Deaf Children's Support Center in Kampala

Concept paper for a three year establishment and support program

Kampala, Uganda | Budget revised 6 November 2026

The proposal

Divine Promise Ministries seeks partners to establish a safe, accessible support center for deaf and hard-of-hearing children in Kampala. The center will bring together Ugandan Sign Language learning, educational support, family services, psychosocial care, basic needs assistance, and healthcare referrals.

Priority will be given to children facing poverty, exclusion from school, loss of parental care, abandonment, neglect, or additional disabilities. Services will strengthen families wherever children can remain safely at home. Residential care will be considered only when necessary, legally authorized, adequately resourced, and in a child's best interests.

What the initial phase will deliver

- An accessible center with qualified staff, safeguarding procedures, and referral partnerships.
- Coordinated support that helps children communicate, participate in education, and develop practical skills.
- Family and community outreach, transparent reporting, and a plan for long-term sustainability.

Planning status: The initial phase covers 36 months. Beneficiary numbers, age range, premises, numerical targets, and a consolidated funding requirement will be finalized through the needs assessment and detailed budgeting.

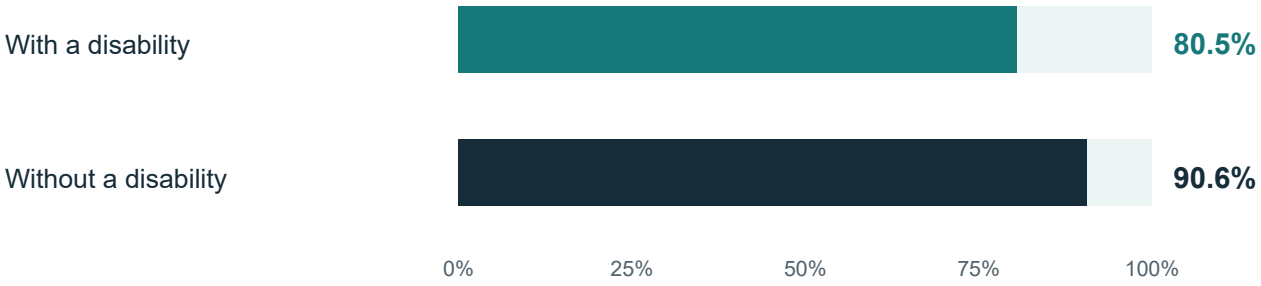
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Why this center is needed

Deaf and hard-of-hearing children need accessible language, appropriate teaching, and opportunities to participate in family and community life. Poverty, unsafe care arrangements, and limited access to support can compound barriers to education and well-being.

Uganda shows a disability related education gap

Children aged 6–16 who had ever attended school



10.1 percentage points lower for children with disabilities

Source [1]: Uganda Functional Difficulties Survey 2017, as reported by the Government of Uganda and UNICEF in *Situation Analysis of Children in Uganda* (2019), printed p. 21. These are historical national figures for all disabilities. “Ever attended school” does not measure current enrollment, attendance, or completion. The figures are not specific to deaf children or Kampala.

Hearing support is a substantial global need

34 million

children globally have disabling hearing loss [2]



Nearly 60% of childhood hearing loss is due to preventable causes [2]

Source [2]: WHO, *Deafness and hearing loss*, 3 March 2026. These are global estimates, not Uganda prevalence figures. WHO defines disabling hearing loss as greater than 35 dB in the better-hearing ear. Preventability describes causes; it does not mean that existing hearing loss can necessarily be reversed.

How the evidence informs the project

The education gap supports a focus on access to learning and family support. The global hearing evidence supports links to qualified hearing-care providers alongside accessible communication and sign language. The center will respond to individual needs and preferences rather than assume that every child needs the same intervention.

Local assessment: Before enrollment, the project will consult deaf children, families, schools, disability organizations, and relevant authorities to establish unmet needs in its Kampala catchment area and map existing services.

Who the center will support

Goal: Improve the protection, education, communication, well-being, and social inclusion of deaf and hard-of-hearing children in Kampala, particularly those who are orphaned or otherwise vulnerable.

