

 THE REPUBLIC OF UGANDA

**RESPONSES TO THE UN SPECIAL RAPPORTUER ON RIGHTS OF PERSONS WITH DISABILITIES TO HEALTH**

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|  **Ministry of Gender, Labour and Social Development** **Department of Disability and Elderly**  **P.O. Box 7136** **Kampala,** **Uganda.** |
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**Questionnaire on the rights of persons with disabilities to the highest attainable standard of health**

**1. Please provide information on existing or planned legislation and policies to ensure the realization of the right to health of persons with disabilities, including current challenges and good practices.**

The existing or planned legislation and policies include;

1. a) The 1995 Constitution of Uganda is proactive to the health of all Ugandans. The National ***Objectives and Directive Principles of State Policy,***
2. ***XVI (b) provides for all Ugandans to enjoy rights and opportunities and access to health services, clean and safe water, decent shelter and food security among others.***
3. ***XVI recognizes the right of Persons with Disabilities to respect and human dignity,***
4. ***Article 32 provides for affirmative action in favour of those marginalized on basis of disability ,among others***
5. ***Article 35(1) and (2) provides for right to respect, human dignity and appropriate measures to ensure full mental and physical potentials to persons with disabilities and appropriate laws for the protection of persons with disabilities.***
6. ***Equal Opportunities Commission (EOC)( Article 14)*** *provides for the monitoring and evaluation of policies, laws, plans, activities, practices, traditions, cultures, and customs to ensure that they are compliant with equal opportunities and contain affirmative actions on basis of groups marginalized on basis of disability, among others. The EOC scrutinizes the Sectoral budgets and plans in line with the Public Finance Management Act, 2014 to ensure that they provides for gender and equity budgeting, among others.*
7. ***The National Policy on Disability 2006, the guiding framework for interventions towards persons with disability, among its priority areas emphasizes the prevention and management of disabilities through mobilization of resources, promotion of information campaigns on prevention and management of disabilities, strengthening community based initiative , parent and peer counseling, availability of and utilization of assistive devices and appliances, recruitment of appropriate health personnel and retooling of orthopedic workshops.***

***h)The National Council for Disability (2003) for monitoring all interventions towards persons with disabilities and communicating gaps in service delivery to government and all other service providers, among others;***

***i) The Persons with Disabilities Act (2006) for elimination of all forms of discrimination against persons with disabilities. Articles 7, 8,9and 10 are specifically on health and call for enjoyment of rights by PWDs in all health institutions including exemption of duties, surcharges and levies, introduction of sign language in curriculum of medical personnel, interpreters in hospitals, promotion of special health services Government to provide appropriate service delivery, prevention of disability through health and environmental education, early identification and interventions, healthy and safe labour conditions, among others.***

***j) The Building Control Act 2013 has incorporated Accessibility Standards to guide in appropriate standards for utilization by PWDs.***

*k) The Health Sector Development and Investment Plan (HSDIP) 2015-2020 provides for essential health package, rehabilitative health care inclusive;*

*l) The Ministry of Health is reviewing the Mental Health Act, Cap 279 to address the gaps in the Mental Health Act and to incorporate the new developments at national, regional and International levels.*

*m)) The NDP Two Health component also addresses access to health by all*

*n) The Health Insurance Policy currently before Cabinet includes increased access to provision of health including various disability causing conditions*

**2. Please provide any information and statistical data (including surveys, censuses, administrative data, literature, reports and studies) related to exercise of the right to health of persons with disabilities in general, as well as with particular focus in the following areas**:

*a)* ***)****All new health facilities by policy must have ramps to increase access to the persons with physical disabilities;*

*b) Accessibility Standards were developed by Ministry of Gender, Labour and Social Development in collaboration with Uganda National Action on Physical Disabilities (UNAPD) and other stakeholders. These Standards have been annexed to the Building Control Act (2013) to guide service providers on issues of standards in accessibility. They are being used for monitoring & auditing public buildings.*

*c) The National Health Policy stipulates health free services for in all public/ government facilities including mental health services. All regional referral hospitals have well developed mental health departments. The Ministry of Health Aids Control Program and Uganda Aids Commission offer fantastic programs including prevention activities, patient care& provision of anti-retro viral (ARVs) therapy.*

*d) Some of the disability specific health care services & programs include;*

*i) Orthopedic Workshops in Regional Hospitals that fabricate assistive devices.*

*ii )National Optical Workshop in Entebbe that assembles &disseminates spectacles to persons with refractive errors to prevent/correct visual impairment& blindness.*

*iii) Provision of wheel chairs both as the Ministry of Health but also with partners following the National Wheel Chair Guidelines,*

*iv) The Community Based Rehabilitation Program that targets persons with disabilities within their communities has a health component of promotion, prevention, medical care, rehabilitation and provision of assistive devices.*

*v) Habilitation and Rehabilitation services include a new program in Wakiso, one of the districts surrounding Kampala Capital City for early identification and interventions for the deaf-blind children that is expected to be scaled up to other districts.*

**3. Please provide information on discrimination against persons with disabilities in provision of healthcare, health insurance and/or life insurance by public or private service providers,**

*There is no intended discrimination against persons with disabilities in the provision of health services by the public sector. However barriers to access to health by persons with disabilities may arise from;*

a) Limited awareness of their human rights;

b) Gaps in the provisions of some health legal and policy frameworks and guidelines;

c) Limited knowledge and skills in sign language;

d) Inaccessible structures and services. For example, some deaf persons at times miss out on health messages and information given due to lack of sign language interpreters, persons with wheelchairs may not access some health services due to inaccessible buildings, inaccessible labour beds, to name but a few;

e) Poverty among persons with disabilities and their families

f) Negative cultural beliefs and myths arising from fear, ignorance, superstitions, neglect and lack of awareness of persons with disabilities rights.

**4. Please provide information on the observance of the right to free and informed consent of persons with disabilities regarding healthcare, including sexual and reproductive health and mental health services.**

*Observance of the right to free and informed consent to Persons with Disabilities regarding health related issues is in built in the well observed policy and ethical requirement that before any health intervention, a person must be well informed and should give his/her consent.*

*The Ministry of Health developed a Booklet on ethical code for health workers.*

 **5. Please describe to what extent and how are persons with disabilities and their representative organizations involved in the design, planning, implementation and evaluation of health policies, programs and services.**

*Involvement of Persons with disabilities and their organizations in planning & implementation of disability services is done under some of these legal & institutional frameworks;*

*a) The principle of the National Policy on Disability 2006 which is the guiding framework on disability interventions of all stakeholders emphasizes the human rights approach to programming and participation. Full participation and representation of persons with disabilities and their careers in planning, implementation, monitoring and evaluation of their programs at all levels.*

*b) The National Council for Disability Act 2003 mandates the Council to monitor all interventions to persons with disabilities and to advise government and other stakeholders on gaps to address.*

*c) The Public Finance Act mandates Equal Opportunities Commission reviews all sectoral budgets and Plans to ensure that they are compliant to gender and equity.*

*d) The Local Government Act cap 243of 1997 provides for affirmative action in representatives of Persons with disabilities , a female and male in local councils at various levels and at parliamentary level for fair representation in planning, implementation and , monitoring at all levels.*

**CROSS CUTTING CHALLENGES**

*a) Inadequate numbers of Rehabilitative Health care workers at all levels.*

*b) Inadequate budgetary provisions for rehabilitative health care*

*c) New technologies in rehabilitative health care provision require regular skills development for our service providers.*