

PUBLIC STATEMENT

COVID-19 Pandemic: The Place of the Right to Health in the National response for Uganda

The Center for Health, Human Rights and Development (CEHURD) joins the global community in efforts to manage and halt the further spread of the COVID-19 pandemic cases. We would like to share this statement to highlight the place of the right to health in these extraordinary times of COVID-19.

COVID-19 is spreading rapidly throughout the world, with serious impact on health and wellbeing of populations, the disruption of health, social, cultural, economic and political systems. It also comes with various threats to the right to health of communities. This has necessitated state and non-state actors all over the world to act rapidly in identifying and executing strategies to halt the spread of the Virus, as well as equip health systems to respond effectively to this global health emergency.

CEHURD fully embraces prevention measures recommended by the World Health Organization and Governments across the world. These include: use of sanitizers which contain at least 60% alcohol; frequent washing of hands with soap; social distancing; self-isolation; wearing face masks; use of disinfectants; avoiding touching the mouth, nose and eyes with unwashed hands and covering coughs and sneezes, among others. We recognize and commend efforts of the Ministry of Health of Uganda and His Excellency the President of the Republic of Uganda, other stakeholders and the public in prevention efforts of COVID-19. However, CEHURD asks the Government of Uganda to ensure that prevention measures in form of supplies and commodities, such as sanitizers of sufficient quality, are available, accessible, and affordable for the most vulnerable communities. These include older persons who are mostly affected by the virus, refugees and the very poor. There is also dire need to devise strategies on how poor households, communities and hard-to-reach places without access to clean water, or those who cannot afford and / or access soap, detergents and sanitizers can utilize the prevention measure on hand washing with soap and water. We further ask Government to invest in getting the health system ready to manage the virus should the country encounter COVID-19 cases.

At CEHURD, we have developed internal guidelines for health and safety at the work place for our staff, consultants and visitors.

As the state and non-state actors including communities take these steps in dealing with the virus, we would wish to remind them that we need to urgently strike a balance between these prevention approaches and rights with collective responsibilities. As such, on the one hand, the state must take efficient intervention, which include undertaking the right to health impact assessment of interventions. On the other hand, individuals should be taking responsibilities of complying with guidance from the Ministry of Health including social distancing, handwashing and taking other measures that have been identified as effective in preventing the further spread of the virus. Furthermore, in a bid to ensure equity of access to information on COVID-19, the Government of Uganda should devise means for those that may not access the conventional avenues currently being used to disseminate information about the COVID-19 pandemic.

We amplify the importance of community participation and solidarity as key pillars that have historically been critical in controlling and managing similar outbreaks in Uganda. The effective use of the formal and informal community participation structures in our health system will ensure that communities are active and informed participants in the creation of a responsive health system that will effectively contribute to the management and control in the event of COVID-19 cases in Uganda. Identification of cases and first management of these cases starts from the family unit and the communities and as such; communities must be viewed as active participants who need to be provided with sufficient, updated and timely information including clearly defined referral systems for the management of COVID-19 cases.

In times like these, the Government's obligation of protecting the public from third parties violating the rights of communities becomes very important. We envisage that cases of private actors seeking to make earnings out

of the desperate situation on COVID-19 will be on the rise. The much-needed commodities like sanitizers, soaps, masks etc will be faked and/or counterfeited and in some cases sold on the black market much more expensively to the communities. In places where there is absence of government isolation centers, private sector facilities may be provided as an option but at a cost that is unaffordable and out of reach for many of those that are subject to quarantines. Research attempts, including clinical trials will be common and some of these may threaten the key ethical and human rights principles of research. We therefore call upon the state to pay particular attention to the right to health implication of commercialization of commodities and other key services in the era of COVID-19.

We call upon the Government of Uganda to pay extra attention to vulnerabilities in the communities and those faced with the burden of being healthcare providers and carers in the times of COVID-19. While majority of the reported cases in different regions are men, women are the care-givers which, not only puts them at a higher risk of contracting the virus, but also neglecting their other health and human rights (including their sexual and reproductive health and rights) including taking young ones to health services. With social distancing and self-isolation, no alternative options are being proposed and implemented to ensure that girls and women continue to access sexual reproductive health services. Those in prisons and police custody have particular vulnerabilities and interventions packages should be defined to reduce their risks. The right to coming back home continues to be critical. Information, Education and Communication (IEC) provision is a critical strategy in preventing COVID-19 for the most vulnerable. Health workers should be adequately armed with ISO certified medical supplies and equipment namely; gloves, masks and dressing to minimize exposure to the virus while they offer services. We need to evaluate the extent to which information is reaching those in hard-to-reach areas such as islands, remote and inaccessible areas, pastoral communities, and settlements for refugees and internally displaced persons. Governments and non-state players must ensure that the needs of the most vulnerable members of communities are planned for in the prevention of COVID-19. And more importantly, the rights of healthcare workers that are at the forefront of managing COVID-19 should be safeguarded.

Lastly, as General Comment 14 on the Right to the Highest Attainable Standard of Health provides, violations of the right to health occur when the state, among other things deliberately withholds or misrepresents information vital to health protection or treatment. This can also happen when the state suspends a legislation or when it adopts laws or policies that interfere with the enjoyment of any of the components of the right to health. In this regard, Uganda needs to treat provisions of accurate information on COVID-19 as critical. Given that Uganda's legislation touching on Public Health is over 85 years, we must have urgent effort to review the key provisions under the Public Health Act that are central for Uganda to have effective responses for global pandemics like COVID-19. State responses to the COVID-19 should be hinged on the Human Rights Based Approach (HRBA) to ensure that the virus is curbed without endangering lives and livelihoods of the citizens, especially the most vulnerable. Regulatory approval for new medicines and speedy attention to developing new formulations for the prevention and treatment of COVID-19 are important considerations too.

We wish to call upon all our partners, collaborators and the general public to join efforts in curbing the spread of COVID-19. Specifically, responses to this pandemic should be tailored towards ensuring that services are made Available, Accessible, Acceptable and of Quality (AAAQ) for all to ensure that no one is left behind. Let us all take care of ourselves, those around us and stay healthy!

You can access more information about COVID-19 and Ministry of Health Guidance from the following sources:

Uganda Ministry of Health: COVID19 – Final Dos and Donts: <https://health.go.ug>

Uganda Ministry of Health Press Release: <https://health.go.ug/pressrelease>

Centers for Disease Control and Prevention Coronavirus Information and Updates: <https://www.cdc.gov/coronavirus/2019-nCoV/index.html>