



## **Presentation to the Parliamentary Committee on Gender Labour and Social and Development on the key Social Protection Issues**

### **About the Initiative for Social and Economic Rights**

The Initiative for Social and Economic Rights (ISER) is an independent, not-for-profit human rights Non - Governmental Organization that works to advance the effective understanding, monitoring, implementation and realisation of economic and social rights (ESRs) in Uganda. ISER works to holistically advance ESRs with a particular focus on the vulnerable and marginalised and has five thematic programs: the right to health; right to education; economic inclusion and fiscal policy; citizen participation and accountability; and Business and Human Rights.

Honorable Chair, on my own behalf and on behalf of ISER, I congratulate you on your election as members of the 11th Parliament and the eventual assignment and approval as chairperson and members of this significant Committee on Gender, Labour and Social Development. I thank you once again for the good work you have been in position to do in the short time of your tenure and for inviting us to present some of the salient social protection issues that require the urgent attention of the Committee and the entire Parliament.

In light of the country emerging from the second lockdown to deal with the more recent wave of Covid 19, we would also like to take this opportunity to address critical issues that we believe the Committee should address.

### **Introduction**

The country has made strides in the implementation of socioeconomic programs aimed at improving the livelihood of the population albeit various policy, legal and structural implementation challenges and weaknesses. The outbreak of COVID19 and the implementation of the various measures and directives aimed at controlling its spread has given prominence to a number of weaknesses and challenges that have derailed the effective implementation of some of the socio - economic transformative programs such as Social Assistance Grant for

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Empowerment and Universal Primary and Secondary Education Programs. With the current program based budgeting being implemented under the National Development Plan III, it is important that the Committee on Gender, Labour and Social Development leads the rest of the Parliament sectoral committees under the Human Capital Development program to work towards addressing some of these key challenges;

### **Key Concerns.**

#### **1. Reliance on the National ID in the implementation of Social Protection Mechanisms breeds exclusion**

Since its launch in 2014, the National ID has gradually been made a prerequisite identity marker to access a range of social services, including social protection services. Notable among these services is the Social Assistance Grants for Empowerment and the recent COVID19 relief cash transfer program. Hinging access to such services on possession of a National ID has proven problematic. According to [research](#) conducted by ISER in conjunction with Unwanted Witness and the Centre for Human Rights and Global Justice, the digitalisation and integration of the national ID into service provision has affected the delivery of, and exclusion from health and social assistance for the elderly through the SAGE program. This creates a significant risk of exclusion, since the national ID system is not currently accessible to every Ugandan and the registration process is often characterised by undue delay. The research report analyzed NIRA and UBOS data and found that between 23–33% of the adult population has not been registered for the national ID. The report also found that marginalized groups, including those living in poverty, older persons, persons with disabilities, women and those living in remote areas are less likely to have registered for the national ID, obtained a national ID number (NIN) or a National ID card (NIC). By requiring beneficiaries to produce their NIN or NIC to access SAGE, emergency relief or any social service, the government risks excluding many eligible persons from social assistance programs.

#### **2. Reliable data collection is key in the implementation of targeted social protection mechanisms**

While selecting beneficiaries for the recent COVID19 emergency cash transfer program rolled out on the 8<sup>th</sup> July 2021, the MoGLSD announced that administrative records from city and municipality clerks, with the support of information from the Uganda Bureau of Statistics (UBOS) and National Identification and Registration Authority (NIRA) would be used. This arrangement was based on the false premise that the government has data on

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the already identified clusters; which may not be true given that cities, urban councils and UBOS do not have data on informal workers. Indeed, the data gap was realised as many Ugandans who fell within the target vulnerable groups weren't captured to benefit from the cash transfer.

ISER's [research](#) recommends that to alleviate this challenge, the government, under the auspices of the decentralized system of governance, needs to maintain and periodically update data on all Ugandans, especially the vulnerable. The government set up a Single Registry for Social Protection as a common repository of beneficiary data from social protection programs and the vulnerable but it is yet to be fully populated. Failure to have data on who is vulnerable undermines the country's ability to provide social protection even beyond the pandemic.

### **3. Prioritising an Equitable National Health Insurance Scheme and NHIS Bill, 2019**

The COVID19 pandemic has highlighted the debilitating effects of high out of pocket expenditure on health. Now more than ever, the government needs to fast track the passing and implementation of an [all-inclusive NHIS Bill](#) into law to avert the high out of pocket expenditures on health.

Expanding financial risk protection and social protection through national health insurance is high on the national policy agenda. Uganda's National Health Policy II and Health Financing Strategy 2015-2025 focus on accelerating the movement towards Universal Health Coverage by committing to a National Health Insurance Scheme as a way to ensure households have equitable access to basic health services and to protect households from the financial risk associated with high out of pocket health care payments. Similarly, the Uganda Vision 2040 and National Social Protection Policy reiterate the need to establish a National Social Protection System which defines social protection to mean public and private interventions to address risks and vulnerabilities that expose people to high financial risk including affordable national health insurance as one of the priority interventions.

While the last Parliament passed it, it is yet to be signed into law. The Committee should work to ensure a national health insurance scheme is passed.

