



# **UWOCASO Strategic Plan 2017- 2021**

Uganda Women's Cancer Support Organisation

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# Forward

This strategic plan sets out the proposals for continuation and development of Uganda Women's Cancer Support Organisation (UWOCASO) for the next five years. Drawing on a decade of continuous growth marked by internationally and locally recognised achievements, UWOCASO is better placed to continue advancing its role as a leading cancer survivors' led organisation in providing best practice supportive care services to patients and their families, and educating the communities on the importance of screening, early diagnosis and treatment of cancers affecting women and girls in Uganda

UWOCASO has had a sustained visionary leadership of dedicated volunteers from leadership who set strategy and policy to volunteers in the community who organize and implement activities. With a small Secretariat staff of a Chief Executive Officer and Administrator, UWOCASO operates within acceptable principles and procedures, high level of financial integrity and taking sustainability as a priority. We are confident that the way forward set out in this strategic plan will increase access to information and awareness of cancers affecting women and girls, provide quality supportive care services and referrals to patients and their families and continuously build systems and structures for good governance, knowledge building practices and strengthening internal capacity for institutional sustainability.

The American Cancer Society through Technical Assistance (T/A) supported the development of this strategic plan. The strategic planning process involved the T/A engaging the Board, members, staff and volunteers who regularly convened to discuss and share views and contents of this strategic plan.

Analysing both internal and external environments through SWOT and PESTEL including stakeholder analysis also informed our strategic planning process.

The strategic plan defines UWOCASO'S five pillars, goals and objectives to guide our future development in the next five years. At every step of the plan, contribution to the reduction of female cancer burden in Uganda remains our Goal.

Signed .....

Rebecca Kiziri Mayengo  
Chairperson

Signed.....

Gertrude Nakigudde  
Chief Executive Officer



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## List of Acronyms

ACS	American Cancer Society
AFRON	Oncology for Africa
AGHA	Action Group for Health, Human rights HIV/AIDS
BSE	Breast Self Examination
CAO	Cancer Aid Organisation
CSR	Corporate Social Responsibility
DFID	Department for International Development.
GMO	Genetically modified organisms
ICT	Information and Communications Technologies
IEC	Information Education and Communication materials
LMIC	Low and Middle Income Countries
MBC	Metastatic Breast Cancer
MOH	Ministry of Health
NCDs	Non Communicable Diseases
NGO	Non Government Organisation
PESTEL	Political Economical Social Environmental and legal
SAWI	Save a Woman Initiative
SOURCE	Strengthening Organisations for a United Response to the Cancer Epidemic
SWOT	Strength Weakness opportunities and threats
TASO	The AIDS Support Organisation
UAPO	Uganda Alliance of Patient Organisations
UCI	Uganda Cancer Institute
UCS	Uganda Cancer Society
UICC	Union for International Cancer Control
UNCDA	Uganda Non Communicable Disease Alliance
UWHI	Uganda Women's Health Initiative
UWOCASO	Uganda Women's Cancer Support Organisation
VHT	Village Health teams
WE CAN	Women Empowerment Cancer Advocacy Network
WHO	World Health Organisation



# I. Executive Summary

This five year plan defines the strategic direction of Uganda Women Cancer Support Organisation (UWOCASO's) for the period 2017-2021. This is UWOCASO's second strategic plan and builds on the previous three year strategic plan which focused on a society where cancer patients in Uganda are diagnosed early and given appropriate support. In 2016, UWOCASO enrolled into the American Cancer Society's (ACS) Strengthening Organisations for a United Response to Cancer Epidemic (SOURCE) program. The program's approach of assessment identified a need to develop a new strategic plan with a new vision and mission which is more focused to cancers affecting women and girls in Uganda.

This plan was developed through a participatory process which engaged the Board, Secretariat and volunteers. The development process used both the SWOT and PESTEL analysis to guide the internal and external analysis of the environment. Stakeholder analysis was also undertaken to identify strategic partnerships and collaborations.

UWOCASO will deliver it's mandate with a vision: "All women in Uganda free from the cancer burden" In order to fulfil this vision, UWOCASO'S mission is "To fight cancer in Uganda by empowering women at risk of and/or living with cancer, their families and communities through provision of appropriate and evidence-based information and best practices, awareness, supportive care and advocacy" with a goal "To contribute to the reduction of female cancer burden in Uganda"

With such a mission UWOCASO intends to diversify areas of focus and strengthen the organization to address the range of programs set to be implemented under this strategic plan. During this strategic period UWOCASO will focus on five pillars and five strategic objectives to guide its practices and realization of its mission. The five pillars are: Information and Awareness; Supportive Care; Advocacy; Knowledge Building and Organisational Sustainability. UWOCASO's Strategic objectives taking into account the synergies that need to be harnessed towards attainment of the set mission and goal are:

1) To increase information and awareness of female cancers in the community in the Central Region by 2021 2) To provide quality supportive care & referrals for cancer care & treatment to patients & their families in four Districts of the central region, 3) To work in collaboration with different stakeholders to advocate for cancer prevention & control with a focus on cancers affecting women and girls in Uganda, 4) To establish knowledge building practices in UWOCASO to inform evidence based cancer prevention & control services in Uganda, by 2021, 5) To strengthen the internal capacity and systems and resource mobilization for institutional sustainability and growth by 2021 and beyond.

The strategic plan provides a clear direction between present status and future of UWOCASO. Implications of this strategic plan include need for strengthening the Secretariat and capacity building of UWOCASO, need for resource mobilisation, and strengthened cancer awareness, advocacy and supportive care programs supported by a strong knowledge building and documentation culture.

The strategic plan will be operationalised through annual work plans for the period 2017 - 2021



## 2. Introduction

### 2.1 Background

According to WHO, cancer became the leading cause of death since 2004. Globally there are 14 million new cancer cases of which 57% of these are in Low and Middle Income countries (LMICs) (Globalcan 2012), with more than 8 million death annually where 65% occur in developing countries. It is projected that by year 2035 there will be 24 million cancer cases, 84% of this increase will be in LMIC (Globocan 2012)

The burden of cancer is increasing in LMICs due to aging population and the increasing adoption of risk behaviours such as: unhealthy diets, physical inactivity, use of tobacco and alcohol<sup>2</sup>. In Sub-Saharan African region, infections due to the HPV, HIV, and hepatitis B & C viruses are contributing to the burden of cancer. In addition globalisation and urbanisation have increased exposure to carcinogens in the environment which are major risks for some cancers (ACS 2015, WHO 2012)

According to Kampala cancer registry, Uganda is experiencing a growing burden of cancer where over 30,000 patients are in care at Uganda Cancer Institute (UCI). There are 3,000 new cancer cases annually with 1,500 registered facility death. UCI manages about ¼ of the cancer burden in Uganda (Mugisha NM 2017)

Cervical and breast cancers rank among the top three cancers in Uganda (Mugisha NM 2017)<sup>3</sup> and are among the major cause of cancer death among women. Other cancers affecting women include but not limited to Kaposi sarcoma, Oesophagus, liver, Ovarian and colorectal

Cervical cancer ranks second constituting 13.3% of all cancers diagnosed in Uganda with an incidence of 50/100,000 and 5 year survival rate of 18% (Mugisah NM 2017) Breast cancer ranks third constituting 8.2% of all cancers diagnosed in the country, with an incidence of 40/100,000 women and an age standardised rate between 35-45 years. The 5 year survival rate lies at 54% (ACS 2015, WHO 2012)

Cancer Incidences continue to rise in Uganda due to low levels of awareness, exposure to infections, changes in life styles, limited cancer screening, lack of diagnostic equipments, damaging myths and misconceptions, stigma and poverty (Mugisah NM 2017).