Priority beneficiaries

The center will prioritize deaf and hard-of-hearing children who lack adequate family support, live in low-income households, experience neglect or unsafe care, face education and communication barriers, or have additional disabilities. The final age range and number of places will depend on assessed need, staffing, premises, and available resources.

Parents, guardians, approved foster or kinship caregivers, teachers, community leaders, churches, and local organizations will benefit through training and outreach. The ministry also identifies hearing children in extreme poverty as secondary beneficiaries; the scope of that support will be defined alongside the center's main focus.

Education and communication

Ugandan Sign Language instruction; literacy and numeracy support; individual learning assessments; accessible learning materials; digital literacy; and links with mainstream and specialized schools. Families will have opportunities to learn Ugandan Sign Language and strengthen communication at home.

Basic needs and health referrals

Support may include nutritious meals, safe drinking water, clothing, bedding, and hygiene supplies. Qualified partners will provide medical and hearing assessments, treatment referrals, and assistive devices where appropriate. Assistance will follow assessed needs and available resources.

Psychosocial support and participation

Qualified providers will support counseling and referral needs. Peer groups, recreation, sports, art, music, and creative activities will help children build confidence and relationships. Spiritual care will reflect the ministry's faith-based identity while respecting children's backgrounds and rights. Religious participation will not be a condition for essential services.

Life skills and preparation for adulthood

Age-appropriate opportunities may include computer skills, tailoring, crafts, carpentry, art, entrepreneurship, financial literacy, gardening, and career guidance through qualified partners. These activities will support learning, independence, and future opportunities.

Safe care and accessible services

Family support comes first

Where children can remain safely with their families, the project will strengthen those arrangements through caregiver education, counseling, referrals, and home visits where safe and feasible. For a child without safe parental care, the project will work with relevant authorities to assess family reunification, kinship care, approved foster care, or other lawful alternatives.

Residential provision is conditional. It will be developed only after the necessary assessments, authorizations, staffing, resources, and safeguarding arrangements are in place. Poverty or disability alone will not be treated as a reason for residential placement.

Safeguarding and children's participation

- Develop child protection policies, staff screening, safeguarding training, supervision, and confidential reporting procedures accessible to deaf children.
- Use documented care plans and regular case reviews, with children and caregivers involved in decisions in ways they can understand.
- Protect personal information. Share photographs and children's stories only with appropriate consent and safeguards.
- Consult relevant Ugandan authorities on registration, service approvals, health and safety, staffing, building requirements, and any proposed residential provision before operations begin.

Facilities that support the program

Suitable premises may include accessible classrooms, sign language learning spaces, a library and resource area, counseling and meeting rooms, recreation areas, administrative space, accessible sanitation, a kitchen and dining area, and a first-aid or health consultation space. Site selection will assess accessibility and child safety. Residential facilities require a separate assessment and approval process.

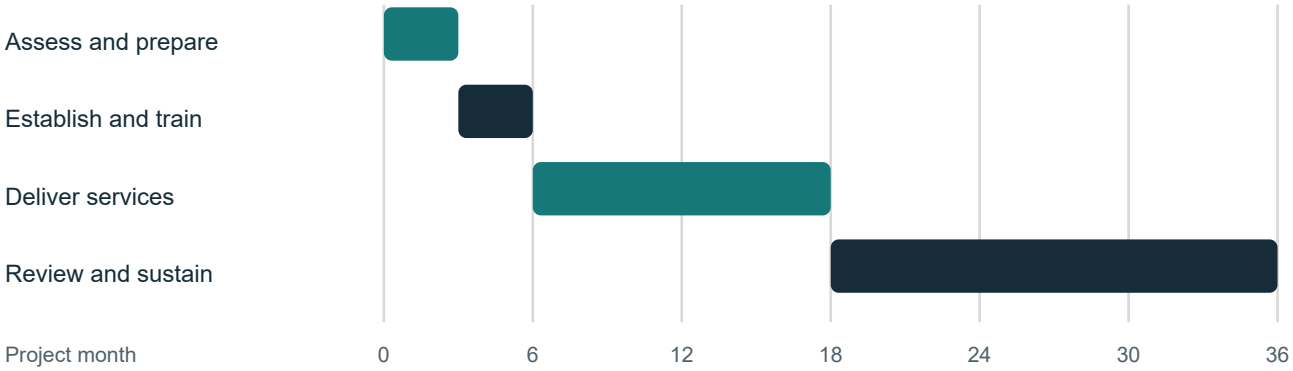
Staffing matched to service capacity

The proposed team includes a program manager, social worker or child protection officer, Ugandan Sign Language instructors, special needs teachers, a counselor, a nurse or health liaison, and a finance and administration officer. Cooks, security, maintenance staff, and residential caregivers will be added where required and authorized. Recruitment will reflect service size, professional qualifications, and supervision needs.

