders interviewed in Banda Parish buy rather than grow household food. Accessibility to food is reportedly mainly constrained by a lack of enough money to buy food rather than the availability of food on the market. There is legal provision for food safety in Uganda. Despite this food seems often to be unsafe. This could be a major challenge hindering the accessibility of slum dwellers to safe food in Banda Parish. Further, ensuring food safety for the residents of Banda Parish also appears to be constrained by the likely lack of coordination amongst the different agencies that carry out food safety activities.

In the market, food safety appears to be compromised by poor food storage and general poor hygiene and sanitation around the market. Despite this, Nakawa Division Council has limited intervention since the market is privately owned and managed.

Hygiene and sanitation in the various zones of Banda Parish is poor; this is marked by poor waste disposal and the lack of access to adequate toilet facilities. It seems however that there is minimal intervention by Nakawa Division Council to improve on this situation reportedly due to inadequate funds by the council. This includes also access to tap water which seems safer to use compared to ground water. Never the less people that bought water from public taps said the water is expensive. Most of the respondents had access to a health worker

5. 6 Adherence of existing processes considered necessary for the realization of the RtF in Banda Parish to key human rights principles

It can be concluded that the following human rights principles are not fully complied with. These include accountability, indivisibility of human rights and participation of rights holders in owning local projects that could facilitate their realization of the RtF. The lack of accountability may mean that duty bearers are not answerable to the rights holders of Banda Parish and that aggrieved rights holders can not seek appropriate redress due to the high corruption. On the other hand a failure to include the rights holders in all local projects leads to people disowning such projects and related policies; a situation that may be counterproductive.

5.6 Overall conclusion

It can thus generally be concluded that the RtF is not reached in Nakawa Division, and resources used for addressing existing constraints to attain the RtF in Banda Parish seem

inadequate. Probably more political will and commitment could be desirable so as to address such constraints.

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Appendix A: Description of used indicators in relation to the core content of the right to adequate food

Aspect of RtF Category of Indicator	Adequacy			Availability	Accessibility	
	Dietary needs	Food safety	Cultural acceptability		Physical	Economic
Outcome	1. Individual dietary diversity score (IDDS) 2. Undernutrition (stunting, wasting, underweight, low BMI)				3. Employment status of head of household (unemployment, underemployment) as an indicator of poverty. Unemployment will include all persons without work at time of survey i.e. not in paid employment or self employment. Underemployment will include those in paid/self employment but not in the desired capacity, in terms of compensation for work done	
Outcome	4. Access to improved water source (improved if; household water connection, public standpipe, borehole, protected dug well or spring, rainwater collection. Not improved if; unprotected well or spring). 5. Percentage of respondents without access to improved sanitation (adequate if excreta system is private or shared but not public and if it hygienically separates excreta from human contact. Inadequate if it is public, latrines with open pit or use of buckets with manual disposal excreta).					
Structural	6. Recognition of RtF and related rights (at National/Local level, coverage of all marginalised and disadvantaged groups by instruments on the RtF). 7. Independent National Human Rights institution (mandate to receive and investigate RtF complaints) 8. Administrative, quasi-judicial and judicial mechanisms to provide adequate, effective and prompt remedies regarding violations of the RtF 9. National strategy for implementing the right to food (presence of policies/programs for implementing the RtF in slum areas)					
	10. Food safety and consumer protection legislation (existence of regulatory agencies, use of Codex Alimentarius, presence of consumer protection courts and ombudspersons). 11. Instruments to ensure cultural or traditional food use (regulations to check cultural acceptability of food aid, awareness raising for duty bearers to respect/protect/fulfil cultural or traditional food use).				12. Protection of labour conditions and enhancement of access to labour (adequate remuneration, minimum wage, legislation that promotes and protects self employment). 13. Availability of social transfer scheme (financial assistance, food assistance, school feeding programs).	
				14. Mechanisms to ensure a functioning market system (protection of consumers from fraudulent market practices and unsafe food).		