This plan is developed to contribute towards the reduction of female cancer burden in the country.

### 2.2 Uganda Women Cancer Support Organisation (UWOCASO)

UCOWASO is a local NGO registered in 2007 and a membership organisation with an established secretariat, Board of Directors and a strong network of volunteers. UWOCASO was started in 2004 by five women breast cancer survivors with an objective of raising awareness so that women can adopt practices of Breast Self Examination (BSE) regular screening and reporting early for treatment. In addition it was created to offer psycho-social support to breast and cervical cancer patients and their families. Over the years UWOCASO has expanded to engage with all cancers affecting women and membership has grown to include all women who have survived or living with cancers.

UWOCASO has grown from five members at its creation to 100 members today and many of the



members are active volunteers with the organisation. UWOCASO believes in early detection, increasing survival and improving the quality of life of those living with the disease. Current key interventions include: counselling; patient support including providing prosthesis, bras and lymphedema sleeves and income generating activities; awareness creation; advocacy; research and organisational sustainability. UWOCASO uses a number of different mechanisms for carrying out its interventions, these include community outreaches, facility and home based services, support groups, cancer campaigns, media both print and electronic such as radio and television discussions, amongst others. Although UWOCASO has no current strategic plan, activities have been guided by the 2010-2013 strategic plan.

In 2016, UWOCASO enrolled into the American Cancer Society's (ACS) Strengthening Organisations for a United Response to Cancer Epidemic (SOURCE) program. The program aims to strengthen cancer organisations and networks in LMIC so that they can implement a more effective and collaborative responses to the local burden.

UWOCASO is a fully registered and pro-active member of Uganda Cancer Society (UCS) and has served on UCS Board since 2011. It is also partners with American Cancer Society (ACS), UCI, MoH, Uganda Non Communicable Disease Alliance (UNCDA), Uganda Women's Health Initiative, Uganda Golf club, Mandela Group of Companies, Women Empowerment Cancer Advocacy Network (WECAN), Oncology for Africa (AFRON), Union for International Cancer Control (UICC) amongst others

UWOCASO is supported by a number of donors both national and international. Currently the national donors are largely corporate and include members of Uganda Golf Club, Mandela group of companies and Bank of Uganda. Being a members of the Union for International Cancer Control (UICC), UWOCASO benefited from Metastatic Breast Cancer (MBC) challenge grant for research which supports two staff and builds capacity of members in research ethics. Oncology for Africa (AFRON) has supported UWOCASO during the last five years to mobilise communities for screening and early detection of breast and cervical cancers. There are several individuals both local and international who have greatly supported UWOCASO activities.

Since 2007 UWOCASO has recorded some notable achievements and successes and now is at the point where it needs to expand and grow to be able to impact on more lives and make a substantive contribution towards reducing the burden of cancer affecting women and girls in Uganda. This strategic plan (2017-2021) building on the strategic plan 2010-2013 lays out the strategic direction that UWOCASO should take in the coming five years

### **3. Analysis of UWOCASO and Its Operating Environment**

UWOCASO carried out an analysis of the external and internal environments to identify the factors that the organisation needed to be aware of and take into consideration for addressing cancers affecting women in Uganda. UWOCASO conducted an assessment of Political, Economic, Social, Technological, Environmental and Legal (PESTEL) factors together with analysis of UWOCASO's Strengths, Weaknesses, Opportunities and Threats (SWOT) and stakeholder analysis. The findings are summarized below.

#### **3.1 Analysis of the External Environment**

When looking at the external environment using the PESTEL tools the following were analysed:



**Politically** there is an increase in Government interest in cancer control evidenced by parliament passing the UCI bill in 2016- the bill seeks to establish UCI as an autonomous agency of Government mandated to undertake and coordinate prevention and treatment of cancer and cancer related diseases, conduct research and training in cancer. There is ongoing expansion of cancer care infrastructure at old Mulago Hill hospital complex including the establishment of East African Oncology Centre and research centre in Government-Fred Hutchinson and other development partners such as the East African Development Bank among others. Government is increasing funding for cancer control although it is still minimal given the need. There is parliamentary support for cancer through the recently established Parliamentary forum on non-communicable diseases (NCD). NCD policy which includes addressing the cancer burden has been developed and there is plan to develop a Uganda National Cancer Control plan and establishment of regional cancer centres and cancer registries.

International donors appear committed to support cancer agenda in Uganda, for example, American Cancer Society, through the SOURCE program has invested in capacity building for Cancer Organizations, Fred Hutchinson is providing on-going support to UCI-Fred Hutch Cancer Centre through investment in cancer research, training and clinical care. In addition there is international recognition that a global response is needed to significantly address the growing cancer burden in the developing world.

Despite all this the commitment to the cause is inadequate and slow.

**Economically**, Uganda is a developing country with competing priorities and general poverty among the population. There is an emerging business community with a growing interest to support cancer through their Corporate Social Responsibility (CSR). Inflation and exchange rate fluctuations are affecting effective planning and service delivery both at national and organizational level. At an individual level, cost of cancer is high, including out of pocket costs for meeting the costs of cancer treatment and care and inability to work

**Socially**, communities are characterised by damaging myths and misconceptions, negative cultural beliefs and practices greatly affecting their health seeking behaviours and early cancer detection and diagnosis.

Society is facing issues of high unemployment, infectious diseases are still common in the country, and adoption of risky behaviours such as physical inactivity, unhealthy diets, smoking and alcohol use are on the rise

Low levels of awareness of cancer in the public and even amongst the professionals including health and related sector workers such as teachers, social workers is still a serious problem. The country lacks adequate resources such as trained professionals including cancer specialists, basic infrastructure, diagnostic and treatment equipment to efficiently and effectively combat cancer. Uganda still faces a burden of infectious diseases such as HIV/AIDS, malaria, and epidemics (ebola, cholera etc), which continue to take the Government's priority.

Research on cancer in Uganda is scanty and surveillance still weak although cancer registry is well established in Kyaddondo County, and expected to be rolled out country wide

In terms of **Technology** there is evidence that social media platforms are available for awareness creation and fundraising but these are largely limited to urban settings. Whilst Uganda



embracing technological innovations (social media, mobile health, and e-commerce) it still has many challenges in using technology efficiently and effectively such as interconnectivity, costs, cyber threats, urban-rural discrepancies. There are no well-developed technologies to support diagnosis and treatment of cancer in the country.