05 IMPLEMENTATION

A phased three year rollout

The project will develop services in stages, with expansion tied to demonstrated need, readiness, safeguarding capacity, and available funding.



Months 1 to 3 Assess and prepare

Consult deaf children, caregivers, disability organizations, schools, and authorities. Map needs and potential beneficiaries, review applicable requirements, identify premises and partners, and prepare the detailed service plan, budget, and safeguarding policies.

Months 4 to 6 Establish and train

Secure appropriate premises, complete accessibility improvements, obtain applicable approvals, recruit qualified staff, procure furniture and learning resources, establish referral arrangements, and train staff in safeguarding and accessible communication.

Months 7 to 18 Deliver and improve services

Enroll children against agreed criteria. Begin educational and sign language support, basic needs assistance, health referrals, psychosocial activities, and family outreach. Monitor children’s welfare and progress, review service quality, and strengthen referral follow-through.

Months 19 to 36 Review and sustain

Assess outcomes, strengthen institutional partnerships, and expand only where need and resources justify it. Mobilize additional support, assess lawful income-generating options, evaluate the initial phase, and agree the next sustainability plan.

Partnerships needed throughout

Collaboration will be sought with relevant government authorities, deaf-led and disability organizations, schools, healthcare providers, child protection services, community leaders, churches, donors, and development organizations. These are proposed partnership areas; specific arrangements will be agreed during preparation.

Results and long term sustainability

By the end of the initial phase, Divine Promise Ministries aims to operate a functioning support center, improve access to communication and education, strengthen family support and protection, and establish reliable service partnerships. Results remain dependent on funding, the baseline assessment, and operational readiness.

Proposed monitoring framework

Result area	Indicators to track
Access and communication	Children enrolled; children receiving Ugandan Sign Language instruction; progress against individual learning plans.
Education participation	School enrollment, attendance, and retention among enrolled children.
Health and basic needs	Children supported with essential supplies; referrals made and completed.
Protection and well-being	Children with documented care plans; case reviews; child and caregiver feedback; staff trained in safeguarding.
Families and community	Caregivers trained; family sign language participation; outreach activities.
Financial sustainability	Funds mobilized; share of the approved budget funded; expenditure reports and partnership commitments.

Measurement approach: Establish baselines and numerical targets after the needs assessment. Use confidential case records, program reports, financial reports, accessible feedback, and periodic evaluations. Review individual welfare as well as participation counts; keep children's information confidential.

How services will be sustained

The ministry will seek a mix of support from foundations, churches, individuals, businesses, and development partners. Institutional partnerships can extend access to specialist services and staff development. Parents, caregivers, and community volunteers may contribute within their capacity and under appropriate safeguarding arrangements.

Local fundraising and lawful income-generating activities may help cover selected costs. The final sustainability plan will set out recurring operating costs, funding gaps, and how service commitments will be matched to reliable income.

Preliminary budget framework

Estimates use the ministry's proposed planning rate of **UGX 3,500 (US$1)**. Dollar equivalents in parentheses are approximate and rounded to the nearest dollar. Costing periods may differ from the implementation milestones on page 5.