Process	15. RtF complaints by slum dwellers filed, investigated and adjudicated in court (complaints particularly concerning the right to be free hunger).	
	16. Presence or RtF claimants benefiting from legal aid (financial of physical help to those who cannot afford to take action in order to realise the right to food).	
	17. Presence of programs for awareness raising on the RtF	
	18. Presence of community programs on nutrition education and awareness.	20. Presence of feeding programs for the most marginalized and disadvantaged in community
19. Frequency of food inspections to regulate and monitor food standards		
21. Education level of head of household		
22. Human rights principles		

Appendix B: Rationale for selecting indicators shown in annex 1 in relation to the types of State obligations on the RtF

Indicator	Rationale	State obligation
1	A more diversified diet is highly correlated with such factors as caloric and protein adequacy, percentage of protein from animal sources (high quality protein), and household income. Even in very poor households, increased food expenditure resulting from additional income is associated with increased quantity and quality of the diet.	All levels
2	Undernourishment is the most recognizable symptom of inadequate food intake and therefore the most important outcome indicator for RtF.	Fulfil
3	Unemployment and underemployment lead to non existence of economic access to food.	Fulfil
4	Sustained access to an improved water source is intrinsically linked to the RtF as safe water is needed for cooking, drinking, maintaining hygiene and other aspects impacting the RtF	All levels
5	Inadequate sanitation can severely reduce an individual's capacity to absorb and utilize nutrients from food and can result in malnourishment even when food intake itself is adequate	All levels
6	Recognition of the right to food and related rights is a fundamental first step for a State to realize food security or to realize Art. 11 ICESCR; it is essential for the justiciability of the right to food.	All levels
7	Independent national human rights institutions are essential for the justiciability and eligibility of the right to food as well as for the identification of the accountability of the different branches of the state.	All levels
8	Adequate remedies are – especially for marginalized and disadvantaged groups – the normative basis for the enforceability of the right to food. It has to be guaranteed that due process is available in all legal proceedings. This indicator covers the justiciability/accountability aspect of the right to adequate food.	All levels
9	This helps the state to identify clear targets, goals or benchmarks for future political decisions. It is also an important step for the state to recognize its responsibilities and to bundle up its efforts.	All levels
10	For food to be adequate, it is necessary to ensure that available and or accessible food is free from adverse substances. This objective has to be protected by food safety and consumer protection legislation.	Protect, fulfil
11	Marginalized and disadvantaged groups often have specific cultural or traditional diets, food or eating habits, whereby they react very sensitively to changes in their food use. Therefore it is necessary to ensure that all actors respect and protect these habits.	Respect, protect
12	The protection of core labour standards ensures employment conditions that enable the employee to earn enough to maintain subsistence.	Protect, fulfil
13	VG 14 encourages states to consider establishing and maintaining social safety and	Fulfil

	food safety nets to protect those who are unable to take care of themselves.	
14	States have to improve the functioning of their markets, in particular the food markets. Only a functioning market is able to ensure sustainable availability and accessibility to sufficient safe food.	Fulfil
15	This indicator describes the effectiveness of remedies regarding the legal enforceability of right to food by means of judicial remedies.	All levels
16	Effective realization of the RtF necessitates provision of adequate, effective and prompt legal remedies for violations of this right. To have a non-discriminating effect of such legal remedies, marginalized and disadvantaged groups often need legal aid to enforce their rights. Therefore this indicator covers the accessibility of legal actions for marginalized and disadvantaged people.	All levels
17	The realization of the right to food and other related rights has the awareness of this right as a precondition. Without certain knowledge of the right to food and the possibilities of remedies in the case of its violations a rights holder is deprived of this rights without knowing it.	All levels
18	Education and awareness concerning nutrition may help the population to choose from available foods that satisfy the dietary needs and are free from adverse substances.	Fulfil
19	The consumed food has to be in accordance with the standards of food adequacy. Important aspects of food adequacy are food safety or the traditional or cultural acceptance of the food consumed.	Protect
20	Feeding programs are the only way to ensure for the most marginalized and disadvantaged groups adequate food intake, because they are deprived of all means to that by their own.	Fulfil (provide)
21	Level of education is related both to nutritional awareness and to the ability of getting employment	All levels
22	Adherence to all human rights principles is essential for promoting realization of the RtF	All levels