On the side of **Environment**, Uganda is a food basket but the country is faced by grave environmental degradation and pollution (both air and water) from growing industries, used vehicles, wet land encroachment amongst others. The country also faces climate change challenges including unpredictable weather patterns such as severe droughts and unseasonal rains and floods due to deforestation and land degradation. These environmental factors adversely affect health and put the population at a higher risk of cancer.

**Legally** there are frameworks to include cancer into the national Agenda, the existence of UCI Act, the NGO regulation and the International Protocols for cancer control into which Uganda is signatory gives UWOCASO a brighter future for contributions to cancer control in the country.

Whilst some frameworks exist which can support cancer control, Uganda still needs to adopt a National Cancer Control Law to engage in multi-sectoral cancer response

The PESTEL analysis shows that although progress is slowly being made to address the impact of cancer, we still have a long journey ahead. Many factors need to be addressed across all the PESTEL areas to significantly transform cancer care and control (see Appendix I for detailed PESTEL table)



### 3.2 UWOCASO's SWOT Analysis

The SWOT analysis identifies areas where UWOCASO can leverage its strength and opportunities as well as outlines the weakness and threats that UWOCASO can limit through actions of its own or by working in collaboration with others.

<p><b>Strengths</b></p> <ul style="list-style-type: none"> <li>• In house capacity / skills especially counseling and patient support by cancer survivors using personal experiences.</li> <li>• Functional board and secretariat with dedicated staff and strong network of volunteers Strong partnerships and collaboration with Ministry of Health through UCI, Local and International NGOs and corporate organisations.</li> <li>• Range of patient support services, awareness creation and research interventions offered by UWOCASO</li> <li>• Survivor led reputable organization with 2 members trained as TOT counsellors and 40 in counselling skills</li> <li>• International visibility and networking UWOCASO is regularly represented in international workshops and conferences.</li> <li>• Diversified funding sources (international donors, corporate, fund raisers)</li> <li>• Active member of the UCS board since 2011</li> <li>• Subsidised office space by Action Group for Health, Human rights and HIV/AIDS( AGHA).</li> </ul>	<p><b>Weakness</b></p> <ul style="list-style-type: none"> <li>• Services are more focused to Breast cancer and not women cancers.</li> <li>• Inadequate organisational systems, policies, process and procedures</li> <li>• Poor documentation practices</li> <li>• Duplication of services - some services are provided by other organizations in the same sites.</li> <li>• At a moment it is Kampala focused services</li> <li>• Inadequate capacity with low staffing ,</li> <li>• Lack of ICT skills amongst staff.</li> <li>• Visibility limited {website not updated , no sign post of the organization)</li> <li>• Out-dated strategic plan</li> <li>• Insufficient funds - major funding for UWACASO staff is ending in July 2017</li> <li>• Overlapping of some board and staff roles</li> <li>• Office space limited which hinders smooth operations such as services like counselling and bra fitting that require privacy.</li> </ul>
<p><b>Opportunities</b></p> <ul style="list-style-type: none"> <li>• Collaborations and Partnership for joint service, consortium and funding</li> <li>• Favourable policies and protocols both local and international</li> <li>• Funding mix; grants, business corporate, membership fees, income generating activities (IGA)</li> <li>• Joint services with other patient organisation</li> <li>• The establishment of East African Oncology centre (FRED HUTCH)- brings an opportunity for future training for UWOCASO volunteers and staff</li> <li>• On-going capacity strengthening program under SOURCE by American Cancer Society.</li> <li>• Multi – media for; visibility, information</li> <li>• Growing recognition of need for cancer information/ awareness for public and professionals</li> <li>• International organisations and funders seeking to work with local partners</li> </ul>	<p><b>Threats</b></p> <ul style="list-style-type: none"> <li>• Weak government policy and commitment</li> <li>• Many organisations with high competition for resources.</li> <li>• Inadequate infrastructure and resources for cancer care and control in the country</li> <li>• Negative cultural and religious beliefs and practices</li> <li>• Global and national uncertainties including economic, socio-political and environmental</li> <li>• Changing donor priorities, demands and funding stream</li> </ul>



From the SWOT analysis, UWOCASO recognises that organizational strengthening, resource mobilization and working in partnerships have to be central part of its efforts to meet the needs for addressing the cancer burden affecting women and girls in Uganda

### 3.3 Stakeholder Analysis –

During the development of this strategic plan it was important to analyse and map key stakeholders working with or influence UWOCASO's involvement in cancer control. Stakeholders are key partners in program implementation, forming a funding source and fundraising base as well as effective service delivery. Stakeholders were prioritised based on their power to influence resource allocation and activities and their interest towards cancer control (see power/interest grid below). Stakeholders were also mapped based on expectations and potential contributions of each stakeholder to UWOCASO (see Appendix II for this detailed stakeholder mapping)

UWOCASO works with diverse range of stakeholders across all levels- local, national and international. Majority of the stakeholders are within Uganda and are engaged in cancer control or related sector. Many are engaged in patient support with some elements of advocacy and awareness creation. For those stakeholders that have high power and high interest in cancer, UWOCASO will continue to engage them and strive to create strong relationships. Those that have high power but have low interest, UWOCASO will closely follow for discussions and maintain high standards that will encourage such stakeholders' interest. There are stakeholders that have high interest but low power, UWOCASO will always update them on all developments. For those that both their interest and power are low, UWOCASO will to monitor their behaviour and engage them for future opportunities. UWOCASO will also try to find ways to better engage and build relationships with some of the most relevant organisations from the latter two levels and get them to support our work, for example, TASO offers UWOCASO potential for joint activities and even research opportunities, but we are not known by them.



**Power/Interest Grid for Stakeholder Prioritisation**

<b>HIGH</b>	<b><u>Keep satisfied</u></b>	<b><u>Manage Closely</u></b>
	Hospice Local Government Susan Komen National Breast Cancer Coalition Fund Kampala Capital City Authority Media /print Ministry of Public service Ministry of Gender Office of the President Parliament of Uganda	Union for International Cancer Control (UICC) Uganda Cancer Society American Cancer Society Ministry of Health Uganda Non Communicable Disease Alliance Women Empowerment Advocacy Network Reach to Recovery International Uganda Cancer Institute Uganda Golf club Oncology for Africa Volunteers & Cancer patients Uganda Child Cancer Fund(UCCF) Uganda Women’s Health Initiative(UWHI) Officer of the Speaker of Parliament Pfizer
<b>LOW</b>	<b><u>Monitor</u></b>	<b><u>Keep Informed</u></b>
	Marie stopes TASO Cultural leaders Rotary clubs Religious leaders Reproductive Health Uganda HIV Organisations Religious institutions Inter-religious council Schools	Uganda Alliance of Patient Organisations Cancer Aid Organisation Musicians Save A woman Initiative Hostels Uganda Cycling Federation Uganda Olympics committee Action Group for Health, Human Rights and HIV/AIDS
	LOW	HIGH

The analysis has also showed some of our competitors are also our stakeholders, SAWI and CAO for instance, are both clear partners for joint patient support services and competitors for the same resources



## 4. UWOCASO's Identity

### 4.1 Vision:

All women in Uganda free from cancer burden.

