



Volume 1

PHM-UGANDA NEWSLETTER

Health News & Activities Around Uganda

January—March 2019

The #SheDecides Campaign

March 06, 2019

Over 1000 people joined the festival in Kampala, focused on the theme Stand Up, Speak Out and Take Action for Women and Girls to Decide Freely and Without Question. There was a fantastic range of performers and entertainers and more than 300 people accessed services, which included HIV testing, counselling, family planning info and breast cancer screenings. SheDecides Uganda is uniting many partners, and the Festival was supported by the government of Belgium as well as Girls Not Brides Uganda, Reproductive Health Uganda, Action for Health Uganda, Reach a Hand Uganda, Public Health Ambassador



Uganda, Marie Stopes, UYAHF, and UNFPA. For more information about the event follow the link below, <u>https://</u>www.shedecides.com/the-first-shedecides-festival-in-uganda/



Women's Walk (January 19, 2019)

The event was organized by women-focused Civil Society Organizations including White Ribbon Alliance, PHM-member organization NACWOLA, Raising Voices & Building Tomorrow held a walk. The event purposely focused to draw attention to reproductive, especially maternal, health needs and challenges of women.

The progress registered so far, achievements attained and the chatting the way forward.



The highly vibrant & colorful ceremony was punctuated with a number of activities including live performances, an exhibition & presentations by representatives of the participating organizations.



World Hearing Day

March 3, 2019

World Hearing Day was held on March 3rd to raise awareness on how to prevent deafness and hearing loss and promote ear and hearing care across the world. Each year, WHO decides the theme and develops a brochure on the topic based on the best available evidence as well as advocacy materials such as posters, banners, infographics and presentations, among others. The activities that marked the day in Uganda include Screening Camps, treatment and hearing aids were given to beneficiaries.

More about this event follow the link, <u>http://eagle.co.ug/2019/02/25/uganda-to-mark-world</u>-hearing-day.html



UNIVERSAL HEALTH Coverage: Everyone, Everywhere



Uganda's First UHC Road Map 2019-2030

With the technical support of PHM through HEPS-Uganda, member organization and the support of consultants, Ministry of Health-Uganda, commissioned the development of a roadmap for the implementation of UHC-related strategies by engaging a team of consultants and civil society to support the development of a UHC Roadmap for Uganda.

The increasing need to move towards Universal Health Coverage (UHC) coupled with immense global support has seen Uganda take very key steps towards realization of this goal. Among them is the development of a UHC research agenda, the conduction of a UHC situation analysis and development of a Presidential Economic Council (PEC) paper. These processes have not only identified gaps and challenges, they have also proposed the policy actions and interventions towards accelerating the achievement of UHC. Central to their recommendations is the importance of multi-sectoral approach and development of a UHC roadmap.

The UHC roadmap was developed through a participatory and consultative process. The UHC roadmap was informed by the context analysis for UHC developments in Uganda. The recent surveys, HSDP midterm evaluation, sector review documents, relevant publications, stakeholder meetings, and interviews guided the context analysis. Documents at the regional and global levels reflecting on the UHC guidance, indicators and approaches were reviewed to generate external insights to inform the strategies and approaches in Uganda. Mandates of other ministries and their current strategies as defined in the development plans and sector documents were reviewed to extract and establish their institutional roles relating to UHC and readiness to contribute to UHC. This guided identification of synergistic or complimentary actions and investments to accelerate UHC.

This draft roadmap development was guided by three main conceptual frameworks namely 1) the three dimensions of UHC and health systems strengthening as per the WHO guidance, 2) the determinants of health and 3) the political economy framework.

The document review process was supplemented by group interviews and stakeholder workshops within the framework of MOH Committee on UHC and targeted key informant interviews of especially experts in the health and other sectors with a view to exploring and validating the information and increasing buy -in especially for the innovations necessary to work across sectors for UHC roadmap. Through the UHC Roadmap Core Committee, multisectoral workshops were organized and facilitated to deliberate on the UHC roadmap taking the synthesis from context analysis and Roadmap scenarios as inputs to these workshops. The implementation and monitoring arrangements were elaborated following articulation of prioritized roadmap pathway (s) by the stakeholders.

What Does UHC Mean For Uganda?

All this will be coming up in our PHM-Uganda commentary on the proposed UHC roadmap as we visualize the opportunities and gaps in this proposed strategy to reduce the inequality gap in access to health among all the income settings in Uganda.