Appendix C: Questionnaire A (administered to right holders in Banda parish)

A survey of challenges to realising the Right to Adequate Food in Banda Parish. Questionnaire A: For rights holders (selected respondents in Banda parish)			
No.	Questions and filters	Coding categories	
001	Questionnaire number including zone, household (HH) number, and date.	Questionnaire no. _____ Zone ____ HH _____	Date (dd-mm yr) _____
002	How are you and the other household members?		
003	Respondent screening Are you -above the age of 18 And a Mother/father/brother/sister/cousin/caretaker of a child 06-59 months of age	If none of the children in the HH falls between the age range, respondent should not be interviewed	Yes No

Introduction and Consent

My name is _____. I am conducting a survey about the challenges faced by households in Banda parish in realising their Right to adequate Food. This survey is part of a master's dissertation and is to be conducted at different levels. The questions I am going to ask you are part of those which are being asked at the community level and it is estimated that the questionnaire will take 30-45 minutes to complete.

I will very much appreciate your participation in this survey. Whatever information you provide will be kept strictly confidential and will not be shown to other persons not associated with this study. Also, no identifying information about you will be kept with the survey responses. Participation in this survey is completely voluntary and you can chose not to answer any individual questions or all of the questions. You may also stop participation at any time. However, i hope that you will participate fully in this survey since your views are considered very important.

As part of the survey, I would also like to take some height and weight measurements of both you and one child in this household (the child should be in the age range of 06-59 months). This information will allow me to assess the health and nutritional status of children and adults in this area. If you accept, we will take two measurements of height and two measurements of weight, to ensure the information is consistent and correct. There will be no risk to either you or the child, and no one shall experience any discomfort whatsoever.

Do you have any questions about the survey?
Do you have any questions about the measurements we will take?
Please let me know if anything I have stated is not clear and I will be happy to explain it further to ensure you understand.

Do you accept participating in the survey and measurements of height and weight of both you and your child?
Yes _____
No _____

signature: _____

004	Who is the head of this household?	Father_____1 Mother_____2 Aunt/uncle_____3 Grandparent_____4 Child (less than 18yrs)_____5 Other(specify)_____6	
005	What is the total number of people living in this household?	Total number _____	
006	Have you heard about the human right to adequate food and any of its provisions in Uganda?	NO _____1 YES _____2	If no go to 009
007	What have you heard about the Right to adequate Food? (Record respondent response)	Provision of food to needy_____1 Availability of food in markets_____2 Access to food_____3 Forgotten_____4	
008	From which source did you hear/learn about the Right to adequate Food?	Radio_____1 Tv_____2 Newspaper_____3 Other(specify)_____	
009	What is the main source of water for members of this household?	NOT IMPROVED1 Unprotected well or spring Truck delivered IMPROVED WATER2 Piped to house Bought from public tap water Borehole Rainwater Protected well or spring	
010	If water is bought from a public tap, do you always find it affordable to buy it in required quantities?	NO _____1 YES _____2	
011	What kind of toilet facilities does your household use? (Request to take a look at the toilet facilities if they are located out of the house and comment on hygiene below)	INADEQUATE1 Public toilet or latrines Open pit No facility/use of buckets for manual disposal ADEQUATE2 Private/shared toilet or latrine	
012	How do you dispose off your household refuse/rubbish?	Open pit____1 Open pit & burnt____2 Open pit & buried____3 Division Garbage collection point____4 No particular place (anywhere)____5 Other (specify)_____6	
013	Which form of fuel do you use for preparing food in this household?	Wood____1 Charcoal____2 Kerosene____3 Gas____4 Electricity____5	
014	If you or another household member is sick, where do you go for treatment first?	Traditional healer____1 Drug distributor____2 Private clinic____3 Health centre____4 Hospital____5	