### 4.2 Mission:

To fight cancer in Uganda by empowering women at risk of and/or living with cancer, their families and communities through provision of appropriate and evidence-based information and best practices, awareness, supportive care and advocacy.

### 4.3 Value statements:

**Accountability and Transparency:** We are accountable to our team of (volunteers, staff and Board), our members and stakeholders and we are committed to remain transparent in all operations at all times.

**Integrity:** We carry out all our duties with high moral and ethical standards acceptable by our members, clients and others.

**Participatory:** We accord all members, volunteers and the community equal opportunities to participate in activities and programs of the organisation.

**Volunteerism:** We recognise and appreciate the support and commitment of volunteers as an essential element to our work and we seek to empower them in their work

**Efficiency in resource utilization:** We seek to use creative and innovative ways in resource utilisation in order to develop people to their full potential and realize high quality results and greater impact. We use resources wisely.

**Fearlessness and truth telling about cancer:** We strive to create an organisation that is based on the principles of boldness and trust that understands the sensitivity of the disease and accord respect to the values and beliefs of others.

**Inclusiveness:** We are non-judgemental and shall remain open to all members and volunteers in an equitable manner. We work to ensure that services provided are open to everyone including patients/clients without discrimination

**Collective Action:** We believe in partnership and collaborations for collective action and services to change the lives of the women at risk of and /or living with cancer for better- no one individual or organisation can do it alone. We respect the unique contribution of each one and will work together to meet our common goal.

### 4.4 Development Goal:

To contribute to the reduction of female cancer burden in Uganda.



## 5. UWOCASO Strategic Direction

The development of UWOCASO's strategic direction and plan will guide UWOCASO in becoming focused and plan appropriately. UWOCASO has identified five strategic pillars and five strategic objectives to guide direction and practices. These have been identified through reflection of the organisation's achievements, and take into account the internal and external context as well as discussions with stakeholders, and the UWOCASO team and Board.

### 5.1 UWOCASO's Pillars:

1. Information and Awareness
2. Supportive Care
3. Advocacy
4. Knowledge Building
5. Organisation Sustainability

### 5.2 UWOCASO's Strategic Objectives:

UWOCASO will deliver its vision and mission over the coming years through the five defining strategic objectives as outlined below.

**Strategic Objective 1:** To increase information and awareness of female cancers in the community in the Central Region by 2021

**Strategic Objective 2:** To provide quality supportive care & referrals for cancer care & treatment to patients & their families in four Districts of the Central Region-

**Strategic Objective 3:** To work in collaboration with different stakeholders to advocate for cancer prevention & control with a focus on cancers affecting women and girls in Uganda.

**Strategic Objective 4:** To establish knowledge building practices in UWOCASO to inform evidence based cancer prevention & control services in Uganda, by 2021

**Strategic Objective 5:** To strengthen the internal capacity and systems and resource mobilization for institutional sustainability and growth by 2021 and beyond

### 5.3 Strategic Priorities

The tables below expand on the strategic priorities. The tables outline the strategies, key interventions/activities and expected results for each strategic objective. The narrative provides a brief discussion for UWOCASO's strategies and interventions.



<b>Pillar: Information and Awareness</b>	
<b>Strategic Objective:</b> To increase information and awareness of female cancers in the community in the Central Region by 2021	
<b>Expected Results/Outcomes:</b> Increased community awareness/knowledge about cancers affecting women and girls	
<b>Strategy 1:</b> Adapt / develop IEC messages and materials about cancer's for different target groups	
<b>Key Activities/ Interventions</b>	<b>Activity/Intervention Timeframe</b>
1. Develop a communication strategy / plan for information and awareness and regularly review and update	Years 1-5
2. Review/ update/adopt and translate the existing IEC materials and disseminate (ie Breast self-examination (BSE), cervical cancer materials and patient information leaflets	Years 1-5
3. Equip and train community outreach workers and health care providers with appropriate models/dummies for breast and cervical cancers	Years 1-5
4. Identify common cancers affecting women , review IEC materi also and develop/adapt and pilot selected IEC messages and materials (such as posters, flyers, brochures, drama etc) before dissemination	Years 1-5
<b>Strategy 2:</b> Use multimedia IEC interventions to carry out comprehensive cancer awareness programmes that strengthen awareness on cancers affecting women and girls	
1. Roll out cancer song on radios, TVS, caller tune, to teach about cancer.	Years 1-5
2. Explore a toll free helpline for cancers affecting women	Years 1-5
3. Participate in joint awareness raising events (such as World Cancer Day, Child Cancer Day, Women's day, etc)	Years 1-5
4. Organise and roll out the October breast cancer awareness campaign working closely with MOH, UCS and other partners	Years 1-5
5. Explore working with Minibus for raising awareness on women related cancers	Years 1-5
6. Engage in awareness raising activities using radio and TV	Years 1-5
7. Produce, publish and distribute the annual 'Surviving Cancer' magazine	Years 1-5
8. Use social media to raise awareness on women related cancers	Years 1-5
9. Develop, roll out and implement community outreach program for awareness raising for schools and out of school youths, community and youth groups, churches and cancer screening events etc	Years 1-5

Cancer awareness and information is a big gap in the control and management of cancer in Uganda. There is poor understanding of cancers affecting women and girls by both the public and professionals. Cancer in Uganda is diagnosed late due low levels of awareness about the importance of screening, risk factors, early diagnosis and treatment. This strategy will work



to identify common cancers affecting women in the country increase their awareness using different approaches which include reviewing and updating existing IEC materials, updating and translating for target groups and languages. We shall use multimedia in order to reach different communities with general messages and specific groups with targeted messages. In partnership with other organisation, we shall lead the design of joint awareness campaigns to effectively and efficiently reach out to bigger communities with cancer information. This strategy will bring on board CSOs, NGOs, business community and Government to improve access to cancer information in the country.

In this strategy we shall continuously raise awareness about the importance of prevention and early detection by sensitising the masses on risk factors, early signs and symptoms of some cancers and adopting healthy life styles that reduce the cancer risks.

In this strategic period we shall look at how to address awareness needs of the vulnerable groups such as women living with disabilities, women in fishing communities and refugees among others.

