



Uganda Debt Network

CIVIL SOCIETY STATEMENT ON THE CALL FOR IMPROVED SERVICE DELIVERY OF UNIVERSAL PRIMARY EDUCATION AND PRIMARY HEALTH CARE IN UGANDA

**Presented to the Parliamentary Committee
on Social Services**

8th December, 2009



1) Preamble

We the members of the civil society from the districts of Kaliro, Iganga, Bushenyi, Kamuli, Kanungu, Bugiri, Namutumba, Tororo, Kumi, Bukedea, Rakai, Katakwi and Amuria gathered at Pope Paul VI Memorial Hotel, Kampala, between 5th to 8th December 2009, having deliberated on issues that continue to affect service delivery in our communities, with specific reference to Universal Primary Education (UPE) and Primary Health Care (PHC) in Uganda,

AWARE that the government has committed itself to the Millennium Development Goals (MDGs) targets by 2015, Poverty Eradication Action Plan (PEAP) and National Development Plan (NDP) to poverty eradication through peoples' participation, prudent use of public resources for effective service delivery,

SUPPORTIVE OF GOVERNMENT commitments to UPE; a) quality education b) minimum necessary facilities and resources to enable every child enter and remain in school c) equitable and affordable education, as well as PHC; a) health education, b) maternal and child health c) provision of essential drugs,

RECOGNISING THAT Government has since the 1990s annually increased the budgetary allocations and improved policy framework aimed at poverty reduction through targeting interventions like Universal Primary Education and Primary Health Care, thus improving primary school enrollment and quality of health care in Uganda,

DISMAYED by the trend of high numbers of ghost pupils and teachers, poor quality of education, inadequate school facilities, retention issues, lack of feeding programmes (for pupils and teachers), lack of relevant bye-laws for all school-going children, enrolment and enforcement by Local Councils, non functional gender desks/ focal persons, coupled with inadequate number of senior women and male teacher counsellors, low budget allocations; declining SFG and Capitation funding and dismal requisite resources to Special Needs Education amidst no Special Needs post primary Education arrangements,

FURTHER DISMAYED that under Primary Health Care, issues pertaining to under funding, misuse of ambulances, illegal charges/ extortion, non-functional Health Management Committees, inadequate drug supplies and procurement issues amidst expiring drugs at National Medical Stores that prevail,

WE ARE THEREFORE COMMITTED to advocating for pro-poor and gender responsive policies, prudent management and utilization of national resources, restructuring of budgetary allocations to benefit the social sectors and all Ugandans especially the poor and marginalized.

2) Policy and Programme concerns

WE ARE CONCERNED that while access to education through Universal Primary Education (UPE) is the main policy objective for Primary Education and a lot has been achieved, through the Quality Enhancement Initiative (QEI) to address challenges around four core areas of pupils, teachers, management and the community, Science Education Policy or even the Text Book Policy;

- UPE has continued to prioritize access, equity, quality and efficiency as cornerstones for realizing its policy objectives. Even going by just one parameter attests to the reality that most of the quality indicators like the completion and transition rates, staffing,

pupil classroom and text book ratios remain poor. This has translated into continued poor performance of most UPE schools especially in rural areas. In Kumi district in 2008, 5055 pupils were registered but only 74 passed in division one. In the same year, Bugiri district had 6497 pupils who sat for PLE and only 49 (12 girls and 37 boys) passed in division one. In Kamuli district, Butansi Sub County, there was only one child in grade 1 in 2007 and so was 2008, while there was no 1st grade in the last five years. In Bushenyi district, Kakanju Primary School registered only one 1st grade in 2008.

- While access to primary education has undoubtedly been a success where net enrollment ratio in primary has been an impressive average of 92% (94% boys and 90% girls) in FY 2007/08 against the PEAP target of 90%¹, especially in the lower classes. This has resulted into limited number of teachers attending to the increasing numbers where for instance at Karambi, Kashenyi and Katunda primary schools in Mpungu sub-county, Kanungu district, infant classes (P.1-P.3) are taught together at times. St Paul COU Primary School, Nsinze Sub County, in Namutumba district has no classrooms and using the church yet they have P.1-P.7 classes, In Bukuta primary school, Bulesa sub-county, Bugiri district, there are only two classrooms and yet it is a full primary school (P.1-7).
- The dismal and declining funding trends towards the major Universal Primary Education sub-programmes; especially, the School Facilities Grant (SFG) and Capitation Grant per capita and the fact that the released funds tend to be less than the budgeted. In FY 2006/07, SFG funding in particular reduced from Ug Shs 51 billion to Ug Shs 16.4 billion. This has led to decline in infrastructure where for instance teachers lack accommodation and inadequate classrooms. In Katunda and Buremba primary schools in Mpungu sub-county, the Head Teachers are accommodated in makeshift public bar at Karambi trading centre. The school property (text books, registers, school stamps, log books etc) are kept at the neighbourhood. In Bushenyi district, Nyarurambi Primary school in Kakanju Sub-county, the Head teacher sleeps in his office and the deputy sleeps in the staff room.
- Whereas one of the Universal Primary Education policy objectives is to provide the minimum necessary facilities and resources to enable every child enter and remain in school until they complete the primary cycle of education, there are retention detractors like lack of a school feeding programme (for pupils and teachers) in the schools. In Kumi district, Akide primary school many pupils have abandoned school because of lack of feeding.
- The implementation of Special Needs Education policy has remained too slow and almost neglected, especially at the Local Governments levels. The vehicles provided under the initiative, for instance, have all been grounded on the pretext of no or minimal funding. The policy suffers from least attention within the education sector, pushing further to the fringes of socio-economic and political development of those already disadvantaged. In 2009, Agururu Primary School Annex in Agururu B village, Agururu B parish, Western Division in Tororo municipality, the teachers do not have basic training in sign language whereas there are five pupils who need sign language for instruction. A similar situation is presented in Aketa and Akwamor primary schools in Ongongoja sub county Katakwi district as well as Amugei primary school in Acowa sub county, Amuria district.