		Self medication_____6	
015	Are you aware of any community programme(s) in Banda that is/are carrying out nutrition education and awareness?	NO _____1 YES _____2	If no go to 017
016	Can you tell us which programme(s) that is/are? (Respondent to give details)	_____ _____ _____	
017	How would you classify the employment status of the head of this household? (Prompt respondent to describe type of work done, then mark appropriately amongst the different alternatives)	UNEMPLOYED ____1 Neither in paid employment nor self employment at time of survey UNDEREMPLOYED ____2 In paid/self employment but receive low pay at time of survey GAINFUL EMPLOYMENT __3	
018	In your opinion, do you think the government has protected working conditions for people in this area?	NO _____1 YES _____2	If yes go to 020
019	What evidence can you give to show that the government has not protected working conditions?	Poor working conditions____1 Inadequate pay____2 Job insecurity____3 Other (specify)_____4	
020	How do you acquire food that is eaten in this household?	Home grown____1 Purchases____2 Both____3 Other (specify)_____4	
021	From which of the following places do you purchase the foodstuffs that you consume in this household?	Road side food sellers____1 Local shops____2 Local food market____3 Supermarket____4 Other_____	
022	Are you always satisfied with the quality and safety of foods you buy?	NO _____1 YES _____2	If yes go to 024
023	If no, why do you go ahead to buy this food? (Record respondents response)		
024	Are you aware that there is a statutory body mandated to set, monitor and regulate food safety and quality standards in Uganda?	NO _____1 YES _____2	If no go to 027
025	Can you tell us which body that is? (respondent to give response)		
026	Have you at any one time seen an official from this body in this locality carrying out food inspection?	NO _____1 YES _____2	
027	Have you heard of food sellers talking about having been inspected by officials from this body?	NO _____1 YES _____2	
028	Would you say that food sellers cheat customers in this area?	NO _____1 YES _____2	
029	Have you ever been cheated by a food seller at any one time in this area?	NO _____1 YES _____2	If no go to 036
030	How were you cheated?	Sold to food of :	

	(were necessary explain terms such as food adulteration⁶⁷)	less quantity_____1 Poor quality_____2 Adulterated_____3 Expired food_____4 Highly priced food_____5 other (specify)_____6	
031	Have you ever reported any such claim to an authority?	NO _____1 YES _____2	If no go to 035
032	Which authority/organ/individual did you report to?	Chairman of the market_____1 Local council Member _____2 Consumer protection Court_____3 Other (specify)_____5	
033	Was there any effective action taken against the seller?	NO _____1 YES _____2	
034	Can you tell us which action was taken? (record response)		
035	Why do you think people do not report such cases?	Unaffordable legal costs_____1 No one/where to report_____2 No action is taken against the sellers_____3 Long procedure involved_____4 Other _____(specify)___5	
036	Which of the following mostly hinders your household access to enough food? (Read out the different options slowly to the respondent and tick what applies)	Unavailability of desired foods in markets/shops_____1 Lack of resources to buy enough foods_____2 High food prices_____3 None_____4	
037	Are there times this household goes with little or almost no food because of a lack of resources to buy enough food?	NO _____1 YES _____2	If no go to 039
038	How often has this happened in the past month?	Rarely(1 to 2 times in the past four weeks)_____1 Sometimes(3 to 4 times)_____2 Often(more 10 times in the past four weeks)_____3	
039	Has your household ever received any form of assistance to meet food needs when under such conditions?	NO _____1 YES _____2	If no go to 044
040	Which form of assistance did your household receive?	Financial assistance_____1 Food aid_____2	
041	From which source did your household receive this assistance? (Record respondents response)		
042	In case you received food aid, did you find the food	NO _____1	