We shall aim at saving lives through prevention, early detection and improvement in treatment outcomes and increase survival rates

<b>Pillar: Supportive Care</b>	
<b>Strategic Objective:</b> To provide quality supportive care & referrals for cancer care & treatment to patients & their families in four districts in the Central region.	
<b>Expected Results/Outcomes:</b> Increased number of women accessing cancer and supportive care services	
<b>Strategy 1:</b> Develop and implement a comprehensive and holistic care and support package building on the existing services in four districts in the central region.	
<b>Key Activities/ Interventions</b>	<b>Activity/Intervention Timeframe</b>
Establish partnerships with care and support organizations for referrals and joint care service delivery eg hospitals, palliative care providers, churches, traditional healers, opinion leaders and legal organisations	Years 1-5
Review the existing care package and develop it into a comprehensive care package for Psychosocial support, prosthesis and supportive devices etc and update package regularly to reflect evidence based practices	Years 1- 5
Provide support package based on patient's and family needs such as supportive devices (wigs, prosthesis, financial support, bras, etc )	Years 1-5
as supportive devices (wigs, prosthesis, financial support, bras, etc )	Years 1-5
Expand counselling services by training TOTS in counselling and training staff and volunteer counsellors.	Years 1-5



Expand Outreach programs (home visits, hospital visits) by supporting trained satellite volunteers in the selected Districts to carry out a monthly patient support outreach programs	Years 1-5
Pilot a livelihood program for patients and their families	Years 2
Identify existing lively hood programs and link patients and families to themI	Years 1-5
Review and expand cancer survivors/ patients and family program eg monthly meetings, peer support services	Years 1-5
Training peer support volunteers	Years 1-5
Explore innovative support practices around the world and pilot them in Uganda eg. Yoga.	Years 1- 5
<b>Strategy 2: Provide technical support to partners in Uganda in patient support and cancer control interventions.</b>	
Explore, develop and roll out technical support programs in patient support and cancer control for partner organisations and others	Years 1-5
Provide technical support and training in counselling and support services to other organisations.	Years 2-5

Through this strategy period, we will provide comprehensive package of care for women living with cancer. Collaboration with partner organisations will be an important component enabling patients to access services not provided by UWOCASO eg legal advice, nutrition support, treatment, pain and symptom control. Attending to all cancer care needs of patients with cancer is beyond the capacity of one organisation; hence we will work together with our partners in a coordinated and collaborative manner to achieve the required results. We will ensure that our activities are linked into and guided by local and national programs.

We will provide services using multiple approaches such as facility based and home based care- using mechanisms such as community outreach, patients’ family and survivors’ meetings, peer support amongst others.

UWOCASO will ensure quality service delivery through strengthening capacity by training. During the strategy period UWOCASO will roll out and implement supportive care services in four districts in the central region. In addition we will develop a technical support program for our partners and others to provide quality patient supportive care and cancer control within Uganda. This will include interventions such as technical advice and trainings, coaching amongst others. Although our services will focus on peer to peer support, we will also expand support providers to include trained volunteers, VHTs and other community members.

In this strategic period we shall look at how to address support needs of the vulnerable groups such as women living with disabilities, women in fishing communities and refugees.



<b>Pillar: Advocacy</b>	
<b>Strategic Objective:</b> To work in collaboration with different stakeholders to advocate for cancer prevention & control with a focus on cancers affecting women and girls, in Uganda	
<b>Expected Results/Outcomes:</b> Adoption of the national cancer control law, policy, action plans and strategies.	
<b>Strategy:</b> Work in partnership to identify issues, develop joint responses and / to influence policies at all levels (local and international) on cancers affecting women and girls.	
<b>Key Activities/ Interventions</b>	<b>Activity/Intervention Timeframe</b>
Develop an Advocacy plan and set up Advocacy priorities and review regularly	Years 1-5
<b>Recruit Communication and Advocacy Officer</b>	<b>Year 1</b>
Strengthen in house advocacy skills by training staff and volunteers in advocacy	Years 1-5
Develop/ adopt advocacy materials including tools, fact sheets, testimonies and disseminate.	Years 1-5
Identify partners and network both local and international for joint Advocacy.	Years 1-5
Hold a general Stakeholder's meeting, to identify and review advocacy issues and actions.	Years 2-5
Hold Advocacy events eg. Dialogues and lobbying etc	Years 2-5
Develop, write and disseminate advocacy articles	Years 1-5
Actively participate in joint advocacy events and monitor e.g. campaigns, meetings	Years 1-5
Engage multi-sectoral actors such as Ministry of Education, Finance., local Governments etc	Years 1-5
Identify, mobilise and train community volunteers as champion and advocates at least one per sub-county in selected districts.	Years 2-5

Advocacy for cancer is greatly needed. There is need to scale up advocacy efforts for cancer control and get Government to fulfil its commitments and increase prioritization and resources for cancer prevention and control in Uganda.

In this strategic period UWOCASO will identify key advocacy issues on cancers affecting women and girls and lead dialogues and engagements with stakeholders to develop actions. UWOCASO will use different approaches to advocacy including partnering with both local and international advocacy organisations and will continuously engage them

In addition UWOCASO will work with partners to develop a technical program that will strengthen advocacy skills of UWOCASO staff, volunteers and grass root champions. Together with drivers of advocacy such as UCS we shall adapt/develop advocacy package including tools, fact sheets and testimonials

UWOCASO will actively participate in joint advocacy events organised to influence political commitment, national policy and legislative changes. We believe the voice of many is much stronger than CSOs separately. We will make strategic use of media and advocacy events and campaigns to reduce the burden of cancers affecting women and girls in Uganda.



<b>Pillar: Knowledge Building</b>	
<b>Strategic Objective:</b> To establish knowledge building practices in UWOCASO to inform evidence based cancer prevention & control services in Uganda by 2021	
<b>Expected Results/Outcomes:</b> Improved use of quality & reliable data for decision making, planning and service delivery	
<b>Strategy:</b> To create knowledge building culture based on documenting and disseminating best practices and research interventions	
Key Activities/ Interventions	Activity/Intervention Timeframe
Recruit an M and E /knowledge management staff.	Year 1
Develop and implement an appropriate Monitoring and Evaluation framework including knowledge management component and regularly review	Years 1-5
Train staff on documentation and report writing skills	Years 1-5
Write reports, fact sheets, articles, newsletters etc. for both local and international use.	Years 1-5
Design and update website, Facebook, twitter and other social media sites	Years1-5
Explore possibilities of developing research partnership with individuals, local and international organizations and institutions on cancers affecting women	Years 1-5
Identify research opportunities and write research proposals	Years 1-5
Undertake/participate in research interventions	Year 1-5
Document practices and findings and disseminate using a range of approaches such as conferences, meetings, social media etc	Years 1-5
Explore supporting student research projects such as clinical audits, dissertations etc	Years 2- 5

We are working in a dynamic environment where needs are changing, new problems and issues arising and best practice is constantly evolving. Quality is of importance as is need to report to various stakeholders on activities and achievements. To be able to meet these demands UWOCASO aims to have in place effective M&E and learning mechanisms, and a culture that enables learning among the UWOCASO team. UWOCASO will work towards sharing lessons learned with others. Our M&E system will track progress and provide learning into what really worked and what did not work and offer an opportunity to modify and/or change of strategy to cater for emerging issues.

We acknowledge whilst progress has been made in clinical research with a number of studies conducted in Uganda. There is still little information and facts about cancers affecting women in the country. By engaging in research as UWOCASO, we hope to address some of the information/ fact gaps that exist through collaborative research.

