

February 24, 2015

United Nations Special Rapporteur on the Right to Health
Office of the High Commissioner for Human Rights,
United Nations Office
at Geneva 8-14
Avenue de la Paix 1211
Geneva 10 Switzerland

Dear Sir

Subject: Urgent Appeal on the exportation of Ugandan health workers to Trinidad and Tobago, to the special rapporteur on the right to the highest attainable standard of mental and physical health.

This letter is to request your urgent attention and action regarding the bilateral arrangement entered into between the Government of Uganda and the Government of the Republic of Trinidad and Tobago for the deployment, transfer and exportation of over 260 public health workers to the service of the latter. We are writing on behalf of the citizens of Uganda who are more than likely to suffer the consequences of the aforesaid arrangement. This arrangement was entered into on behalf of the government of Uganda by the Ministry of Foreign Affairs. As Civil Society Organizations we reckon that this arrangement will deteriorate the fragile health system of the country.

A copy of the notice reads thus:

"To further accelerate the existing excellent bilateral relations between the Government of the Republic of Uganda and the Government of the Republic of Trinidad and Tobago, the Government of the Republic of Trinidad and Tobago has requested the Government of the Republic of Uganda to provide medical professionals to strengthen its health service sector. In this respect, applicants are invited from suitably qualified Ugandan Health professionals from; Public/Private/PNFP Institutions to work in the Republic of Trinidad and Tobago. Applications should be addressed to the Permanent Secretary, Ministry of Foreign Affairs and hand delivered to the Human Resource Office Room¹"

The arrangement will significantly undermine the public health system as Uganda suffers from an acute shortage of health workers at all levels and specializations for all types of health facilities. Uganda has a doctor to Patient ratio of 1: 24,725 against a World Health Organization recommendation of 1: 1,000; a general nurse to patient ratio of 1: 11,000 against a World Health Organization recommendation of 1: 500. Yet, this does not take into account regional disparities in the distribution of health workers as 80% are concentrated in Kampala and its metropolis which caters for only 20% of the population. Overall, 42% of positions in the health service are

¹ <http://www.mofa.go.ug/data/jobs/4/Jobs->

unfilled. By contrast, Trinidad has 10 times as many doctors per capita. Consequently, Uganda loses 100,000 people to malaria every year and 16 women during labor every day. The HIV/Aids rates are on the rise and the country suffers disproportionately from other burdens.

Furthermore this arrangement will breach inter alia Art. 33 of the Constitution which obliges the state to protect women taking into account their unique status and natural maternal functions and objectives XX and XIV of the National objectives and Directive principles of state policy which require the state to take all practical measures to ensure the provision of basic medical services to the population.

In addition, the arrangement violates a number of ratified international legal obligations: Art 12 of the International Convention on Economic, Social and Cultural Rights; Art. 12 (2) of the International Convention on the elimination of all forms of discrimination against women; Art 24 of the Convention on the Rights of the Child and Art 16 of the African Charter on Human and Peoples' Rights. We are concerned that the Government of Uganda will violate the World Health Organization and Commonwealth voluntary codes of practice on the international recruitment of health personnel and its stated policy of health systems strengthening.

The arrangement sabotages noteworthy progress made in recent years to increase production of health workers and a multi-purpose nursing cadre that is able to perform both nursing and midwifery tasks²; recruitment of health workers; development of a comprehensive human resource health policy and strategy to address constraints is in place³ and wage increment of medical doctor at Health Centers IVs. Nonetheless, there are relatively high vacancy levels, particularly at lower-level health facilities⁴ making access to quality, accessible, available and affordable health care impracticable. Hence disproportion of the onus of health expenses on poor households as opposed to the rich⁵.

It is without a doubt that Uganda will not meet the Millennium Development Goals particularly goal 5 on reduction of maternal mortality. A key major constraint to that above is the absence of health service providers at different health facilities to accord treatment. The exportation of health workers will aggravate the situation hence a continued violation of the right to life, dignity and enjoyment of the highest attainable standard of physical and mental health.

In order to remedy the situation, Civil Society Organizations through the Institute of Public Policy Research filed an application for judicial review seeking for the grant of a temporary injunction to impede the recruitment process. An application for an interim order was filed to which the registrar of the high court declined to grant the order stating that there was no

² Uganda Health Systems Assessment 2011 report by Ministry of Health, Health Systems 20/20, and Makerere University School of Public Health,

³ Ibid

⁴ Ibid

⁵ Paragraph 12 of the General Comment 14: it spells out the essential or core basic necessities for the attainment of the right to the highest attainable standard of physical and mental health. these elements have the component of skilled medical personnel as a major contributor the realization of good and quality health care services and facilities

immediate danger and as such requested the parties to file written submissions in advancement of the main application for the grant of a temporary injunction.

In its submissions, the Attorney General advanced inter alia that the application interferes with the doctrine of separation of powers, the balance of convenience rests with the government as the case inhibits bilateral relations between two sovereign states, no date has been set for the interviews to be conducted and that infringes on the right to work as expressly provided for in the 1995 Constitution of the Republic of Uganda. These arguments fronted by the government if considered by the judge handling the matter, will have adverse effects on health, and human rights of the citizens of Uganda. As previous noted, Uganda loses 16 women per day to preventable maternal causes that can be addressed by health service providers. Furthermore Civil Society Organizations in partnership with the Institute of Public Policy Research held a press conference to call the attention of government to the matter to no avail.

We urge you to intervene as the planned export is imminent. We also request you to consider making a country visit and to carry out a study on the impact of medical brain drain on national and global public health. We finally request you to report the same to the Human Rights Council and General Assembly.

SIGNED:

1. Action for Community Development (ACODEV)
2. Action Group for Health Human Rights and HIV/AIDS (AGHA)
3. Action for Rural Women's Empowerment (ARUWE)
4. Alihsarnfoundation
5. Bethesda Project Uganda
6. Center for health, Human rights and Development (CEHURD)
7. Coalition for Health promotion and social Development (HEPS)
8. Community Health and Information Network(CHAIN)
9. Community Integrated Development Initiatives(CIDI)
10. Development Research and Training (DRT)
11. FIDA-Uganda
12. Health Gap
13. Initiative for Social and Economic Rights (ISER).
14. Innovative Technologies for Sustainable Future (ITSF)
15. Institute of public policy research (Uganda), IPPR.
16. Justice and Rights Associates (JURIA)
17. Nakawa Home based care givers alliance
18. National Care Centre
19. Path Finder International
20. People's Health Movement- Uganda (PHM-Uganda)
21. Pro-biodiversity Conservationists in Uganda(PROBICOU)

22. SocMed
23. UHSPA Uganda
24. Uganda Alliance Of Patients' Organizations(UAPO)
25. Uganda Harm Reduction Network (UHRN)
26. Uganda National Tobacco Control Association
27. Uganda young positive (UYP)
28. Uganda Youth and Adolescents Health Forum (UYAHF)
29. West Nile Legal Initiative for Community Empowerment(WENLICE)
30. White Ribbon alliance for safe motherhood Uganda
31. World Vision Uganda