⁶⁷ “adulterate produce” means to falsify, deteriorate or increase the apparent bulk or weight, or conceal the inferior quality of produce by the combination, admixture or addition with it or to it of some foreign, superfluous or inferior substance, matter or thing, whether deleterious or not, or by the addition of water, or by the use of artificial means, and includes abstracting from produce part of it so as injuriously to affect its nature, substance or quality (The Uganda Adulteration of Produce Act)

	acceptable to you and other household members?	YES _____ 2					
043	If no, what was wrong with the food? (Record respondents response)						
044	What is the highest level of education completed by the head of this household?	Primary _____ 1 Secondary(O' Level) _____ 2 Secondary(A' Level) _____ 3 Diploma/Degree _____ 4 Don't know _____ 5					
INDIVIDUAL DIETARY DIVERSITY SCORES (IDDS)							
	I would like to know the foods you ate, please describe for me the foods (including snacks) you ate yesterday during day and night, whether at home or outside home. Please start with the foods eaten in the morning.						
045	Breakfast	Snack	Lunch	Snack	Dinner	Snack	
After respondent recall, record all foods eaten above under respective food groups and for any missing food group, ask the respondent if any food item in that group was eaten.							
046	Cereals			Corn/maize, rice, wheat, sorghum, millet or any other grains or foods made from these			
047	Vitamin A rich vegetables and tubers			Pumpkin, carrots, orange/yellow/purple sweet potatoes			
048	White roots and tubers			White potatoes, white yams, white cassava, or other foods made from roots			
019	Dark green leafy vegetables			Dark green/leafy vegetables, including wild ones + locally available vitamin-A rich leaves such as dodo, nakati, jobyo, cassava leaves, spinach etc.			
050	Other vegetables			Other vegetables (e.g. tomato, onion, eggplant) , including wild vegetables			
051	Vitamin A fruits			Ripe mangoes, ripe papaya, papaya, water melon, jackfruit, banana			
052	Other fruits			Other fruits, including wild fruits			
053	Organ meats			Liver, kidney, heart or other organ meats or blood-based foods			
054	Flesh meat			Beef, pork, lamb, goat, rabbit, wild game, chicken, duck, or other birds			
055	Eggs			Chicken, duck			
056	Fish			Fresh or dried fish			
057	Legumes, nuts and seeds			Beans, peas, lentils, nuts, seeds or foods made from these			
058	Milk and milk products			Milk, cheese, yogurt or other milk products			
059	Oils and fats			Oil, fats or butter added to food or used for cooking			
Anthropometric measurements section							
Children 06 to 59 months of age						Sex	
060	Child's birth date (dd/mm/yr)			_____			
061	Weight (kg)			First measure _____ kg Second measure _____ kg			M F
062	Presence of bilateral oedema			NO _____ 1 YES _____ 2			
063	Height (cm)			First measure _____ cm Second measure _____ cm			

	Adults (18 years and above of age)		Sex
064	Weight (kilograms)	First measure _____ kg Second measure _____ kg	M F
065	Height (cm)	First measure _____ cm Second measure _____ cm	

Thanks so much for participating in this

Appendix D: Questionnaire B (administered to Uganda National Bureau of Standards)