We will create a learning work culture, which is as important as having appropriate systems and resources. UWOCASO will develop and implement an M&E system with M&E plans to track progress and provide learning into what really worked and what did not work and offer an opportunity to modify and/or change and/or drop/add interventions/activities. The Monitoring and evaluation system will detail how and when the plan will be monitored, evaluated and reported on, as well as providing tools that will be used to collect data necessary to indicate progress and achievements.



<b>Pillar: Organisation Sustainability</b>	
<b>Strategic Objective:</b> To strengthen the internal capacity and systems and resource mobilization for institutional sustainability and growth by 2021 and beyond	
<b>Expected Results/Outcomes:</b> Growth in UWOCASO's resources and new revenue streams	
<b>Strategy:</b> Strengthening the internal capacity and systems of the organization by ensuring good governance, efficient management practices and competent Human resources.	
<b>Key Activities/ Interventions</b>	<b>Activity/Intervention Timeframe</b>
Continue to build on governance and leadership (Board and Secretariat)	Years 1-5
Re-structure and expand secretariat with staff and volunteers.	Years 1-5
Recruit and retain members including volunteers and meaningfully engage them in cancer control activities.	Years 1-5
Develop a membership plan	Year 1
Set up satellite branches in targeted Districts.	Years 2-5
Development of infrastructure including acquiring land, build office and purchase vehicles etc.	Years 2-5
Conduct regular organisational capacity assessment	Years 1-5
Develop and implement capacity building and staff development programme– both operational and programmatic skills (ie performance reviews, trainings, staff retreats etc)	Years 1-5
<b>Strategy 2;</b> To develop and implement a resource (Financial & others) sustainability framework	
Recruit a resource mobiliser	Year 1
Design and implement a resource mobilization strategy and regularly review and update	Years 1-5
Develop an annual operational plan and budget for each year to operationalize the strategic plan	Years 1-5
Identify and set up sustainable income generating activities to support UWOCASO's activities	Years 1-5

UWOCASO has registered steady growth in the past ten years, it is important that we consider organisational sustainability in order to effectively and efficiently deliver our services. In order to achieve the objectives in this pillar there is need for good governance and management structures. We recognize that we must develop and continually improve internal processes: financial and administration, as well as human resource management policies and procedures which help us to attain our objectives.

The organizational strengthening assessment facilitated by the SOURCE program in 2016 established the baseline for organizational capacity development and monitoring of future progress. The assessment evaluated UWOCASO across seven domains<sup>1</sup> that represent the primary elements needed for functional organization.

During the strategic period we shall ensure that our funding base matches the needs identified in the strategic plan. We will do this by developing a resource mobilization strategy which includes creatively diversifying resource sources, deepening existing funding relationships and attracting new resource providers. We have a range of donors both national and international which we

<sup>1</sup> SOURCE organizational capacity domains: Governance, 2. Operations and Administration, 3. Human Resources Management, 4. Financial Management, 5. Financial Sustainability, 6. Program Management, 7. External Relations and Partnership,



plan to build on. Currently our local donors are mainly from the business community (corporate social responsibility). These include members of Uganda Golf Club, Mandela group of companies and Bank of Uganda. Internationally we have Oncology for Africa (AFRON) and Union for International Cancer Control (UICC), and ACS through the SOURCE program. We look forward to expanding resource providers to include more of the established national and international resource providers such as Ugandan Government, Embassies and donors such as USAID, DFID, Italian Cooperation and ACS.

During this strategic period we shall continuously build governance structures in terms of Board, staff and membership and develop capacity building programs for operations and programs. UWOCASO recognises that competent, committed, passionate and motivated staff, and volunteers are key to realizing its mission and goal. We shall endeavour to build staff and volunteer base that fulfil these criteria. In addition UWOCASO will explore into possibilities of acquiring a permanent home to house activities and programs in this strategic plan.

With the above approaches, we believe, we will become a stronger organisation and make progress towards sustaining ourselves in the long term

## **6. Development, implementation and M&E of the Strategic Plan**

The plan is developed to define the strategic direction of UWOCASO's core functions and how the organisation should progress in service and /or its mandate for the period 2017 to 2021. In addition the plan will work to contribute towards the reduction of cancers affecting women and girls in Uganda.

With Technical Assistance (TA) from American Cancer Society (ACS), UWOCASO Board of Directors, members, volunteers and staff reviewed the 2010- 2013 strategic plan to assess the achievements and challenges of the plan. Together with the T/A, the process involved several days of workshops with a goal of building capacity of UWOCASO team and developing a five year strategic plan. The team reviewed the vision, mission, values and focus area of the 2010-2013 strategic plan. The team also looked at the target group, coverage of program activities, what UWOCASO did well and what did not do well and why. The team analysed internal, external environments including stakeholder mapping. It has been a consultative process with reviews, reflections and analysis

The strategic plan approved by the Board will be shared with the Board, staff and volunteers for internalization and full ownership. The plan will also be disseminated to key stakeholders.

In order to effectively implement the strategic plan 2017-2021, there is need to increase resource mobilisation to expand and support the Secretariat, recruit staff and volunteers, re-structure and operationalise the organogram among others. The plan will be coordinated and executed by the Secretariat with the approval of the BOD. The Chief Executive Officer will provide leadership regarding implementation (see Appendix iii for Board approved organizational structure).

The Board will report back to the AGM about implementation progress.

This plan will engage in continuous capacity building for members and staff to build the necessary skills and competencies in systems and procedures that will ensure successful implementation of



the plan.

Implementation of this strategic plan will be guided by a framework in form of annual work plans which detail the strategic objectives, strategies, activities/tasks, targets, performance indicators, time frames, budgets and responsible persons for delivery.

UWOCASO will develop an M & E plan which will detail how and when the plan will be monitored, evaluated and reported on. The framework will provide tools and indicators that will be used to collect data and track progress and achievements of the plan

The work plans will be reviewed regularly to provide lessons on interventions/activities. Lessons learnt will be used to determine the viability of plans under review and offer an opportunity for change of strategy or adoption of new ones along the way especially to address emerging issues.