National Health Insurance Bill Motion Approval

March 6, 2019

The Parliament of Uganda, on March 6th approved the NHIS Bill to be tabled for a debate. This is intently aimed at intensifying the efforts of the government to ease access to health for Ugandan citizenry through pre-payment mechanisms as a step to attaining Universal Health Care (UHC) and Sustainable development agenda. The National Objectives and Directive Principles of State Policy mandates the State to take all practical measures to ensure the provision of basic medical services to the population, and Goal 3 of the Sustainable Development Goals aims at ensuring healthy lives and promotion of well-being for all at all stages. Further we are aware that the Article 16 of the African Charter on Human and Peoples' Rights of 1981 is to the effect that every individual shall have the right to enjoy the best attainable state of physical and mental health, and State Parties to the present Charter shall take the necessary measures to protect the health of their people and to ensure that they receive medical attention when they are sick. Uganda lacks a National Health Insurance Scheme which would ideally assist in improving universal health coverage and accessibility to health care services, regulate health insurance across the country and avert financial risks that arise from high out-of-pocket expenditure on sickness, disability and others; Currently in Uganda, there are two health insurance arrangements that is the private commercial health insurance by Health Membership Organizations (HMOs) and commercial insurance companies and community health insurance schemes however the existing community health insurance schemes cover about 1% of the population while the private commercial health insurance equally covers a very small segment and whereas health insurance cover is a great idea for all Ugandans, the repercussions for not having one are much more severe especially for those in lower income stratas. An analysis of per cent of Ugandan households incur catastrophic health expend- nancing To External And Out-Of-Pocket Expenditures

Background of Disease Burden

Uganda's disease burden is generally dominated by transmittable diseases, which account for over 50% of morbidity and mortality. Malaria, HIV/AIDS, TB, and respiratory, diarrhea, epidemic-prone and vaccine-preventable diseases are the leading causes of illness and death.

The Growing burden of non-communicable diseases (NCDs) including mental health disorders. Maternal and perinatal conditions. Neglected Tropical Diseases (NTDs) affecting mainly indigent poor communities. Wide disparities in health status across the country, linked to underlying socio-economic, gender and geographical disparities

Uganda needs USD 15 Billion to invest in UHC driven programs such as the National Health Insurance scheme. But the lack of political will and political action, and the poor priority sequencing mechanism through the power actors, policy orchestras and policy enabling arms remain heavy enormous challenges to this goal

Status And Trend Of Health Financing In Uganda

The household finance dominates domestic healthcare financing in Uganda and external health financing mainly from donors and NGOs finance 46.3% and the government 8% less than the 15% Abuja declaration benchmark. This means that households have to pay a significant proportion to access the health care.

The Government expenditure for the last eight financial years has taken a downward trend from 9.6 in FY 2009/10, 8.9 in FY2010/11, 8.3 in FY2011/12, 7.8 in FY 2012/13, 7.2 in FY2013/14, 8.2 in FY2014/15, 7.4 in FY2015/2016 and 8.7% in FY 2016/2017

Uganda National Household Survey 2016/17 data showed that 14.2 Correlation Of GDP Expenditure On Health Through Domestic Fi-

itures due to direct household out-of-pocket payments which compromises the household welfare and affects their ability to consume other basic needs such as food. education and shelter and eventually driving them into absolute poverty.

Currently, The Uganda National Household Survey 2016/17 Report shows that the number of people living in poverty now stands at 10 million up from 6.6 million. That is 27% from 19.7% in 2012/2013. survey report compiled by the National Bureau of Statistics.

THE GDP EXPENDITURE PERCENTAGE SHARE ON HEALTH FOR THE LAST EIGHT FINANCIAL YEARS



Justification For The National Health Insurance As A Mechanism To Improve Timely Health Accessibility



How Beneficial Will National Health Insurance Be To Ugandans?

Increase access to timely healthcare against the major infectious diseases; non-communicable diseases, appropriate treatment of common diseases, access to professional treatment, appropriate essential medicines, and reproductive and maternal healthcare as a drive to broaden the government's bracket of approaches to Universal health coverage.

Reduce self-medication and exposure of patients to severe and chronic complications as a result of a failure to treat the medical conditions early.

A healthy populace is a key for a productive human resource that will directly impact a country's economy and achieve the goals of national development. Good health is, therefore, a basis for enhancing better Human Development Index (HDI) and overall national development because healthy individuals are more productive, earn more, save more, invest more and consume more. All the above have a positive impact on GDP multipliers of Uganda.

But NHIS' effectiveness will depend on the regulation policies, the nature of forces (public or private) propelling the scheme and the determined prepayment model across the diverse clusters of resource settings.



Health In The Market Place

Consultative meeting that was organized by SEATINI-Uganda a member of the People's Health Movement (PHM)-Uganda.