A survey of challenges to realising the Human Right to Adequate Food in Banda Parish. Questionnaire B for duty bearers (Uganda National Bureau of Standards)			
	Position held by respondent	_____	
001	Are you aware of the human right to adequate food and state obligations on this right as stipulated in GC 12?	NO_____1 YES_____2	
002	Can you name any of the state obligations regarding the right to adequate food? (Tick all that apply but respondent should not be prompted to answer)	Respect_____1 Protect_____2 Fulfil_____3 No answer_____4	
003	Would you say the right to adequate food is recognised in Uganda?	NO_____1 YES_____2	If no go to 005
004	Can you name any documents/policies/strategies that recognise the RtF food in Uganda?	Uganda constitution___1 Uganda Food and Nutrition Policy (UFNP)____2 Uganda Food and Nutrition Strategy_____3 Other (specify)_____4	
005	Your institution is represented on the Uganda Food and Nutrition Council (UFNC). Are you aware of this?	NO_____1 YES_____2	
006	What role does your institution play in promoting realisation of the Rtf in Uganda?		
007	Are your institution and its staff aware of their tasks and their role as duty bearers in promoting the RtF?	NO_____1 YES_____2	
008	Would you say that all foods accessed by slum dwellers conform to food safety and quality standards set by your institution?	NO_____1 YES_____2	
009	What are the commonest food malpractices that your institution has identified as existing in slum areas? (Tick all those that apply)	Selling food that is of : less quantity_____1 Poor quality_____2 Adulterated_____3 Expired_____4 Highly priced_____5 Other_____6	

010	Does your institution have the capacity to monitor and curb such malpractices by food sellers?	NO____1 YES____2	If no go to 012
011	What would you say constrains the capacity of your institution in effectively carrying out its activities? (Tick all those that apply)	Insufficient Human resource____1 Poor motivation amongst staff____2 Inadequate funding____3 Inadequate staff training____4 Poor coordination with other authorities____5 Other_____6	
012	Which mechanisms does your institution have in place to promote food safety and consumer protection? (Tick all those that apply and note the rest)	National food standards____1 Food labelling____2 Use of Codex Alimentarius____3 Others_____4	
013	With such mechanisms, what would you say is the cause of reported food malpractices in slum areas? (Respondent to give reasons)	_____ _____ _____ _____	
014	Do we have consumer protection courts were individuals can report such malpractices?	NO____1 YES____2	If no go to
015	Would you say that these courts are easily accessible by the marginalised or poor people?	NO____1 YES____2	
016	Is there legal assistance given to slum dwellers to seek redress for violations of their right to food?	NO____1 YES____2	
017	Does your institution carry out public awareness particularly in slum areas to promote food safety and food quality?	NO____1 YES____2	
018	Are you aware that people in slum areas buy food (including ready to eat cooked foods) from road side sellers or informal degazatted areas?	NO____1 YES____2	If no go to 020
019	Would you say these foods are hygienically safe to consume?	NO____1 YES____2	

020	What has your institution done about this? (Record respondents response)	_____ _____ _____ _____	
021	Does your institution carry out food standards inspection in slum areas?	NO_____1 YES_____2	
022	How often is this done?		
023	The Nakawa Division development plan reports that individuals selling food in informally degazatted areas in the division are not medically examined, and certified to sell food. Do you agree?	NO_____1 YES_____2	If no go to 024
024	As a body mandated to implement food safety and quality standards, what have you done about this? (Respondent to give details)	_____ _____ _____ _____ _____ _____	
025	Has UNBS taken any measures to ensure cultural or consumer acceptability of available or accessible food?	NO_____1 YES_____2	
026	Which of the following human rights principles do you think are not fully observed in promoting realisation of the RtF for slum dwellers? (Tick all those that apply)	Transparency of duty bearers_____1 Non discrimination_____2 Community participation and inclusion__3 Accountability and rule of law_____4 Universality_____5 Interdependence and inter-relatedness_____6	
027	What do you think remains to be done to ensure that business operators adhere to selling of foods conforming to national food standards?		

Thanks so much for accepting to participate in this survey; I will endeavour to share results of this survey with your institution.