#### **4. Prioritise equitable roll out of COVID vaccination**

As ISER's prior research has shown, in order to mitigate and contain the spread of the pandemic nationally whilst supporting national economic and financial recovery, it is imperative that COVID-19 vaccines, are equitably available, accessible and affordable for all, especially those furthest behind like the vulnerable and marginalized.<sup>1</sup>

It is five months since Uganda received [the first vaccine doses](#). As at 15 August 2021, only 1,235,052 doses have been administered. Less than 0.1% fully vaccinated. We are particularly concerned about the following:

- Older persons and persons with disabilities continue to be left behind as vaccination is occurring at sub county level in some districts. While during lockdown efforts were made to bring vaccination closer to the community, for example at neighborhood schools, those efforts seem to have been abandoned once the lockdown was lifted. In Rwanda, older persons in Kigali are able to call a number and have someone come and vaccinate them at home. The government should provide disaggregated data beyond the absolute statistic reported each day which does not provide clear picture of whether vaccination roll out is equitable. Disaggregated data is key to enable tracking of the vaccination by age, geographical location etc.
- The Ministry of Health has embarked on a strategy that seeks to allocate the scarce vaccines to private actors including companies/corporations that can afford to purchase COVID-19 vaccines, which will exacerbate

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<sup>1</sup> ISER (2021) The Covid Vaccine and Uganda: Twelve Questions to Policy Makers, <https://www.iser-uganda.org/publications/policy-and-advocacy-briefs/463-the-covid-19-vaccine-and-uganda-12-questions-to-policy-makers> ; ISER (2021) Government's Covid Vaccine Strategy Leaves Critical Questions Unanswered, <https://www.iser-uganda.org/publications/policy-and-advocacy-briefs/469-government-covid-19-vaccine-strategy-leaves-critical-questions-unanswered> ; ISER (2021) Government Requirement to Have A National ID will Exclude Millions, <https://www.iser-uganda.org/publications/policy-and-advocacy-briefs/472-government%E2%80%99s-requirement-to-have-national-id-before-receiving-covid19-vaccine-will-exclude-millions> ; ISER (2021) PRIORITISE EQUITABLE ROLL OUT OF COVID 19 VACCINES AND STRENGTHEN PUBLIC HEALTH SYSTEMS, [https://www.iser-uganda.org/images/downloads/ISER\\_statement\\_on\\_World\\_Health\\_Day\\_2021.pdf](https://www.iser-uganda.org/images/downloads/ISER_statement_on_World_Health_Day_2021.pdf)

health disparities. We are concerned that allowing private actors with greater financial means paying money to the Ministry of Health to get vaccine doses, would give them preferential access to the scarce vaccines once they arrive, leaving behind the poor and vulnerable. This approach, especially amidst global scarcity, negatively affects promotion of health equity as it will certainly leave behind those that cannot afford to pay for the COVID -19 vaccines. Uganda is facing acute vaccine scarcity in part due to a global shortage of vaccines for developing countries. Allocating vaccine doses to private actors impedes fair access and it is bound to exclude majority of the population that can't afford, such as older persons, persons with underlying ailments, persons with disabilities, women, people affected by extreme poverty, indigenous minorities among others. The aforementioned categories are at risk of the contagion, yet the new vaccine allocation strategy will likely lead to prioritization of access of the lifesaving vaccine to the highest bidder.

- Limited community engagement. There has been limited community engagement, mostly limited to PR like radio and TV announcements. The Ministry should prioritise engaging with communities including structures like Village Health Teams, community elders, and religious leaders alongside presenting transparent information to address community concerns about vaccination.

Ensuring equitable roll out of covid 19 vaccination is not only critical from a public health and human rights standpoint, it is essential to a more just recovery. Women are disproportionately impacted. They are more represented among informal sector workers and are badly hit by lockdowns. They are disproportionately represented among the poor and are more likely to fail to afford healthcare should they fall sick.

## 5. Prioritise Public Services

As the recent surge of Covid 19 has shown, the importance of strong quality public services is imperative and prioritizing government health and education facilities is key. Chronic underfinancing of the health sector with a poorly equipped public health sector lacking basics like [oxygen](#) and unregulated private sector that sought to [profiteer off the pandemic](#) resulted in Ugandans [dying](#) unable to afford health care.<sup>2</sup> Women and the poor are disproportionately impacted.

As Uganda faces the economic effects of the pandemic, poverty and inequality are increasing which could erode development gains. It is imperative to strongly invest in public social services as recommended in a manifesto recently developed by citizens and civil society entitled, "[Reclaiming Public Social Services: A Peoples Manifesto](#)."<sup>3</sup>

