THE ROLE OF PARLIAMENT IN CHAMPIONING THE FIGHT AGAINST Covid-19

An overview on the actions of the Parliamentary Taskforce on the National Covid-19 Response



Speaker Jacob L. Oulanyah chairing the plenary in August 2021. Parliament has supported the fight against Covid-19. Photo: Parliament Press Unit

How Uganda's Parliament stepped up fight against Covid-19

Parliament took the fight to another level by taking precautionary measures as an institution, including abandoning the parliamentary chamber and erecting tents for plenary, approving a budget and providing vehicles to the Ministry of Health to transport health workers whenever and wherever they would be needed across the country as well as sending members to the National Task Force on Covid-19.

> espite media reports and public condemnation of Parliament's allocation of Ush10 billion (\$2.81 million) in the fight against Covid-19 at the start of the pandemic in April 2020, it later came out clearly that the allocation in the supplementary budget was intended to facilitate different organs of Government (publicly funded entities) to provide emergency response services to the pandemic.

> President Yoweri Museveni had declared a national lockdown a couple of weeks earlier and every department of the government was trying to mobilise resources to join the fight against the virus that

e s p i t e m e d i a had brought the world to its reports and public condemnation months.

Throughout the whole period as the pandemic pounded Ugandans, killing over 2,500 and straining the health service delivery in all medical facilities including referral hospitals as they struggled for Covid-19 related health support items such as oxygen, the parliament has been actively involved.

While the scientists took the lead in advising the country on the next course of action after the first case of the disease was diagnosed on March 22, the Parliament backed all efforts by raising awareness, passing necessary supplementary budgets to address health gaps as well as considering budgets for food or fund distribution to vulnerable people affected by the pandemic and its attendant prevention measures as well as appropriating money for recovery by small and medium business enterprises

The Parliament took the fight to another level by taking precautionary measures as an institution, including abandoning parliamentary chambers and erecting tents for plenary, approving and proving vehicles to the Ministry of Health to transport health workers whenever and wherever they would be needed across the country as well as sending members to the National Task Force on Covid-19.

The Parliament also appointed a committee in June 2021 to assess the success of Covid-19 prevention measures as well as assess the readiness of the district health centres and regional referral hospitals to handle an upsurge of Covid-19 patients.

The Parliament Taskforce on the National Covid-19 Response, has in the course of its work, visited and assessed the readiness of health facilities to manage Covid-19. Additionally, during the visits, it has assessed awareness levels of the district leadership and communities about Covid-19; interacted with different teams in the areas they have visited to sort out underlying issues which may affect managing health crises; assessed the impact of funds allocated to different districts to the needs on the ground, and assessed the readiness of health facilities to ably handle cases of other long standing and pre-existing health conditions which are not necessarily Covid-19.

From their interactions with different medical officers, they discovered a number of issues such as the fact that drugs used in the treatment of Covid-19 are not in the ministry's line of essential drugs such as vitamin C, Vitamin D and, therefore, cannot be supplied by National Medical Stores to the Health Centre IVs, the lack of ambulances to transport patients that need urgent care, and or attention and the need for massive production of oxygen that is necessary for patients facing breathing difficulties.

Their recommendations will form part of the national

MORE INITIATIVES

TASKFORCE

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The Parliament Taskforce on the National Covid-19 Response, also assessed the state and welfare of the medical workers as they delivered the essential services to the electorate.

response in the fight against the disease, as well as formulation of guidelines for vaccination. For example, some MPs asked that the vaccine be distributed to the high-risk groups around the country.

Parliament's oversight committee presents findings on Covid-19 relief spending



Parliament's Covid-19 Taskforce arrives at Mutukula border. Photo: Parliament Press Unit.

In its oversight role, The Parliamentary Taskforce on the National Covid-19 Response recently presented its report, highlighting mismanagement of funds, discrepancies and poor health sector preparedness after weeks of traversing the country.

> t the height of the second wave of the Covid-19 pandemic in Uganda, Deputy Speaker Anita Among, constituted a The Parliamentary Taskforce on the National Covid-19 Response to carry out specific oversight tasks to boost the legislature's efforts in monitoring governance and service delivery.

Among these was to inquire into and report on government's preparedness and response to Covid-19, provide assessment of the health impacts of Covid-19 in the community and country at large, assess operation, and administration and management of funds and

other resources appropriated for them to manage the pandemic.

