

Ugandans Demand Life-Saving Health Services: No Health, No Vote in the 2016 Elections

CIVIL SOCIETY HEALTH MANIFESTO 2016-2021



The Road to 2016: Voters must elect Leaders who will defeat the leading causes of preventable death and disease in Uganda

The Constitution of the Republic of Uganda provides for all people to enjoy equal rights and opportunities, have access to health services, clean and safe water and education, among many other essential services.

But most political leaders ignored health—they treat it as an insignificant issue. Health is considered ‘consumptive’—*subtracting* funds from the national budget and not contributing to national security, economic development or the betterment of Ugandan people. This inaccurate conceptualization has contributed to Uganda’s persistently negative health trends. Health is essential to building productive communities.

Incumbents and aspirants in the 2016 general elections must support a new approach, where all political parties and all candidates give health the focus it urgently requires. Without this commitment by our would-be leaders, health will continue to deteriorate. Without improved access to essential, life-saving health services, suffering and preventable death of Ugandans will increase.

In order to guide candidates and political parties on how to respond to Uganda’s national crisis

of preventable death and disease, civil society organisations, following extensive consultation with a range of partners, have developed a 2016 election platform. If implemented by political leaders, this platform will achieve ambitious progress in treating, preventing, and ultimately ending the major causes of disease and death in Uganda. We call on all political parties and candidates to publicly adopt and support this platform and to include these targets in their own manifestos: all candidates and all parties in the 2016 general elections must prioritize health. Our lives and livelihoods are at stake.

THE 2016-2021 HEALTH MANIFESTO: 10 STEPS TO DEFEATING PREVENTABLE DEATH IN UGANDA

INCREASE HEALTH SECTOR FUNDING

The government of Uganda currently invests approximately USD 10.4 per person per year on health.¹ This is a national disgrace.

¹ Ministry of Health. Uganda National Health Accounts Survey, 2012/2013

Uganda government must urgently increase its domestic health investments, prioritizing those areas that would immediately save lives, protect communities, improve livelihoods, and ultimately expand GDP. WHO estimates at minimum governments must spend USD 44 per person per year in order to cater for the basic health needs of a population.² For decades, the government has refused to invest sufficient funding to make the health system functional, particularly at the local level. This has resulted in impoverishment of families who face health crises but cannot use the public system—because services are not available. **We therefore demand:** annual increases in health sector funding, prioritizing: a) recruitment, motivation and retention of health workers; b) increased primary health care (PHC) funds for local government level health facilities; and c) essential medicines and equipment—to eliminate stockouts and meet community needs. By 2021 per capita expenditure should increase to the WHO minimum standard of USD 44 per person per year. Pass the National Health Insurance Bill into law—in a form that includes accessible coverage for those working in the non-formal sector, the unemployed, and the poorest.

RECRUITMENT, RETENTION, EQUITABLE DEPLOYMENT, AND MOTIVATION OF HEALTH WORKERS

Uganda needs a 50% increase of health workers at minimum to deliver essential health services. The acute shortage of health workers—as well as health workers' poor pay, inadequate training, and inequitable deployment—is driving health crises such as maternal mortality. Absenteeism of health workers is on the rise—from 29.9% in 2010 to 45.6% in 2012.³ Nearly 70% of medical doctors and dentists, 80% of pharmacists and 40% of nurses and midwives work in urban areas—where only 13% of Ugandans live. **We therefore demand:** increased health worker pay—by at least 120%—to be at par with the region, reduce attrition and improve performance; recruit enough health workers to fill all vacant posts and immediately revise and update staffing norms; improve service quality by overhauling health worker support supervision; and as an immediate measure invest UGX 43.179 billion for enhancement of the 10 critical cadres by 50% (including midwives, nurses, anesthetists officers and anesthetists assistants, laboratory technicians), through a 2016 supplementary budget.

2 World Health Organisation (WHO). "Spending on Health: A Global Overview." April 2012.

3 Ministry of Health. 2012 Annual Health Sector Performance Report.

END THE AIDS EPIDEMIC THROUGH UNIVERSAL TREATMENT, HIGH IMPACT PREVENTION, AND HUMAN RIGHTS

Uganda can defeat the AIDS epidemic and ensure all people with HIV have access to quality HIV treatment—but only with scaled up testing, prevention and treatment programs based on evidence and human rights and focusing on the needs of communities at greatest risk of infection. High impact, evidence-based HIV prevention that promotes human rights should be available to all. **We therefore demand:** doubling of the national budget for ARVs—30% of all Ugandans with HIV should be directly supported by government funding; increased reported use of male and female condoms; access to Pre-Exposure Prophylaxis (PrEP) for vulnerable populations; the National AIDS Trust Fund should raise at minimum an additional USD 30 million per year to help fill the national commodities funding gap; all people with HIV should be on treatment by 2017 and by 2020, eliminate HIV transmission among newborns. All politicians should commit themselves to reaching the UNAIDS "Fast Track" target by 2020—although in Uganda, universal treatment access can be achieved earlier.⁴

