Uganda: Progress, Achievements and challenges in the implementation of the 2010 Munyonyo Resolutions.

Hon. Sylvia N Ssinabulya
UGANDA
• In the 9th Parliament, a number of fora have been established to advance the ICPD agenda, Maputo PoA and the Accra Agenda.

• The committee on social services and other fora that include UPFFSP&D, NAWMP-U, The MDG forum, Forum on children, Youth etc
Resolution on Leadership

• Members of Parliament have continued to play a leading role in the promotion of Family planning and giving visibility to Maternal Health and RH in general.
• In the last parliament, a Motion for a resolution of Parliament to make maternal health a priority and a number of Questions for Oral answer were moved on the floor of Parliament
Members tabled before parliament various bills that recognize rights of women, young people and other vulnerable groups. These include Bill on FGM, Domestic Violence Bill, Marriage and Divorce Bill and the trafficking in persons Act.
• Members of parliament pressed government to secure funds to finance health and when a loan request from the WB of $100 was brought to parliament, we refused to approve it until additional $30 million had been secured for Reproductive health.
• In the new parliament, we have continued to influence government business, and have provided oversight to successful implementation of all government development programmes.
• We have been consulted when key policies are being formulated or reviewed
• PMTCT, VHT, Multi tasking
Financing

Though we have not yet been able to achieve the Abuja target of 15%, we have seen progress in funding for the health sector in the national budget from 8.9% in FY 2006/07 to 10.4% in FY 2011/12.
• A budget line was created for contraceptives

• Budget for drugs and supplies was centralized and sent as a lump some to the National Medical stores.
• Re allocated resources in the just passed budget to motivate health workers

• Refused to approve Ministry of Health Budget until re allocation of funds was made to cater for essential items like EMOC , Safe Delivery kits
• Re allocated resources that had been indicated for trivial expenses like workshops and seminars to go into supporting Village health teams
Advocacy

• The various Parliamentary fora have continued to do advocacy in parliament and in members constituencies. (RHU-Kakuuto, Gomba&Mityana)

• Issued Media briefs and press conferences on FP, Maternal deaths, Unsafe Abortion, Population growth
• Participate actively in international and national Campaigns and events e.g. Population day, Safe motherhood day, HIV/AIDS day, Women’s day, CARMMA Launch etc.
Advocated to include Maternal Health on the agenda of the 2012 IPU in Kampala.
• MPs have gone ahead to raise awareness and generate the commitment of local government leaders in a number of districts.

• Some local governments have set by-laws attributed to the Forum that encourage male involvement in safe motherhood programs e.g. Mayuge, case of couples receiving first service for ANC.
Enhancing Partnerships

• Continued to work with partners
• PPDARO, POPSEC, UNFPA, DSW, RHU, AOUGU, WRA, IPPFARO
• Initiated partnership with Corporate sector and as a result we were able to acquire IV fluids and back up Power supplies for 6 major Hospitals.
• We enlisted corporate companies to donate blood on a monthly basis. So we have a blood donation roll on a monthly basis
• Have signed an MOU with the IPU to develop an advocacy strategy for MDG 5.
Learning from best practice

• Planning to do benchmarking visits to countries that have performed well e.g. Botswana, Rwanda, Ethiopia etc
Challenges

• Dealing with negative utterances and views on Family planning.
• Not all leaders are with us, therefore we strive to build political will and commitment from some leaders.
• Inadequate funds for constituency programmes