

# WOMEN LIVING WITH HIV

## MANIFESTO

### 2016-2021



The International Community of Women Living with HIV&AIDS Eastern Africa (ICWEA)

*The International Community of Women Living with HIV Eastern Africa (ICWEA) believes that the upcoming elections in Uganda is an opportunity for us as women living with HIV to make demands that will enable us participate, engage and change the future and make the next five years better for us to access services and enjoy better health. The demands below are the basis upon which we will decide on who to vote in the upcoming elections;*

#### INCREASE HEALTH SECTOR FUNDING

**The numbers:** Whereas the World Health Organization recommends UGX 160,000 per person per year as expenditure on health, the government of Uganda currently invests about UGX 38,000 per person per year on health (Ministry of Health Uganda National Health Accounts Survey, 2012/2013). This means the amount of money Uganda spend on each citizen per year is less by UGX 122,000, this is a national disgrace and places our country with one of the worst health records in world

**National level Implications:** This means that health workers will not be recruited, expectant mothers will continue to die every day during labour, drug stocks will become routine, various health programmes will stagnate, life expectancy will not improve and this will further impoverish the already poor populations that can only access public health facilities which instead lack the necessities.

**District level implications:** No new health centers will be constructed; the existing health centers will not meet the international health standards, and poverty will increase as a result of limited access to free health care.

Recognizing the role and the importance of a good health care systems in the quality of life and social welfare in modern society; **we therefore demand for:** annual

increase in health sector funding, prioritizing: a) recruitment, motivation and retention of health workers; b) increased primary health care (PHC) funds for local government level health facilities; and c) essential medicines and equipment—to eliminate stock outs and meet community needs for treatment and prevention.



#### PROMOTE ACCESS TO SEXUAL AND REPRODUCTIVE HEALTH AND RIGHTS; STOP VIOLENCE AGAINST WOMEN

Violence against women and girls and lack of control over reproductive health generates trauma and significant health and economic consequences. Majority of women have had unsafe abortions, teenage pregnancies and obstetric fistula. HIV infection alone increases the risk of violence.

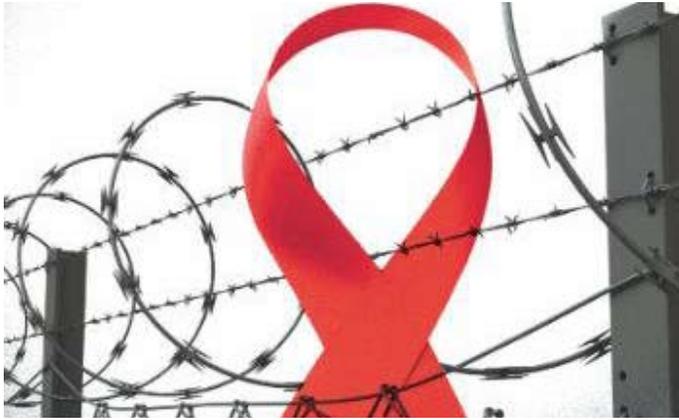
In Uganda, we still experience about 435 deaths out of every 100,000 births, an estimate of 6000 women dying every year, 16 everyday.. This means that every one and a half hours Uganda loses an expectant woman; most deaths are caused by avoidable circumstances. In addition to this, out of 100,000 live births, about 435 die. These deaths are three times higher than the target of 131 deaths per 100,000 live births set to be achieved by 2015. Additionally, 42% of the births are not assisted by health personnel. Bottom line is that these women do not access comprehensive sexual reproductive health rights services including information despite massive health risks they face.

**National level Implications:** Every one hour and half an expectant mother will be lost, women's sexual and reproductive health rights will be violated, and chances of having HIV free babies will be weakened.

**District level Implications:** Violence will make women shun health centers preferring the unknown to the effects of a HIV diagnosis.

**We therefore demand for;** funding, policies and programs to increase access to and utilization of comprehensive reproductive health care services; sexual health programs designed to meet young peoples' needs; and implementation.; delivery of health services using human rights based approaches, immediate implementation of the Domestic Violence Act; setting proper mechanisms for seeking redress in case of rights violations and public commitment to defeat the epidemic of violence against women living with HIV.

## OPPOSE DISCRIMINATORY LAWS AND POLICIES THAT HINDER ACCESS AND UNDERMINE THE RIGHT TO HEALTH



Discriminatory and criminalising laws undermine effective health service delivery, in particular for stigmatized diseases such as HIV. Such discriminatory laws undermine effective HIV prevention efforts- they fuel stigma and discourage people from seeking diagnosis and treatment out of concern for their privacy or negative social repercussions.

**National level implication:** This will negatively impact on the country's progress in the struggle to end the AIDS epidemic including failure to reduce the HIV burden on women who make up majority of people living with HIV. It will impact on government programs for example, people won't go for testing which is the entry point to prevention, treatment, care and support services, mothers will not go for eMTCT services so majority of children will contract HIV.

**District level implication:** Health service delivery will be affected and will undermine prevention efforts. Stigma will affect various HIV&AIDS programmes like eMTCT right from the grassroots.

**We therefore demand that;** our leaders work with Parliament to repeal harmful, discriminatory provisions contained in the HIV Prevention and AIDS Control Act 2014; ensure equal access to quality services for stigmatized populations and support inclusion of the right to health in the Constitution.

## Call to action

**Advocate:** Advocate, push and demand that our issues are prioritised and included on the agendas of the aspiring candidates.

**Vote:** Actively participate in the pre-election processes. Attend the rallies and ask the candidates to tell you what they will do for you. When time comes to vote, go and cast your vote, it is not only your right but a way of being part of making decisions.



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## ECONOMIC EMPOWERMENT

Poverty is the leading cause of all household vulnerability; as it explains failure to access social, economic and other relevant services. Women are the most poverty hit population in Uganda and world over yet they are the family bread winners, face a lot of human rights violations including lack of access to free services and are the most affected and infected by HIV. On top of this, women have to endure 7.7km and/or 6.2 km to access a government and/or a non- government health facility respectively.

**National level implications:** This means that national poverty levels will increase, the development of the country will slow down, and few women will be able to access social services especially in cases of emergencies.

**District level implications:** When the family unit is shaken, there will be acute poverty which will affect lots of areas.

**We therefore demand that;** political candidates commit to establishing programs that will sustain the livelihood of women living with HIV. Government economic support systems should pay attention to vulnerable groups like women living with HIV. They should therefore support women living with HIV with sustainability livelihood programs.



## Road map to elections

**October 12, 2015 – February 15, 2016:**  
General campaigns

**February 12, 2016 - March 12, 2016:**  
Polling period  
(Presidential, Parliamentary, Local Governments including Special Interest Groups)

**February 19, 2016 - March 25, 2016:** Gazetting and publishing results