## 6. High school dropout rates in Uganda

The government of Uganda initiated Universal Primary Education (UPE) in 1997 and Universal Secondary Education (USE) in 2007, abolishing tuition fees and prohibiting schools from introducing other costs that could create barriers for students from vulnerable families to access education. However, in practice, many Ugandan schools, including those implementing UPE and USE, charge and collect non - tuition fees that are so significant as to amount to school fees. The administrators of UPE and USE schools usually cite inadequate capitation grants as justification for the extra - charges which are not even regulated. More so, even fees levied by private schools are not regulated. The prohibitive cost of education has therefore largely contributed to the high school dropout rates in Uganda. Data from the Ministry of Education and Sports indicates that out of every 10 children that enroll for school in primary one, only 3 reach primary seven. In addition, the Uganda National Household Survey 2016/17 indicates that 68% of boys and 65% of girls drop out of school due to financial constraints. With the outbreak of COVID19 and its effect on households' incomes, the

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<sup>2</sup> ISER (2021) Profiteering Off A Pandemic, Private Sector and Health Services in Uganda During Covid 19 <https://www.iser-uganda.org/publications/policy-and-advocacy-briefs/496-profiteering-off-a-pandemic-private-sector-and-health-services-in-uganda-during-covid> ISER (2021) How Did We Get Here? Uganda's Medical Oxygen Crisis, <https://www.iser-uganda.org/publications/policy-and-advocacy-briefs/494-how-did-we-get-here-uganda-s-medical-oxygen-crisis>

<sup>3</sup> Reclaiming Public Services: A Peoples Manifesto, [https://www.iser-uganda.org/images/downloads/Reclaiming\\_public\\_social\\_services\\_A\\_Peoples\\_Manifesto.pdf](https://www.iser-uganda.org/images/downloads/Reclaiming_public_social_services_A_Peoples_Manifesto.pdf)

incidents of families failing to meet both the tuition and non - tuition requirements set by schools are most likely to rise. Research by ISER and Human Rights Watch has identified prohibitive school fees and the under-resourcing of public primary and secondary schools as significant barriers to the right to education in Uganda, especially for children living in or near poverty. Only one quarter of Ugandan primary students continue to secondary school.

It is therefore important that the government prioritizes implementation of reforms to track school enrollment, completion and dropout with credible and robust systems; sufficient financing of UPE and USE to ensure free access to education for all, as well as the regulation of private providers of education.

## **7. The high incidence of child labour in Uganda**

As ISER's recent report "[I Must Work to Eat: Covid 19, Poverty and Child Labour](#)" shows that as a result of the high rate of school dropout, many children of the school going age are into child labour.<sup>4</sup> According to the Employment Act, the minimum age for work in Uganda is 14. The Act states that children ages 12 to 14 are permitted to perform "light" work under adult supervision if it does not interfere with the child's education. The incidence of child labour has however been exacerbated by the Covid19 pandemic - with many children being pressured to enter the workforce due to the resultant economic crisis, coupled with school closures and death of bread winners. It has become commonplace to find children working in plantations, stone quarries, and hawking goods in urban areas.

Unfortunately, these trends have been met by a weak legal and policy framework, lack of monitoring and weak enforcement mechanisms.

## **8. The need to pass the Minimum Wage Bill, 2015 into law**

Uganda's national development policies envision and create a conducive environment for a private sector led economy. That notwithstanding, the State lacks a strong regulatory framework to ensure that businesses / non - state actors respect the human rights of workers, especially in relation to remuneration. The Minimum Wage Bill presents a starting point to address some of these weaknesses.

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<sup>4</sup><https://www.iser-uganda.org/publications/reports/486-i-must-work-to-eat-covid-19,-poverty,-and-child-labor-in-ghana,-nepal,-and-uganda>

The existing policy and legal framework on minimum wage is weak, outdated and offers little to address the high levels of employee exploitation. The informal employment sector, especially, lacks protective labour regulatory systems. [The enactment of the Bill](#) will therefore act as a social protection tool for many Ugandans prone to exploitation in the private sector.

From the foregoing, we urge the Committee to ensure that;

- i) Reliance on the National ID to access social services is halted until NIRA achieves nationwide registration and coverage. Until then, alternative identification documents can be used to access social services.
- ii) The Single Registry for Social Protection as a common repository of beneficiary data for social protection programs and the vulnerable is updated and fully populated.
- iii) The passing into law of the National Health Insurance Scheme Bill 2019.
- iv) Prioritise strengthening public social services
- v) Ensure equitable roll out of covid vaccination given out based on vulnerability and urge government to refrain from giving scarce Covid vaccines to companies on the basis on those who can buy.
- vi) The legal and policy framework relating to child labour is strengthened especially the laws that would mandate business entities to conduct human rights due diligence throughout their supply chains to ensure that their activities are not contributing to child labor or other human rights abuses
- vii) The Ministry of Education and Sports establishes a credible national database on all children enrolled in both private and government schools by providing them with identification numbers. This will strengthen the monitoring and tracking of school enrollment, completion and dropout.
- viii) As per the requirement of the Children (Amendment) Act, the Ministry of Health with other responsible agencies establishes a national database for registration of all children at birth. This will facilitate effective and efficient planning for the population in terms of the quality and quantity of social services.

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- ix) The Ministry of Education and Sports with the assistance of other government agencies should set a minimum unit cost required to educate a child in both primary and secondary schools. This will strengthen the funding of UPE and USE programs but also assist the ministry in regulating school fees in non - UPE and USE schools, including purely private ones.
- x) The Minimum Wage Bill 2015 is passed into law.