## 7. *References*

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2. American Cancer Society (2015) Global Cancer Facts & Figures, 3rd Edition, Atlanta, American Cancer Society.
3. Mugisha NM (2017) Presentation 'Cancer Burden in Uganda' Use of Cancer Educational Materials Training Workshop, Uganda Cancer Society



Appendix I: PESTEL Analysis



PESTEL	Issues/Current Scenario	Opportunity or Threat or Both	Significance for Organisation
P	Government commitment to cancer control by parliament passing the UCI bill 2016 that seek to establish UCI as an autonomous Agency for control.	Opportunity	-UWOCASO to design strategies and approaches that will align with new policies.
O	The establishment of East African oncology centre at UCI for training, research and cancer control.	Opportunity	-UWOCASO to work with partners for joint advocacy for increased government prioritisation and to operationalise the commitment.
I	The development of new infrastructure and plan to install radiotherapy bunkers at Mulago hill.	Opportunity	UWOCASO to seek opportunity to be part of the team to review and develop new policies, frame works and national cancer control plan.
T	The Government's plan to set up regional cancer centres and the establishment of cancer satellite centre in Mayuge.	Opportunity	
I	Political statements and parliamentary support seen in the formation of NCD forum.	Opportunity	
C	Government strong partnership and collaboration with Fredhutchinson cancer Centre and Development Agencies like the African Development Bank.	Opportunity	
O	International protocols and call to actions on Governments on NCDs that Uganda is signatory.	Opportunity	
L	Despite the political will there is inadequate commitment and	Threat	



	<p>prioritisation to cancer control in Uganda.</p> <p>Country politically stable.</p> <p>There are frameworks that are work in progress the National Cancer Control Plan</p>	<p>Opportunity</p> <p>Opportunity</p>	
<p><b>E</b></p> <p><b>C</b></p> <p><b>O</b></p> <p><b>N</b></p> <p><b>O</b></p> <p><b>M</b></p> <p><b>I</b></p> <p><b>C</b></p>	<p>Over relying on Donor funding, most donors are withdrawing.</p> <p>High interest rates for business and most companies are struggling.</p>	<p>Threat</p> <p>Threat</p>	<p>UWOCASO design strategies that allows partnerships and working with consortiums to effectively and efficiently deliver services and jointly mobilise resources.</p> <p>-UWOCASO to design income generating activities for patients and for the organisation itself</p> <p>To advocate and engage government and donors for funding.</p> <p>UWOCASO to develop a sustainability plan</p>
	<p>Unstable exchange rates are affecting effective planning and service delivery.</p>	<p>Threat</p>	
	<p>Debt crisis both locally and globally with increasing competition for resources has affected the donors.</p>	<p>Threat</p>	
	<p>Emerging business community with growing interest to fund cancer through CSR</p> <p>High inflation-in the country</p>	<p>Opportunity</p> <p>Threat</p>	
<p><b>S</b></p> <p><b>O</b></p> <p><b>C</b></p>	<p>Issues of high unemployment leading adoption of risky behaviours like smoking, alcohol and prostitution</p>	<p>Threat &amp; Opportunity</p>	<p>UWOCASO will design programs that will address issues of wrong perceptions and lack of information.</p>



<p>I A L</p>	<p>Youthful population and semi educated</p> <p>Wrong perceptions and stigma about cancer coupled with limited information about cancer facts and risks exposes the society at a bigger burden of the disease.</p> <p>Research on cancer is scanty therefore intervention is inappropriate.</p> <p>Resource including financial and human are limited to combat the disease. There are competing priorities with infectious diseases eg HIV/AIDS, malaria</p> <p>-There are strong churches, and religions with big number of believers but are not directly involved in cancer control.</p> <p>There are strong cultural institutions with Royalties which are not exploited for cancer control.</p> <p>Weak health infrastructure and system especially for cancer</p> <p>Availability of cancer treatment outside Kampala is limited</p> <p>High levels of poverty in the country</p> <p>Existence of UICC Fellowship and training grants</p>	<p>Threat &amp; Opportunity</p> <p>Threat</p> <p>Threat</p> <p>Threat</p> <p>Threat</p> <p>Threat</p> <p>Opportunity</p> <p>Opportunity</p> <p>Opportunity</p>	<p>UWOCASO will seek partnership with churches and cultural institutions in order to reach the population easily.</p> <p>-with stakeholders, UWOCASO will establish systems for documentation and data collection to inform programs.</p> <p>UWOCASO will strive to build strong networks and partnerships for collective action.</p> <p>UWOCASO will design programs that will integrate social –economic programs.</p> <p>UWOCASO will encourage and participate in research on cancer</p> <p>In partnership with stakeholders, UWOCASO will design advocacy program for decentralisation of cancer services.</p> <p>UWOCASO will design strategies that allow members and staff to tap into training opportunities.</p>
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<p><b>T E C H N O L O G I C A L</b></p>	<p>Strong social media platforms in cities &amp; urban centres but weak in districts.</p> <p>The development of health technologies eg. Breast IT application</p> <p>The presence of IT technologies including Internet and other application, such as online banking, fundraising(crowd banking) and mobile phones which are well embraced by Ugandans.</p> <p>Projection for continued improvement in technology</p> <p>High risks of cyber threats</p>	<p>Opportunity &amp; Threat</p> <p>Opportunity</p> <p>Opportunity</p> <p>Opportunity</p> <p>Threat</p>	<p>UWOCASO will design strategies that involve staff development in modern technology to tap into the changing trends.</p> <p>UWOCASO will explore and make use of available health technologies and IT facilities to design awareness programs and fundraising.</p>
<p><b>E N V I R O N M E N T A</b></p>	<p>Uganda is a food basket but the country is faced by environmental pollution and adverse seasonal changes.</p> <p>Environmental degradation due to pollution, and wet land encroachment</p> <p>The introduction of G.M.Os to combat the weather uncertainties and food security.</p> <p>Continuous climate change like drought and floods has caused continuous famine and mal-nutrition leading to poor health.</p> <p>Increasing sensitivity to protection of the environment</p>	<p>Opportunity &amp; Threat</p> <p>Threat</p> <p>Opportunity &amp; Threat</p> <p>Threat</p> <p>Opportunity</p>	<p>UWOCASO will develop programs that enable beneficiaries to generate their own income.</p> <p>UWOCASO will include awareness programs on environmental conservation.</p>





L	Legal framework in the country is favourable for cancer control eg. The UCI Bill 2016, NGO Act, 2015, URA's tax exemption to corporate social responsibility(CSR)	opportunity	UWOCASO will develop strategies that comply with acceptable laws and regulations. UWOCASO will enhance partnership, network and collaboration with organisations that are compliant and institutions that are formed within those Acts e.g UCI. UWOCASO will lobby to be part of the review team of policies and make inputs
L E G A L	Human rights (Mandatory)like HIV/Cervical cancer tests  More stringent NGO and tax (URA) regulations)  -	-  Opportunity  Opportunity & Threat	

Appendix II. UWOCASO's Stakeholder Mapping of Expectations and Potential Contributions

**Appendix II. UWOCASO's Stakeholder Mapping of Expectations and Potential Contributions**



Stakeholder	Interest	Expectations	Potential	What actions do you have to take with this stakeholder
	What is their interest in the organisation	What do they expect from relationship with the organisation	What contribution could they make to the organisation	
Union for International Cancer Control	Donor/funder- Service delivery	Accountability Share results /outcome of the project Use findings to serve the population. -Sustainable structures	Financial support and capacity building and training Technical and financial support Training	UWOCASO will have to manage the relationship closely through continuously engagement and feedbacks.
American Cancer Society	To build capacity for sustainability	To provide Cancer services and awareness UWOCASO with strong governance, policies and systems Work in collaboration and be proactive member of UCS	Resources and funding Capacity strengthening/ Technical Assistance Linking UWOCASO to other stakeholders Visibility- international and national	UWOCASO will have to manage the relationship closely through continuously engagement and feedbacks