Other roles of the committee were to assess the role of private sector health care providers in COVID-19 management, carry out field visits to assess the state of healthcare system in the Regional Referral Hospitals, both selected General Hospitals and the lower health facilities, conduct sensitisation and awareness programmes on mass media to educate the population, and prepare and submit a report to Parliament.

The Task Force was comprised of eight representatives of Parliament to the National Task Force and four regional teams for west, central, eastern and northern regions of the country.

The Task Force conducted field activities in the regions in accordance with its terms of reference, including visiting several government hospitals at all levels to assess their preparedness and equipment to fight the pandemic and also appeared on several media talk shows.

Key findings:

After weeks of deliberations, the taskforce issued a detailed report that showed several inconsistences within the Minis-

Health handling of the pandemic and made a raft of recommendations.During the first lockdown last year, the government had indicated that it would give a stimulus package to businesses affected by the lockdown and funds were allocated through Parliament to the recapitalisation of the Uganda Development Bank."The Government, through the Ministry of Finance, Planning and Economic Development should submit to Parliament full accountability backed by an authentic list of beneficiaries of the funds appropriated in respect to the re-capitalization of Uganda Development Bank totalling to Sh558.18b," the report noted.The report added that additional allocation to support SACCOs under the Uganda Microfinance Support Centre totalling to Ush77.72 billion (\$21.8 million) meant enable small and Medium Enterprises (SMEs) to access quick and affordable credit to turn-around their businesses that were on the verge of collapsing should too be accounted for.

The Committee further noted that whereas there is still a deficit in the required budgetary allocation towards protry of Finance and Ministry of curement of the much need-

Faces behind the Parliamentary Taskforce on the National Covid-19 **Response Response**







Hon. Charles Ayume, Incharge Northern Uganda.



Central Uganda.

ed vaccines to the tune of Sh365.9billion, the Government was still spending huge sums of money on COV-ID-19 containment measures instead of prioritising mass vaccination. The task force also noted a series of discrepancies of the money allocated to the covid-19 fight for example Parliament appropriated Shs94.18 billion (\$26.4 million) under supplementary Budget Schedule 1.

The Ministry of Health in its submission to the Taskforce indicated that by the end of financial year 2019/20 in June 2020, a total of Ush92.4 billion (\$25.9 million) had been spent, leaving a balance Shs1.75 billion (\$494,311) unspent and the balance returned to the consolidated fund.

"A review of the detailed breakdown of the actual expenditure submitted to the Taskforce revealed a total of Shs 99.06 billion (\$27.9 million) as having been spent instead of the reported Shs92.4 billion (\$26.02 million).

The taskforce noted that this figure is over and above the appropriated amount by Shs4.8 billion (\$1.35 million). The source of the additional funds totalling to Shs4.88 billion (\$1.37 million) remains unknown," the report reads.

Another discrepancy was found in the Purchase and National wide Distribution of fabric masks with analysis revealing a discrepancy in both the reported number of fabric masks procured and distributed 1,214,202 and the amount of money received and spent Shs2.91 billion (\$819,820) on the procurement of the fabric masks.

The report noted that Government should undertake realistic and harmonized planning with a view of ascertaining the optimal level of financing required for the Covid-19 resurgence plan which should take into account critical interventions that should be implemented to contain the transmission of Covid-19.

The Committee was informed that Government through the National Taskforce and District Taskforces received both cash and donations inkind. The donations in-Kind included Vehicles, Mattresses, Beds and Beddings, Sanitisers, test kits, PPEs and food items, among others.

While the Committee commended all persons and organizations for the support provided at the critical time of need, it noted that there were inadequacies when it came to accountability of donations received.

"Indeed this is also confirmed in the Auditor General's Report on thematic Audit Report on Covid-19 Pandemic Government Interventions dated February 2021. This report provides findings of the Auditor General in respect to the Management of Covid-19 Interventions for the FY 2019/2020. At an appropriate time the Accountability Committees of Parliament shall review it and make recommendations for the appropriate resolutions," the report said.