Appendix E: Questionnaire C (administered to Uganda Human Rights Commission)

A survey of challenges to realising the Human Right to Adequate Food in Banda Parish. Questionnaire C duty bearers (Uganda Human Rights Commission)			
	Position held by respondent	_____	
001	Are you aware of the human right to adequate food and state obligations on this right as stipulated in GC 12?	NO_____1 YES_____2	
002	Would you say the right to adequate food is recognised in Uganda?	NO_____1 YES_____2	
003	Can you name any documents/policies/strategies that recognise the right to adequate food in Uganda?	Uganda constitution___1 Uganda Food and Nutrition Policy (UFNP)____2 Uganda Food and Nutrition Strategy____3 Other (specify)_____4	
004	What role does your institution play in promoting realisation of the RtF in Uganda?		
005	Is the RtF protected as a constitutional right in Uganda?	NO_____1 YES_____2	
006	Is this right justiciable right in Uganda?	NO_____1 YES_____2	
007	Do we have laws relevant to the RtF covering social assistance for those who can not access food in slum areas of Uganda?	NO_____1 YES_____2	
008	Would you say such laws are effectively implemented in slum areas?	NO_____1 YES_____2	
009	What do you think has hindered effective implementation of such laws in slum areas?		
010	Which of the following state obligations do you think is mostly violated in slum areas?	Respect_____1 Protect_____2 Fulfil_____3 All_____4 None_____5	
011	Do we have mechanisms in place to ensure provision of	NO_____1	If no

	adequate, effective and prompt remedies regarding violations of the RtF?	YES_____2	go to 016
012	What are the examples of such mechanisms?	Administrative____1 Quasi-judicial____2 Judicial____3 Others (specify)_____4	
013	Would you say such mechanisms exist in slum areas?	NO_____1 YES_____2	
014	Are such mechanisms easily accessible by slum dwellers	NO_____1 YES_____2	
015	Is there legal assistance extended to slum dwellers to ably take action in order to realise their RtF in case they feel this right is being violated?	NO_____1 YES_____2	
016	Can you tell us which form of assistance is extended to these individuals?		
017	Does your institution have the mandate to receive and investigate RtF complaints?	NO_____1 YES_____2	
018	Has your institution ever filed, investigated and adjudicated in court complaints regarding violation of the RtF in slum areas?	NO_____1 YES_____2	
019	Can you tell us what this complaint was about?		
020	Would you say slum dwellers are aware of their RtF and are aware of any recourse mechanisms if their RtF is violated?	NO_____1 YES_____2	
021	Does your institution carry out programmes on awareness about the RtF and available recourse mechanisms in slum areas?	NO_____1 YES_____2	
022	Which communication channel is used for carrying out such awareness?	Radio_____1 Newspapers____2 Television____3 Posters/leaflets____4 Community educators____5 Other(specify)_____6 _____	
023	Which of the following human rights principles do you think are not fully observed in promoting realisation of	Transparency_____1	

	<p>the RtF for slum dwellers?</p> <p>(Tick all those that apply)</p>	<p>Non discrimination_____2</p> <p>Community participation and inclusion__3</p> <p>Accountability and rule of law_____4</p> <p>Universality_____5</p> <p>Interdependence and inter-relatedness_____6</p>	
024	What do you think remains to be done to promote realisation of the RtF in slum areas?		

Thanks so much for accepting to participate in this survey; I will endeavour to share results of this survey with your institution.

Appendix F: Interview guide 1 (IG 1) for Key informants at Nakawa Division Council.