¹ MFPED: National Budget Framework Paper 2008/09-2012/13, March 2008





- Beyond the primary cycle of education, civil society appreciates efforts for higher education through the Universal Secondary Education (USE) that also includes Business, Technical, Vocational Education and Training (BTNET) with Government focus on expansion of equitable access to quality and relevant education. Given that Universal Secondary Education is also built on the principle of Private-Public-Partnership, it is unlikely that the programme will benefit students with special needs (arising from disability, stigma, social evils, gender and differentials in social-economic status), yet there are few post-primary schools for special needs. A school built in Agururu parish i.e Agururu Vocational training school in Tororo municipality, for the last 3 years, has never been opened yet funds are allocated every financial year for electricity, water and opening the road by the municipality.
- Worse still, taking a sample of over 20 districts in Uganda (some of which are represented in this Statement), there is evidence of limited or no HIV/AIDS and gender desks/focal persons in the Higher and Lower Local Governments' education departments and sector committees of Local Councils; coupled with a general absence of the institution of Senior women and Men teachers as vehicles to manage attendant issues of pupils' adolescence, personal inquiries among others thus exacerbating dropout rates of school-going children.
- Besides, there is lack of relevant bye-laws and ordinances (as mandated under the decentralisation policy) for Government structures to enable full scale enrolment of school-going age children and enforcement by relevant authorities, especially the Local Councils. By 2006, about 1.3 million children were still not in schools while others were dropping out before primary seven. A trend that has persisted to-date. Thus there is need to enforce bye laws to keep children at school. For example, Katakwi, Kumi, Bukedea, Amuria districts, Mpungu s/county in Kanungu and Nabigasa Sub County in Rakai have bye laws which have never been enforced.
- We are also concerned that the transfer of teachers is not based on school calendars, as they are being transferred during the course of the term. Similarly, some pupils change Universal Primary Education schools in the course of the term and with no possession of valid release letter from the previous school. There are instances where some teachers have also resisted transfers and end up not reporting to the school transferred.

This has created ghost teachers and pupils Examples Nyarutuntu Primary School, Igara West Constituency, Nyabubare sub-county, Bushenyi district, involving teachers Ms Masika Grace and Ms Nduhukire Ketty who reported to the school only once in five years. According to the Bushenyi district officials, the two teachers were found to have a clean record in their files and therefore there was no reason for their dismissal. Also in Iganga district, the number of enrolment before headcount on 13th -10-09 was 170,000 pupils and 132, 858 pupils after head count revealing a difference of 37,142 ghost pupils.

- This is further compounded with the existence of ghost schools which remain apparent, for example at Kayonza Primary School in Rubenje parish, Burere sub-county, Buhweju County, Bushenyi district with a computer number 040024 and code 1407003 with six teachers on government pay-roll. This does not only engineer the creation of ghost pupils and ghost teachers but also slows down the pace of teacher recruitment by some districts, and affects implementation of district staff ceilings, which grossly undermines Universal Primary Education policy objectives.

- Low remuneration has forced teachers to acquire loans from multiple sources and usually with difficulty to pay back. This forces them to abandon the schools and look for avenues of survival thus affecting teacher performance and overall performance of schools. For instance, a teacher in Kabata p/s in Kumi district who acquired a loan from stanbic banks failed to settle the debt and was arrested.
- There are also issues of child marriage amongst school-going children. At Tilling Primary School, a pupil was married off before she sat for her Primary Leaving Exams, Butansi Primary School in Kamuli district, 8 girls were married by 3rd term 2009, Bulemba P/S, Mpungu sub county, 3 girls by end of 2008, Omodoi sub county, Adodoi P/S one girl was married by a policeman, Ndagga P/S, Kyalulangira sub county, Rakai 4 pupils (2 boys and 2girls) only sat for PLE in 2008 2009.

Recommendations

- a) Head count of teachers and pupils should be carried out on a termly basis.
- b) All school construction work should start when the School Management Committee and school administration have been issued with information on Bills of Quantities which should also be displayed on public notice boards outside the offices of the officials, so as to improve on transparency and accountability.
- c) Government should revisit its policy on automatic promotion of pupils so as to improve on the quality of education.
- d) Staff ceiling be opened up as per needs assessment of different schools.
- e) More resources should be allocated to the Special Needs Education in schools and increase the number of teachers.
- f) There is need for a policy to address issues of monetary incentives for teachers in hard to reach areas as one way towards bridging the urban-rural school performance.
- g) Parliament ensures that the school feeding programme is the responsibility of the parents by policy and enforced.