Cancer Council of Queensland(RRI)	Patient Support	Improvement in the quality of life of breast cancer patients. Reach out to many patients	In kind support including Prosthesis, Mastectomy Bras and lymphedema sleeves Trainings and capacity building networking opportunities	UWOCASO will have to manage the relationship closely through continuously engagement and feedbacks
Ministry of Health	To support the cancer control To give psychological and emotional support to patients-	Implement programs within acceptable laws and maintain a high standard of services rendered. Work in partnership with MoH Coordinated services with stakeholders	Policy guidelines Trainings -Reference to donors Technical Expertise	UWOCASO will have to manage the relationship closely through continuously engagement and feedbacks
Uganda Cancer Institute	Patient support Building capacity of counsellors	To give quality supportive care to patients and family. Work in partnership with	Joint activities eg research & outreach Training and capacity	UWOCASO will have to manage the relationship closely through continuously engagement and feedbacks

		UCI	building Technical expertise	
WE CAN	Capacity in Advocacy	Effective Advocacy Train other advocates and share best practices.	Training Travel scholarships to attend WE CAN conferences Networking opportunities	UWOCASO will have to manage the relationship closely through continuously engagement and feedbacks and share best practices
HOSPICE Africa Uganda	To support patients to end of life.	Reach out to patients that are in physical and psychological pain	Partnership in patient support joint service delivery, sharing information and research. -Technical expertise	UWOCASO will engage and closely follow to influence their interest.
Uganda Cancer Society	Membership Coordination	To work in the Umbrella objectives. Expect us to collaborate with member organisation Joint planning	Support collaborations. Coordination of Joint services with members Resource mobilisation Reference Trainings Provide working guidelines Visibility -Financial and technical support	UWOCASO will have to manage the relationship closely through continuously engagement and feedbacks and share best practices
Uganda Non	Membership To support	To collaborate with member organizations.	Trainings Joint services	UWOCASO will have to manage the

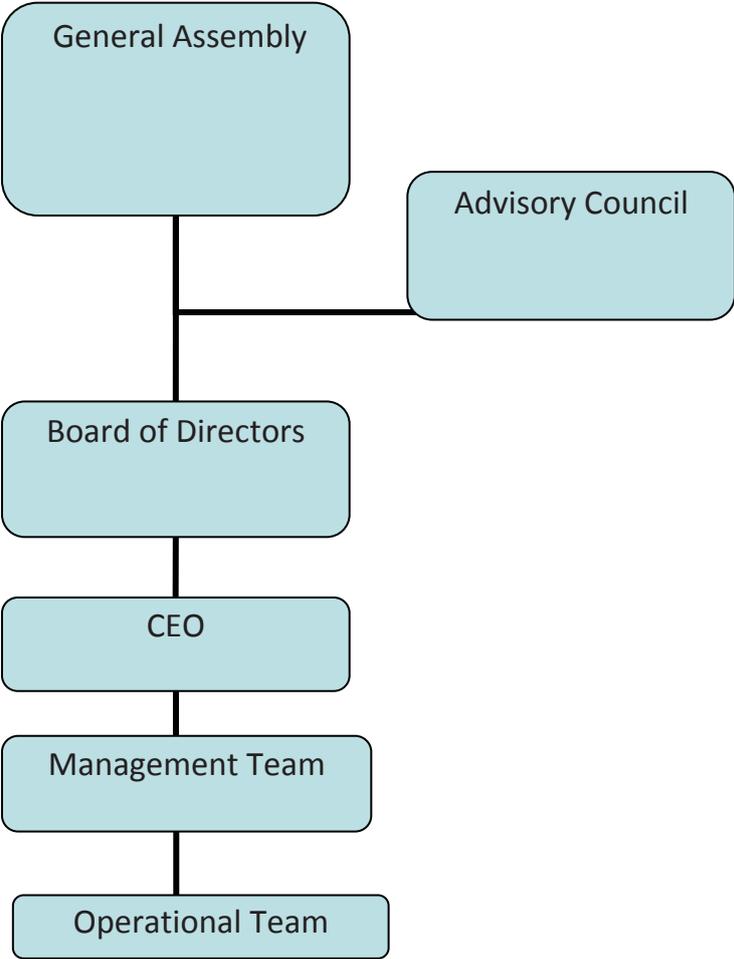




Communicable Disease Alliance	UNCDA	To support NCD patients Joint planning	Resource mobilization Reference Membership	relationship closely through continuously engagement and feedbacks and share best practices
AFRON	Partnership for joint activities>Create awareness and screening.	Quality service delivery and Accountability program update reports	Financial support Training Joint activities Technical expertise	UWOCASO will have to manage the relationship closely through continuously engagement and feedbacks and share best practices
Uganda Golf Club	Corporate social responsibility Shared interest in cancer	Information Service delivery Accountability Commitment	Resources- in-kind/funding Visibility -Point of reference	UWOCASO will have to manage the relationship closely through continuously engagement and feedbacks and share best practices
Uganda Alliance of Patient Organisations	Membership Joint services	To work collaboratively	Joint services Resource mobilization Reference	
Mandela Group	Partnership	Information, service delivery/accountability	Resources- in-kind/funding Visibility Point of reference	UWOCASO will have to manage the relationship closely through continuously engagement and feedbacks and share best practices
Religious leaders	Partnership and Joint services	Community services and accountability	Technical assistance Resource- in kind/funding	UWOCASO will engage and closely follow to influence their interest.
Reproductive Health Uganda	Partnership/joint services	Community joint services, patient support	Research, Resource-in-kind/funding	UWOCASO will engage and closely follow to influence their interest

The AIDS Support Organisation	Partnership/joint services, patient referrals	Joint activities, patient referrals	Research, joint patient programs	UWOCASO will engage and closely follow to influence their interest
Other Government Ministries	To support cancer prevention	Implement programs within acceptable laws and maintain a high standard of services rendered. Work in partnership with MOH Coordinated services with stakeholders	Point of reference Resources-kind/funding Source of data for advocacy	UWOCASO will engage and closely follow to influence their interest
Staff, Board and Volunteers/patients	Patient support, program implementation	Coordinated services with stakeholders. Accountability -Quality services	Resource mobilisation resources-In kind/funding Technical assistance	-UWOCASO will have to manage the relationship closely through continuously engagement and feedbacks and share best practices
Uganda Women's Health Initiative	To mobilise communities for breast and cervical cancer screening and patient navigation	Accountability Quality services	Point of reference Resources- kind/funding Technical support	UWOCASO will have to manage the relationship closely through continuously engagement and feedbacks and share best practices





- i. Currently UWOCASO is volunteer based with a small paid secretariat of CEO and Administrator. UWOCASO relies on its dedicated volunteers from leadership volunteers who set strategy and policy to volunteers in the community who organize and implement activities. As UWOCASO grows its team of professional staff and paid posts UWOCASO’s volunteers will continue to play a significant role in UWOCASO. Volunteers and interns will be attached to specific projects and program areas.
  
- ii. UWOCASO’s organization structure will be regularly reviewed based on needs and objectives and will reflect the staff and volunteer mix