This was organized under a project "Strengthening Equitable Health Governance for the promotion of the right to health in Uganda". The project is aimed at: investigating Trade and investment agreements and their impact to the Health sector in Uganda; investigating Aid in relation to China and its impact to health sector in Uganda; investigating health aid and South-South Cooperation and its impact to the Health Sector in Uganda; and to enhance the capacity of health rights actors and activists to effectively engage on trade and investment related policies and processes for pro-development outcomes.

Stakeholders consultative meeting on the changes in the Health landscape and implications to the Right to Health in Uganda.

The gist of this meeting was on the health inequalities prevalent due to dynamics in the health sector at the global, regional and national level. Further, through the discussion, it interrogated number of Trade Policies and Negotiations ongoing at the policy level and their implications on the social sector i.e. health sector, how they affect access to health services and medicines.



Public Private Partnerships in health, and the new global Aid Architecture and how it impacts the right to health. Increase access to information on the texts and timelines for engagement on these policy processes, inclusive mechanism for engagement at the national and regional level.



Pre-eclampsia Management Community Symposium



March 8, 2019

PHM –Uganda with coalition for Health Promotion and Social Development commemorated the women's day through a one-day preeclampsia community symposium at Amach Health Centre IV in Lira district, Northern Uganda. Pre-eclampsia, a condition that occurs among the women in the 20th week of pregnancy, symptomized by high-blood pressure.

The women were furnished with more information about this condition and advised on the best firstlevel of care to be given to the person experiencing it.



We also had an engagement with the Amach hospi-

tal management and the representatives from the Expanded District Health Committees (EDHC) and charted the way for care the care that should be given to women experiencing the preeclampsia, among them were; Providing more blood pkressure meters in this hospital and other health centers in the district, Providing anti-hypertensive drugs and equip people with the basic knowledge on the usage of these drugs to avert drug abuse and self-medication. And how to Improve capacity of key stakeholders to technically influence and input in these policy processes and negotiations for prodevelopment outcomes and Improve appreciation by other actors like health and human rights actors and activists on the linkages between trade and human rights in general and the right to health in particular.

More about this meeting , check on this link

Women Shun The Newly Constructed Mulago Specialized Women and Neonatal Hospital (MSWNH)

March 8, 2019

On September 13th, 2018, the Ministry of Health released a press statement officially informing the general public about the completion of the construction works at the Mulago Specialized Women and Neonatal Hospital (MSWNH) in Kampala which started on June 9th, 2015 by the Arab contractors Osman Ahmed Osman and Company

funded through a loan the government of Uganda obtained from the Islamic Development Bank.

The construction was intended to decongest Mulago National Referral Hospital and enhance treatment of women with difficult reproductive health complications to reduce referrals abroad for certain



specialized treatment in reproductive and neonatal health category.

As health rights activists, this was one of the successes in health

Examination under anesthesia i Pap Smear Situla reconstruction 2,	890,000/* 800,000/= 150,000/= 500,000/*
 Pap Smear Fistula reconstruction 2, 	150,000/-
Fistula reconstruction 2,	
	500.000/
Normal Delivery	
	800,000/-
Caesarian Section 2,0	000,000/=
Epidural and Spinal Analgesia 1,6	600,000/=
IVF 13,	000,000/=

uccesses in health sector in the wavelength of health care accessibility and better service delivery to improve Uganda's investment case on Reproductive Maternal Newborn Child and Adolescent Health (RMNCAH). We

refer to this as a fair walk towards meeting the global commitments on reproductive and

maternal health, and the Sustainable Development Goal (SDG) #3.7 of ensuring universal access to sexual and reproductive health-care services, including for family planning, information and education, and the integration of reproductive health into national strategies and programmes. However on September 18, 2018, the Mulago management designed a list fees for the services it is going to offer to the women at MSWNH. Besides the charges being improbable, they are also a barrier to health access to the women especially those in the poorest income settings.

Extra USD 8 To Midwives

March 2019

Ministry of Health has promised to start paying 30,000 (\$ 8) to midwives for each extra expectant mother attended to.

A move intended to reduce maternal mortality rates and improve the overall



maternal health services delivery.

PHM-Uganda is analyzing and assessing the sustainability of this new motivation approach to maternal health practitioners, particularly to the midwives.



FIRST 2019 PHM-UGANDA HRH Engagement Meeting With Wemos

February 14, 2019

This Engagement focused on analyzing the human resources for health (HRH) situation in Uganda. Focusing on the several aspects around the topic of HRH funding and health fi-



nance and the linkages with health systems strengthening; the current HRH shortages, National policies, Health Insurance Scheme in Uganda, the WHO Code of recruitment, the donors' environment and current donorled projects, and the international macroeconomic environment.

