**PRESS STATEMENT  
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Maternal Health Rights Are Not for Sale  
Government of Uganda: Mulago Must be for People, not for Profit

(Kampala, Uganda) Maternal health right activists today have confronted Uganda’s extremely poor record on delivering essential maternal health care services by filing an application in Uganda’s High Court (Civil Division). The case, filed by the Center for Health, Human Rights and Development (CEHURD) with the support of a national civil society coalition (the Coalition to Stop Maternal Mortality), challenges the deadly harm caused by Government’s decision to turn a hospital opened in 2018, the Mulago Specialized Women and Neonatal (Newborn) Hospital, into a private hospital charging exorbitant user fees pregnant women cannot afford.

The application argues that the government is severely restricting access to essential services, and committing discrimination on the grounds of economic status that threatens the right to health, life, dignity, and equality that is guaranteed under the Constitution.

On 18th September 2018, Minister of Health Dr. Ruth Acheng announced a system of user fees for maternal health care services, replacing what had been free services provided within the old national referral center, Mulago Hospital. Dr. Acheng also announced a “waiver committee” that would determine eligibility to obtain free services from the new women’s hospital. Advocates argue that the governance of the waiver committee has been hidden from the public, and that bureaucratic delays inherent to such a system would undermine access to life saving services.

Decades of evidence from Uganda and around the world show that health care systems base don user fees cause deadly harm to the poorest and most vulnerable, whether or not they include income-based exclusion criteria. More than one in four Ugandans live on less than UShs 7,000 ($1.90 per day)—less than the cost of a “Maama’s Kit” (the set of basic tools including a blade, disinfectant, gloves, and plastic that are used during labor and delivery in clinics).

More than 16 women die daily in Uganda from preventable causes including hemorrhage, sepsis, unsafe abortion, obstructed labor, and pre-eclampsia. Uganda’s severely high rates of teenage pregnancy also contribute to preventable maternal deaths—25% of young women 15-19 in Uganda is pregnant or a mother, one of the highest rates in sub-Saharan Africa, a statistic that has remained unchanged since 2006 (source: Uganda Demographic Health Survey, 2016). Although government a decade ago pledged to provide emergency maternal health care services at local level by equipping Health Center IVs with the surgical theatres, health workers and commodities needed to save pregnant women’s lives, that promise has been broken, forcing pregnant women to rely on the national referral hospital.

“This $25 million facility has been built with public funds to cater for the elite whilst ordinary women are dying around us,” said Nakibuuka Noor Musisi, Programmes Director at CEHURD. “Most pregnant women cannot afford to buy a Maama’s kit, let alone pay these outrageous fees. Mulago must be for people, not for profit.”

CEHURD and the Coalition to Stop Maternal Mortality are requesting Court to;

1. Order Government to create a public facility within the Women’s Hospital that provides free services, and to scrap the waiver system, in order to ensure the facility is accessible by all without any form of discrimination;
2. Order the Uganda Human Rights Commission to conduct a human rights impact assessment on the fees policy at the hospital;
3. Order the Equal Opportunities Commission to carry out an audit into the fees policy at the Hospital; and
4. Order the Parliamentary Committee on Health to investigate the operations of the Waiver Committee and the implications of these operations on equity and human rights.

Contact: Noor Musisi 0702 977 730 or Nsereko Ibrahim 0702 245 536 or info@cehurd.org