Budget category	Estimated amount	Costing period
Land for offices	UGX 52,000,000 (US$14,857)	6 months
Construction of key offices	UGX 100,000,000 (US$28,571)	First year
Office furniture and equipment	UGX 50,000,000 (US$14,286)	6 months
Needs assessment and planning	UGX 35,000,000 (US$10,000)	6 months
Premises rental or development	UGX 35,000,000 (US$10,000)	1 year
Renovation and accessibility	UGX 10,000,000 (US$2,857)	Annual
Transport and community outreach	UGX 60,000,000 (US$17,143)	6 months
Education and sign language resources	UGX 100,000,000 (US$28,571)	Annual
Staff salaries and benefits	UGX 120,000,000 (US$34,286)	Annual
Food and nutrition	UGX 100,000,000 (US$28,571)	Annual
Clothing, bedding, and hygiene	UGX 35,000,000 (US$10,000)	Annual
Healthcare referrals and medical support	UGX 50,000,000 (US$14,286)	Annual
Utilities and communication	UGX 30,000,000 (US$8,571)	Annual
Staff training and safeguarding	UGX 35,000,000 (US$10,000)	Annual
Monitoring, evaluation, and reporting	UGX 30,000,000 (US$8,571)	Annual
Legal, registration, and compliance	UGX 35,000,000 (US$10,000)	First year
Emergency reserve	UGX 35,000,000 (US$10,000)	Annual

The three-year funding total will be set after quotes are gathered and possible overlap between land, construction, rental, and renovation is resolved.

Partner with Divine Promise Ministries

Divine Promise Ministries invites individuals, churches, foundations, businesses, development organizations, and service providers to help establish the Deaf Children's Support Center in Kampala. Partners can support preparation, facilities, services, professional capacity, or ongoing operations.

Ways to contribute

- **Establishment:** Needs assessment, planning, suitable premises, accessibility improvements, furniture, and essential equipment.
- **Learning and family support:** Ugandan Sign Language resources, classroom materials, computers, family training, and outreach.
- **Children's daily needs:** Food, clothing, bedding, hygiene supplies, healthcare referrals, and appropriate assistive devices.
- **Professional capacity:** Staff training, safeguarding, counseling, educational expertise, mentoring, and institutional referral partnerships.

Managing the principal risks

Risk	Planned response
Unreliable funding	Diversify donors, phase delivery, and match enrollment and service commitments to available resources.
Limited specialist staff	Recruit qualified personnel and develop training and referral links with specialist providers.
Safeguarding or unsafe care	Screen and supervise staff, provide accessible reporting, review cases, and prioritize safe family care.
Inadequate premises or approvals	Assess facilities, complete accessibility work, and consult authorities before commencing services.
Stigma and exclusion	Involve families and deaf/disability organizations in awareness and community activities.

Transparent use of support

The ministry proposes documented procurement and expenditure, appropriate financial controls, and regular reporting to donors and stakeholders. Partner agreements and the finalized budget will define funded activities, reporting expectations, and service capacity.

Discuss a partnership

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References and project authorization

1 Uganda education comparison

Government of Uganda and UNICEF. *Situation Analysis of Children in Uganda* (2019), printed p. 21, PDF page 28. The education figures cite the Uganda Bureau of Statistics and UNICEF's 2017 Uganda Functional Difficulties Survey, published in 2018.

Read the Government of Uganda and UNICEF report

Figure values: 80.5% of children with disabilities and 90.6% of children without disabilities, aged 6–16, had ever attended school. The 10.1 percentage-point gap is calculated by subtraction. These figures provide historical national context; they do not estimate the number of deaf children in Kampala or current school participation.

2 Global hearing loss context

World Health Organization. *Deafness and hearing loss*. Fact sheet dated 3 March 2026. Sections on the global burden, definition of disabling hearing loss, prevention, and identification and management.

Read the WHO fact sheet

Figures used: 34 million children globally with disabling hearing loss; nearly 60% of childhood hearing loss due to avoidable causes that can be prevented through public health measures. These figures describe global context and are not used to calculate Uganda or project beneficiary numbers.

Project basis

Divine Promise Ministries. *Concept Paper for the Establishment of a Deaf Children's Support Center and Residential Care Program*. Proposal dated 1 November 2026. Project location, proposed activities, implementation phases, staffing, preliminary UGX estimates, and contact details are drawn from the ministry's proposal. The revised budget incorporates the ministry's 6 November 2026 amendments and the corrected annual monitoring estimate.

Project commitments, service capacity, and the final funding request will be confirmed by the ministry following assessment and detailed planning. The research figures are contextual evidence, not results achieved by this project.

Prepared by

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