A survey of challenges to realising the Human Right to Adequate Food in Banda Parish

Date: _____ Interviewer _____

Section/committee at the division: _____ Code: _____

1. Are you aware of the human right to adequate food and state obligations on this right as stipulated in GC 12?
2. Which state obligations are you familiar with as regards to promoting realisation of the RtF?
3. Are your institution and its staff aware of their tasks and their role as duty bearers in promoting the RtF in their areas of jurisdiction?
4. How many council members have received training on human rights including the right to food?
5. What interventions has the council put in place to address the health and nutrition situation in Nakawa, Banda parish in particular?
6. How accessible are the residents of Banda to safe water and what steps is the council taking to improve accessibility of safe water in the various zones of Banda?
7. Comment on waste/rubbish disposal and the steps being undertaken by the council to improve on environmental sanitation in Banda.
8. Comment on the nature of food market(s) in Banda and whether there are any plans by the council to improve on these facilities.
9. Does the council monitor activities of food sellers including those selling foods at roadsides to ensure that the food is safe and is sold from clean and hygienic places?
10. Banda dwellers complain of unnecessary food malpractices like selling food that is of: less quantity, poor quality, adulterated, expired, or highly priced. Whose duty is it to curb these malpractices?

11. Are there any existent complaints and redress mechanisms accessible by residents in case of such violations?
12. Does Nakawa division council use a human rights based approach in planning and implementation of various activities in the division with a focus say on equality, non-discrimination, inclusive participation, accountability, justice, and transparency?
13. How have the people of say Banda been included in managing/addressing their zone affairs?
14. Comment on any constraints faced by the division in offering better services to its people.

Thanks so much for your acceptance in participating in this survey

Appendix G: Summary of total expenses used for carrying out the survey

Item description	Total needed and unit cost	Total Cost in Ug Shs
Printing of questionnaires	1250 pages @ 200 Ug Shs	250,000 Ug Shs
Paper Folders	5 @ 2500 Ug Shs	12500 Ug Shs
Flip Chart	1 Roll @ 10000 Ug Shs	10,000 Ug Shs
Markers and pens	1 dozen of @ 4,000 Ug Shs	4,000 Ug Shs
Payment to assistants	6 @ 10,000 Ug Shs per day for 8 days	480,000 Ug Shs
	10,000 Ug Shs per each of the 3 local personnel from each of the 5 surveyed zones for 5 days	150,000 Ug Shs
Equipments (Height boards, Scales)	Sourced from Kyambogo university	0 Ug Shs
Car rental for general transportation	1 @ 50,000 Ug Shs a day for 5 days	250,000 Ug Shs
Phone/calling expenses	3hours @ 20,000 UgShs per hour	60,000 Ug Shs
Miscellaneous	500,000 Ug Shs	200,000 Ug Shs
Total expenditure		1,416,500 Ug Shs 5059 Nok (1 Nok=280 Ug Shs)

Appendix H: Consent form from the Uganda National Council of Science and Technology



Uganda National Council For Science and Technology

(Established by Act of Parliament of the Republic of Uganda)

Your Ref:.....

Our Ref:.....SS.2279

Date:.....19/10/09.....

Mr. Kato Peterson Kikomeko
Kyambogo University
P.O Box 1
Kyambogo

Dear Mr. Kikomeko,

RE: RESEARCH PROJECT, "CHALLENGES OF REALISING THE HUMAN RIGHT TO ADEQUATE FOOD BY BANDA SLUM DWELLERS IN NAKAWA DIVISION-KAMPALA CITY"

This is to inform you that the Uganda National Council for Science and Technology (UNCST) approved the above research proposal on **October 08, 2009**. The approval will expire on **February 08, 2010**. If it is necessary to continue with the research beyond the expiry date, a request for continuation should be made in writing to the Executive Secretary, UNCST.

Any problems of a serious nature related to the execution of your research project should be brought to the attention of the UNCST, and any changes to the research protocol should not be implemented without UNCST's approval except when necessary to eliminate apparent immediate hazards to the research participant(s).

This letter also serves as proof of UNCST approval and as a reminder for you to submit to UNCST timely progress reports and a final report on completion of the research project.

Yours sincerely,

Leah Nawegulo
for: Executive Secretary
UGANDA NATIONAL COUNCIL FOR SCIENCE AND TECHNOLOGY

LOCATION/CORRESPONDENCE

Plot 3/5/7, Nasser Road
P.O. Box 6884
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