OPEN LETTER FROM CIVIL SOCIETY TO THE WORLD BANK REGARDING THE
COVID-19 RESPONSE IN UGANDA

To: Antony Thompson
World Bank Country Director
Kampala, Uganda

Dear Mr. Thompson:

We are writing to you today as civil society organisations working on the right to health in Uganda with an urgent appeal on behalf of pregnant women, people living with HIV and other vulnerable communities amidst the COVID-19 crisis. We call upon the World Bank to ensure that its recent announcement of $15 million for Uganda’s health response to COVID-19 does not only focus on prevention of COVID-19, but also supports key access to health needs for the communities that are already affected by the government’s COVID-19 response.

The COVID-19 response plan was launched in Uganda without an effective plan to ensure that Ugandans with emergency health needs, particularly pregnant women, newborns and other vulnerable communities, would be able to continue obtaining health services even as the government responds to the COVID-19 crisis.

As a result, there have been a number of preventable deaths of women in labor and children. Many more have reported delivering in dangerous conditions, unattended by clinicians because they are unable to reach health facilities because of the transport
limitations. People living with HIV have run out of supplies of medicines. These are shocking and unacceptable human rights violations.

President Museveni has extended Uganda’s lockdown by another 21 days with the same conditions. We worry that without these much needed interventions, preventable deaths will increase.

Bans on the movement and unreasonable movement restrictions on people who have urgent health needs increases the risk of preventable death and suffering.

We have made appeals to the COVID-19 government taskforce chair, Rt. Hon. Prime Minister Ruhakana Rugunda, regarding this emergency, but we are yet to receive a response.

People are stranded in their communities, unable to reach health facilities on time for the emergency care because the Presidential orders and ban on public and private transport. The proposed mechanisms for use of the government vehicles and ambulances are not effective for meeting the needs of the most vulnerable who need urgent care.

The Ministry of Health has designated emergency contacts for such matters but these are either overwhelmed or not functioning. The requirement that people seek local “permission” from Resident District Commissioners fails patients—typically RDCs do not reply in a timely manner, are not available 24-hours a day, and are not trained to uphold patient confidentiality.

In particular since this $15 million allocation was taken from Uganda’s ongoing World Bank supported Reproductive, Maternal and Child Health Project, it is even more critical that it be used to support a system that will ensure the emergency health needs of women, children and other vulnerable communities are met, as part of the COVID-19 response.

We therefore urgently request that you:

Request publicly that H.E. President Museveni instructs the COVID-19 Task Force to ensure that the country immediately:

- Exempt all pregnant women and children seeking health services from the travel ban, effective immediately.
• Make use of the reallocated funds to launch an emergency mobile health service system, wherein two (2) emergency vehicles, fully equipped with fuel and drivers, stationed at the sub-County level, are available to provide free, 24-hour ambulance services during the duration of this crisis. RDCs, DHOs and LCs will be required to communicate and prominently display the dispatch numbers so that residents can easily make use of this life-saving service.
• In addition, at the village level, LC1s must be given the mandate and support to identify boda-bodas and vehicles that can be used to transport women in case of emergency when sub-County ambulances are not readily available.

We request that you ensure that the government of Uganda immediately commits to these life-saving measures as a condition of your funding.

We also note the brutality that the security forces have exacted on citizens, including pregnant women, during this period, in the form of violence by Uganda Police and by Local Defense Units (LDUs). While the Uganda Police has responded by charging some perpetrators, this is not enough. Arbitrary violence is unacceptable, and it completely undermines the national effort by the Ministry of Health to build solidarity in response to the threat of COVID-19.

We therefore also implore the World Bank to publicly condemn these human rights violations, and call on the government instead to emphasize community-led education of the public about the importance of self-isolation and social distancing.

Finally, the complete halt to everyday operations of Uganda’s Judiciary has triggered immense harm to many who must now wait an indeterminate amount of time for access to justice. In particular, we draw your attention to recent arrests of key populations, including 19 LGBT people (arrested March 29 and currently in detention), sex workers in Mbarara, and many more. Detainees are currently unable to receive visitors, apply for bail, and obtain access to counsel. This is unacceptable. We therefore also recommend that the World Bank call on the Government of Uganda to:

• Designate legal aid services as essential during this unprecedented period, so that fundamental human rights are not put further at risk, and
• Release immediately and drop any charges against all people who have been caught up in sweeps related to curfew violations or other alleged contraventions of the Presidential Directives, such as 19 LGBT Ugandans arrested March 29, or the hundreds of other people arrested and detained from around the country. Communities with little to no social safety net have been struggling to respond to
shifting demands from the President with little to no notice. Warnings and education, rather than brutality and arbitrary detention, are what are called for.

Sincerely,

Action for Rural Women’s Empowerment (ARUWE)
Centre for Health, Human Rights and Development (CEHURD)
Chapter Four Uganda
Coalition for Health Promotion and Social Development (HEPS-Uganda)
Family Life Education Programme (FLEP)
Health Global Access Project (Health GAP)
Human Rights Awareness and Promotion Forum (HRAPF)
International Community of Women Living with HIV/AIDS Eastern Africa (ICWEA)
Sexual Minorities Uganda (SMUG)
Uganda Key Populations Coalition (UKPC)
Women’s Pro Bono Initiative
Uganda Network Law, Ethics and HIV (UGANET)

CC:  C. Felipe Jaramillo, World Bank Country Director, Africa
      Rt. Hon. Prime Minister Ruhakana Rugunda
      Speaker of Parliament, Hon. Rebecca Kadaga
      Minister of Health, Dr. Jane Aceng