We further discussed ways through which PHM-

Uganda can make a strong nexus with Wemos

Health Worker For All Coalition Meeting For PHM East and Southern Africa

February 22, 2019

The meeting was intently organized to share the main gist of the coalition for-

HEALTH WORKERS FOR ALL COALITION

mation, forge a way to strengthen its coordination and mobilization in the East and Southern bloc of Africa and update members on the activities underway in the coalition.

The coalition has now thirty-one members across the globe, such as the African Centre for Global Health and Social Transformation, Uganda Youth and Adolescent Health, Wemos, ACHEST, Kenya Medical Practitioners, pharmacists and Dentists Union, Peoples Health Movement, East and Southern Africa, Medicus Mundi International Network, Ecumenical Pharmaceutical Networks and so on....

Members discussed way forward for HRH in East Africa, the multiple poor working conditions affecting the HRH and the unwavering HRH migration in East and Southern Africa to the global north.

Consultative Meeting Between Action Santé Mondiale/Global Health Advocates France And The Uganda RMNCAH+N Investment Case Platform

March 14, 2019

Meeting focused on the health financing, and more specifically on the implementation of the GFF (Global Financing Facility) and the EUTF (EU Emergency Trust Fund for Africa). The creation and implementation of these new development financing mechanisms in the context of 2030 SDG Agenda.



Action Santé Mondiale/Global Health Advocates France Global Health Advocates (ASM/GHA) France together with the RMNCAH+N steering committee discussed the GFF process and it implementation in Uganda. We shared experiences on the global and national level designs and operations of the GFF and other global instruments on stakeholders' engagement.

World Health Day & World Malaria Day

April 7 & 25, 2019

This Through our partner organizations, HEPS and HURIC-Uganda, attending and organizing preparatory meetings for the World health day and World malaria day.



Watch out for more updates for the month of April as we celebrate the world health day and malaria month with activities nation-wide.

Darkest Night Of The Uganda's Health Sector The International Specialized Hospital-Lubowa

March 12, 2019

Ugandans are still in another shock of over-and-above excessively inflated unscrupulous multi-million dollar Italian investor hospital project, an attack on the poor country's ever hemorrhaging empty coffers.



12th of On March 2019. the parliament and the National Economv Committee approved а promissory note of USD 379.7 million which will be given to an

Italian private investor. Through a loan request, the government seeks to borrow USD 379.7million (UGX 1.3 trillion, which is more than half the Uganda's projected health expenditure for the Financial Year 2019/2020) that will be given to this little-known investor to construct the hospital that government says will be for the treatment of Non-Communicable Diseases (NCDs).

Worse still there is no secured land for this above-life health facility, the land on which the project is to be allocated is under dispute by a Buganda Royal family. This implies that the said land's legal status is still unsettled, therefore we risk litigation and we might be



subjected to another drama of a multi-million dollar humiliating frenzy-ofpenalization after the investment kick-start.

Health advocates and analysts in PHM-Uganda have assessed the implications of this kind of venture; which is characterized with so many gaps in its processes. There was limited transparency in this loan approval and partnership agreement.

Health sector financing priorities are at the verge of being distorted and worsening of Uganda's indebtedness.

Access To Essential Medicines Meeting: March 28, 2019

Organized by the HEPS Secretariat to discuss changes in the medicines sector which have happened



since the year started. This gave a detailed update on the status of access to medicines in the country after Uganda experiencing critically low essential medicine llevel stocks between March and August 2018.

Publications

Being a research, and advocacy centric network, PHM-Uganda has published a number of papers since 2018.

Between January-March 2019, we have published so far three papers and one still in the peer review process, which will be out soon.

All the papers PHM-Uganda has been publishing this year and last year are available on Policies For Equitable Access To Health (PEAH) publication Network.

http://www.peah.it/ January-March

Turbulences in Uganda's Global Aid Construct: Is the Contemporary Aid Effective Enough to Transform Uganda's Health System to Achieve UHC? <u>http://www.peah.it/2019/03/6553/</u>

Galvanizing the Action to Protect and Promote the Rights of Mentally-Disabled Individuals in the Key Populations: a Pathway to Achieve Health for All <u>http://www.peah.it/2019/02/6253/</u>

The Rhetoric In Achieving The Universal Health Coverage Under Public-Private Partnerships In Uganda <u>http://www.peah.it/2019/01/the-rhetoric-in-achieving-uhc-under-ppps-in-uganda/</u>

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