CONSENSUS STATEMENT ON KEY HEALTH ISSUES TO BE ADDRESSED BY THE PARLIAMENTARY HEALTH COMMITTEE IN THE 11TH PARLIAMENT OF UGANDA

DATE: 24th SEPTEMBER, 2021

1. Having attended a three-day retreat on health and human rights from 22nd to 24th September 2021 at ADMAS Grand Hotel in Entebbe Uganda, where the state of the country’s health system including laws; influencing policies, strategies, services, health financing, the right to health and realisation of Sexual and Reproductive Health and Rights (SRHR) among others have been discussed;

2. And recognising that Uganda has made commitments in global, and regional treaties and declarations as well as in national policies and laws aimed at promoting the health and wellbeing of all Ugandans;

3. Knowing that the Parliament has the mandate to legislate laws and influence policies and frameworks that promote good health and wellbeing for all people without discrimination of any kind;

4. Having identified critical issues of health and human rights that require the attention of the Parliamentary Health Committee and the Parliament of Uganda outlined as follows:
   - Even with the progress being made in annual increments for the national health budget, the country is still far from realising the 2001 Abuja commitment of allocating 15 per cent of the Government budget for health.
   - Teenage pregnancies have increased by 22 per cent during the Covid-19 pandemic, up from the country’s average of 25 per cent.
   - Efforts have been made by Government and development partners investing in improving Reproductive, Maternal, Newborn Child and Adolescent Health (RMNACH) and progress realises on key indices. Despite a reduction of Maternal Mortality ratio from 448/100,000 live births (UDHS 2011), to 336/100,000 live births (UDHS 2016), and this ratio is still high. The Ministry of Health Maternal and Perinatal Death Surveillance and Response Report of 6th – 12th September, 2021 reports that cumulatively, we have lost 590 mothers in 36 weeks since January, 2021, from the 65 districts which have reported. The same report indicates we have had 245 perinatal deaths. The country committed to the realisation of Universal Health Coverage as part of the Sustainable Development Goals (SDGs), by 2030, and pledged to “Leave No One Behind”.
   - The right to health is not explicit in the Constitution of Uganda and this creates challenges in the enforcement of the right to health. This is in line with the Inter-Parliamentary Union resolution which called on Governments to declare health as a right under national legislation and also in line with obligations under the international law.
   - Uganda’s National Minimum Healthcare package is a policy and not an Act of Parliament for it to be a justifiable law.
   - Several health-related laws are outdated and incapable of responding to contemporary health issues to meet the current situation and standards. There are critical emerging areas that are not legislated, such as: clinical trials; organ transplant and geriatric health care.
   - There are critical policies which have taken years in the pipeline, yet are important for addressing the current day health challenges. These include: National Adolescent Health Policy; National School Health Policy and National Palliative Care Policy. Operationalisation of the Sexual and Reproductive Health and Rights Policy, and the National Sexuality Education Framework is yet to be realised.
We therefore resolve to:

1. Adopt a multi-sectoral, rights based and gender sensitive approach to the formulation of laws and policies of the country.

2. Ensure progressive financing for health aimed at realising the country's commitment towards allocating 15 per cent of Government budget to health in reference to the Abuja Declaration of 2001. This will enable the Government to address the gaps exposed by Covid-19 in the health system and make it more resilient to meet the health needs of the population.

3. Engage the Ministry of Health to provide monthly reports to the Health Committee of Parliament and quarterly updates to the Parliament through this Committee on the status of maternal and perinatal deaths in the country and strategies being implemented to reduce maternal mortality. This will enable the Parliament to monitor cases and ensure that Government takes corrective action to address challenges identified. The Committee will encourage the Ministry of Health to share the same updates with the general public.

4. To engage the Ministry of Health to clearly define the basic maternal health care package and allocate sufficient funds for implementing this package.

5. Take steps within our mandate to address the problem of teenage pregnancy where cases have increased by 22 per cent from the average of 25 per cent. Among these steps will be tasking the Government to operationalise the 2018 National Sexuality Education Framework as well as the relevant line ministries of Education and Sports, Health, and Gender, Labour and Social Development to expedite the finalisation and operationalising of key policies including: National School Health Policy, the National Adolescent Health Policy, the National Sexual Reproductive Health and Rights Policy, and the parenting guidelines among others.

6. Prioritise the completion of processes for the National Health Insurance Bill and call on the Government to actualise the HIV/AIDS Trust Fund as this will address many of the problems of financing and access to health care services, especially for the most vulnerable people.

7. Propose and prioritise amendment of the constitution to include provisions on the right to health.

8. Consider the passing of a National Health Bill as a framework legislation which would incorporate the minimum health care package and Parliamentary resolution on maternal health.

9. Spearhead Health and Human Rights campaigns at community level in our constituencies especially on maternal and newborn health.

10. Amend a number of health-related laws with a view of bringing them up to date with contemporary health issues. These laws include, among others, the Public Health Act, the penal Code Act, Sexual Offences Bill and Venereal diseases Act.

11. Pass new laws including clinical trials; organ transplant and geriatric health care.

12. Fast track the Patients' Rights

13. Bill and influence the finalisation of the national palliative care policy by the Ministry of Health.

14. Promote gender justice, including a commitment to reduce gender-based violence in all its forms.

15. Hold Ministry of Gender, Labour and Social Development accountable to the implementation of the Global Acceleration Plan on promoting gender equality and eliminating all forms of gender-based violence against women and girls made at the July 2021 Gender Equality Forum in Paris.

16. Commit to regularly monitor maternal and newborn health services in the constituencies, availability of essential health workers, medicines and supplies and use of essential maternal and New-born Clinical care guidelines for Uganda. This will include monitoring weekly reports from the ministry of health of maternal and child mortality.

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Annex A presents a matrix outlining how these commitments will be realised in the short, medium and long term. Agreed to by the Hon. Members of Parliament of the Parliamentary Health Committee of the 11th Parliament and signed to by:

Hon. Dr. Charles Ayume
Chairperson, Parliamentary Committee on Health

Ms. Fatia Kiyange
Deputy Executive Director, CEHURD