

Uganda's healthcare hits low – survey

Coverage. According to researchers, eastern and northern regions have the lowest healthcare coverage at 45 per cent and 43 per cent respectively.

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KAMPALA. The provision of public health services and facilities are disproportionately skewed in favour of central and western Uganda, disadvantaging the northern and eastern regions, according to a new report.

The study conducted by the Economic Policy Research Centre (EPRC) and titled, Universal Health Coverage (UHC) in Uganda: The Critical Health Infrastructure, Healthcare Coverage and Equity, reveals a higher concentration of health facilities and professionals in central and western regions.

"Fewer facilities are available for provision of services for a larger number of people in the two lagging regions and this potentially undermines both access and quality of healthcare services for the population, which is a threat to UHC progress," the researchers noted.

The eastern and northern regions have the lowest healthcare coverage at 45 per cent and 43 per cent, respectively. The healthcare coverage in central stands at 60.45 per cent and 60.14 per cent in western region.

In numbers, majority of the healthcare facilities are located in the central region (39 per cent - including clinics and 33 per cent - without clinics), followed by the Western region with 27 per cent including clinics and 25 per cent without clinics.

Central also has the most private for-profit health facilities (clinics) at 30 per cent of all facilities followed by the western region with 8.7 per cent.

EPRC's report identifies poor infrastructure, inefficiency, physical distribution inequality including of private health facilities, health infrastructure investments as the fundamental challenges plaguing the health sector.

These disparities, the researchers noted, pose a "threat" to Uganda's prospect of achieving the United Nation's Sustainable Development Goal 3 on good health and well-being by

2030. "The goal of universal coverage will remain unattainable [for] Uganda if health facilities are not equipped with the required or sufficient human resources necessary to deliver the healthcare services needed by the population," the report released last week reads in part.

Universal health coverage is the availability of quality and affordable health services for all when needed without financial hardships, according to the World Health Organisation.

The researchers said access to basic healthcare assessed on availability and distribution of healthcare facilities - is still limited and the quality remains low.

They asked the government to focus on attracting and retaining skilled health workers.

Health minister Ruth Aceng said she would need to read the report before offering an opinion on the findings.

"I am not a politician; I am a scientific person and I need to first look at the terms of references the researchers based on to arrive at the conclusions," she said, citing marked improvements in the health sector over the years.

The researcher's reported that Uganda government has in some cases ditched the international

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standards and contrived its own measures to evaluate itself, which might explain progress reported by officials.

"But when you set out to work with different facts, the results are completely different," said Dr Francis Mwesigye, one of the EPRC research fellows who conducted the study.

The team reported that despite overall improvement in healthcare delivery, there remain "serious poor health infrastructure and staffing gaps" as well as disparity between the actual health indicators registered and the health sector strategic and investment plan.

For instance, the researchers said fewer Ugandans access healthcare

within 5kms, with four among every 10 women in the reproductive age most affected by the physical handicaps.

Nationally, the health facility density, a measure of health facility versus population coverage, with and without clinics is 15.2 and 12.8 per 100,000 people, respectively. Across all regions, the availability of health facilities ranges between 11.32 per 100,000 population (in east) to 21.71 per 100,000 population (in Central).

Healthcare access and quality inequalities, according to the researchers, are more pronounced in south-western and northern regions and a manifest urban-rural divide.

Personnel shortfall is still wide in the health sector in spite of "some improvement" in public sector recruitment between 2008 and 2013, EPRC reported.

The World Health Organisation recommends 2.28 health workers per 1,000 people, about three times higher than Uganda's ratio of 0.54:1000.

"Low health workforce density is widespread and, even if the staffing level is raised to 100 per cent as per the set staffing norms for critical cadres, the health workforce density will still fall short of the recommended standards," the researchers said.