STOP VIOLENCE AGAINST WOMEN; PROMOTE ACCESS TO SEXUAL AND REPRODUCTIVE HEALTH AND RIGHTS

In Uganda, violence against women and girls and lack of control over reproductive health generates trauma and significant health and economic consequences including HIV infection, unsafe abortion, teenage pregnancy, obstetric fistula and impoverishment. There is limited access to sexual and reproductive health rights information and services for young people—despite massive health risks they face. **We therefore demand:** Funding, policies and programs to increase access to and use of comprehensive reproductive health care services; sexual health programs designed to meet young peoples' needs; and implementation and funding of Uganda's School Health Policy; immediate implementation of the Domestic Violence Act; and public commitment to defeat the epidemic of violence women face.

TACKLE MATERNAL AND NEWBORN MORTALITY AS A NATIONAL CRISIS

More than 17 pregnant women die every day from completely preventable causes. For every death, many more women suffer severe complications. In other countries in the region, maternal mortality

4 The target describes that, by 2020, 90% of people with HIV know their status, 90% of those are on HIV treatment, and 90% of those on treatment have 'undetectable' viral loads. See "Fast Track: Ending the AIDS Epidemic by 2030."

trends have reduced—but not in Uganda. Although Uganda has managed to reduce child mortality our neonatal mortality has remained high—106 newborns die every day. Leaders must prioritize equipping health facilities, training health workers, empowering communities, improving referral systems, changing relevant laws and policies undermine access to reproductive health services, and increasing funding for the health sector so that unsafe abortion, sepsis, hemorrhage, and obstructed labor stop killing women. **We therefore demand:** leaders must ensure health facilities have the health workers and life saving commodities to confront leading causes of maternal and neonatal mortality and all HCIVs must be fully equipped to provide emergency obstetric care, including functional theatres, blood, manual vacuum aspiration (MVA) kits, infant resuscitation equipment, and functional referral systems. Reform laws and policies that undermine access to comprehensive reproductive health care services. Ensure essential commodities such as Mamas Kits are provided free to pregnant women.

END MALARIA, TUBERCULOSIS AND EMERGING THREATS SUCH AS VIRAL HEPATITIS

Uganda has one of the highest rates of malaria deaths and is one of 22 high burden TB countries in the world. Other infectious diseases such as viral Hepatitis, lead to preventable death, disability, impoverishment, and lost economic productivity—yet prevention and treatments are available. **We therefore demand:** Increased funding for high-impact anti-malaria, TB, and viral hepatitis prevention and treatment strategies and interventions.

OPPOSE DISCRIMINATORY LAWS AND POLICIES THAT IMPEDE ACCESS AND UNDERMINE THE RIGHT TO HEALTH

Discriminatory laws undermine effective health service delivery, in particular for stigmatized diseases such as HIV. Uganda’s health sector must defend and advance the health rights of all people, including excluded and criminalized minorities such as sex workers and sexual minorities. **We therefore demand:** leaders work with Parliament to repeal harmful, discriminatory provisions contained in the HIV Prevention and Control Act; ensure equal access to quality services for stigmatized populations; support inclusion of the right to health in the Constitution.

END THEFT OF PUBLIC RESOURCES IN THE HEALTH SECTOR

Theft by public officials of the national health sector budget is commonplace. Artificially inflated procurement, diversion of funds, and other strategies deployed with impunity by public servants mean fewer services reach Ugandans in desperate need. Corruption in the health sector is deadly. **We therefore demand:** Candidates must expose, eliminate and punish corruption in the health sector, starting with the most egregious and high level examples, in order to rebuild trust and stewardship and immediately increase health sector.

ADDRESS NON-COMMUNICABLE DISEASES SUCH AS SICKLE CELL, HYPERTENSION, DIABETES AND CANCER

Non-communicable diseases (NCDs) are rampant and have become emerging health threats. These diseases are preventable yet they cause death, disability, impoverishment, and lost economic productivity. **We therefore demand:** Information must be availed to all Ugandans to eliminate these diseases. Leaders must increase investment in high impact prevention and treatment of NCDs.

COMMUNITY ENGAGEMENT IN DEMAND CREATION, SERVICE DELIVERY, AND ACCOUNTABILITY

When sufficiently trained, compensated, and equipped Village Health Teams (VHTs) and Health Unit Management Committees (HUMCs) provide an essential level of engagement and accountability at the community level. Yet these organs are non functional in many Districts or are supported only by sporadic donor funded programs. **We therefore demand:** sufficient funding to make VHTs and HUMCs functional—through training, compensation, and support supervision at the grassroots level with a dedicated, fully funded vote functional in the national budget.