WE ARE FURTHER CONCERNED that, although there has been increase in funding for primary health care services at the local Government levels, this has remained more rhetoric than real. Much of the funding goes into construction of health facilities as a symbol of health services. There is less focus on strengthening the preventive measures. The situation is worsened by the weak capacity at local Government levels to implement primary health care. This has therefore led to the sector facing enormous challenges which include;





- Limited funding allocated to the health sectors implies a conflict between people's survival (dying needlessly because they cannot afford medicines that could keep them alive) and maintenance of macro-economic stability. There have been instances where health centers are given far below the amount of funds requested and lack of response to the raising population of the different areas. In Kumi district, Mukongoro Health Centre III, budgeted for UGX 9,217,000/= but received 2,412,921/= in 1st quarter of FY 2009/10. In Kaliro district, Namugongo Health Centre III budgeted for UGX 5,000,000/= and received UGX4,130,000/= for the FY 2007/8
- The key determinant for health services in Uganda is the availability of drugs. Despite the indication that drugs as key priority in the Ministry of Health policy documents, there is persistent lack of drugs in government health facilities at lower health centers. For instance, in Katakwi, Okocho Health centre II, Ongongoja Health centre II and Opeta Health Centre II have been persistently affected, the same applies to Nawaikoke Health Centre III in Kaliro district as well as Magogo Health Centre II in Bulamagi Sub county In Iganga district.
- The situation is further worsened by lack of medical doctors and qualified health workers in health centre II-IV for example, Namutumba district, Nsinze Health Centre IV with no medical doctor but only one clinical officer and a midwife. Kihihi Health Centre IV, in Kihihi Town Council, Kanungu district also has no doctor but one nursing officer and two midwives. Fungwe Health Centre II, in Iyolwa sub-county, Tororo district is run by one nursing assistant.
- Service delivery in the health sector is further affected in hard to reach areas such as Nsiika Health Centre IV in Rwengwe Sub-county in Bushenyi district where the health centre has no doctor, no laboratory and the theatre is not operational. In Mpungu Health Centre III, in Mpungu sub-county, Kanungu district, the health centre is run by an enrolled nurse. Kapelebyong Health Centre IV, in Amuria district, there is no medical doctor and the theatre is not operational
- HIV prevalence has remained high in both urban and rural areas. Government has put in place the possible initiatives such as provision of Anti-Retroviral drugs at Health Centre IIIs and IVs and Prevention of Mother to Child Transmission (PMTCT) services to our community members. In spite of the above, a number of health workers lack sufficient counseling skills and knowledge especially on children. For example, Rakai Health Centre IV, in Rakai district.
- Inadequate staff and their lack of commitment coupled with limited supervision has greatly affected service provision in rural and urban areas which further deny the requisite services of medical personnel. The assigned ones spend most of their time either at the district headquarters, study leave or in their personal clinics. In Bushenyi, Kiyagara Health Centre III, in Nyabubare sub-county, the centre opens at 9am and closes at 12.00pm and do not open over the weekends.
- We appreciate the policy of availing ambulances to health centres to improve service delivery and save lives however in Buyinja Health Centre IV, Bugiri District, the Nissan pickup ambulance was re-sprayed and all the labels erased. The siren lights were also removed although ministry of health registration number remains the same. In the same health centre, patients are charged Shs. 30,000 to be transported from the health centre to District Hospital in Bugiri Town.

Policy Recommendations

- h) Government needs to swiftly increase funding to the health sector from 8.5 percent in FY2008/10 to over 20 percent by 2012/13. More emphasis should be put on; disease control and prevention, provision of essential drugs, and ensuring that they are efficiently distributed and utilized.
- i) The sector should restructure its budget to spend more on decentralized services (especially primary health care) than national level activities. The ministry could consider cutting its administrative cost like reducing on the fleet of vehicles centrally managed, some of which are rotting at the Ministry of Health Headquarters.
- j) MoH should provide incentives to motivate community workers and PHC teams as a whole to carry out PHC activities. In addition specific incentive should be budgeted for personnel in hard to reach areas.
- k) The MoH should improve value for money in the sector through ensuring effective monitoring of health programmes especially relating to service delivery. The sector should ensure that drug supplies dispatched from the central medical stores actually reach the districts timely.
- l) The ambulances should be made to fit the needs of the patient and not double cabin pickups which were allocated to district health center IVs. The ambulances should also be supervised by the in-charge and not the district engineers.
- m) National medical stores should publicize the labeling of drugs and syringes in the press.





Uganda Debt Network

P. O. Box 21509

Kampala, Uganda

Plot 424, Mawanda Road

Off Kira Road, Kamwokya

Tel: 256-41-543974

Fax: 256-44-534856

E mail: info@udn.or.ug

Website: www.udn.or.ug