Legislators in response to plight of constituents amidst raging pandemic

When the first case of coronavirus was detected in Uganda on March 2I 2020, the announcement did not only scare Ugandans, including their leaders, but it also drove the leaders, especially Members of Parliament to action in efforts to rescue their constituents. Many of them went out of their way and legal mandate of legislation to the rescue of constituents whose livelihoods had been greatly affected by the pandemic and its ensuing lockdowns.

ganda went into a total lockdown in March last year and because of its effect on businesses, and people's livelihoods, Members of Parliament have since found themselves at the front line of supporting several vulnerable people in their constituencies using personal resources to provide relief through cash and food donations.

Several legislators have talked of the hustle and bustle to ensure that their people survive the pandemic infused hunger and retain dignity.

Kira Municipality Member of Parliament Mr Ssemujju Ibrahim Nganda said being Members of Parliament, the people who they represented automatically expected them to come to their rescue in such a time of need.

He added that occasionally, on very many mornings, he would wake up to lines outside his gate of constituents requesting for support, most of them wanting just what to eat for that day.

"I could not chase them away just because my wok is only to legislate. I had to always find ways to help them survive. It is not that we have the money but we have to help in whichever we can," Ssemujju said.

For new entrants in parliament, the coronavirus pandemic has already taken a toll on them. Just weeks after they were sworn in, the country was hit by a deadly second wave of the corona virus with the delta variant ravaging communities and claiming hundreds of lives, prompting the country to go back into a lockdown of 42 days. The lockdown took a toll on the population, especially in urban and peri-urban centres around the country where many especially those in the informal sector live hand to mouth, those in markets, boda boda riders, taxi touts and many others.

Whereas the government announced that it will be giving about 500,000 of these a relief package of Shs100,000 to cushion them, this was but a drop in the ocean compared to the number of people who needed relief and to some who actually got it, it was not enough to feed their families for that period. They, as they first impulse rushed to the MPs.

Mr Karim Masaba is a first timer in Parliament representing a new constituency of the Mbale Industrial Division in Mbale district.

He tells of hundreds of families, and individuals that he has personally helped from out of his own pocket.

Some have reached out on telephone, his constituency office while others; especially the youth chose social media to reach out.

"All these people need help and by default they look at us legislators. They are our people even when we cannot afford to help each one ade-



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MP Ssemujju Nganda. 🥢

quately.

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It is the little we have to we share with everyone so we can survive," Masaba said.

Many other MPs came in to boost the efforts of the country's health sector that had taken a lot of pressure from the pandemic. With hospitals around the country filled up with Covid-19 patients at one



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MP Masaba Karim.



point, and no lifesaving oxygen in most of these health facilities, some Members of Parliament took to buying hospital equipment for regional and district hospitals such as beds, oxygen cylinders and sometimes drugs.

More than half of the current legislators have bought and deployed several ambulances within their constituencies to boost the already present ones by the ministry of health. With the numbers of patients rising, there was a need of more ambulances to evacuate sick people from their homes to health centres near them or the critical ones from the health facilities to referral hospitals. The legislators pulled together over 200 ambulances, which were added onto the national response fleet of ambulances to save lives.

Some Members of Parliament have set up health centres to cater for their constituents; some of which have been handed over to the government for management. A case in point is the Prime Minister who built a health centre for her people in Kakumiro as well as Mohammed Ssegirinya whose health facility in Kawempe has been welcomed by the populace.



An MP receiving the Covid-19 jab at Parliament. Photo: Parliament Press Unit

Prosecute officials who mismanaged Covid-19 funds - Hon. Abdu Katuntu

The Parliamentary Taskforce Committee on the fight against Covid-19 recently traversed the country to find out the impact of the disease and ways to help health facilities respond to the disease. The committee chairperson Abdu Katuntu spoke to The EastAfrican's TOM BRIAN ANGURINI



Abdu Katuntu

What was the impact of Covid-19 on the health sector? First of all, the health sector was not prepared to handle a pandemic of this magnitude it grappled with it, went towards a direction of the unknown. Many regional hospitals were overwhelmed with patients and did not know how to respond. Their response systems broke down.

Did you find health facilities with drugs and Intensive Care Units in place?

During the financial year 2019/2020, Parliament appropriated a total of sh22.18 billion to support the establishment of 20 isolation centres in each district and to undertake surveillance as a means of slowing down disease transmission.

However, while on field visits to various districts, the committee teams established that in most of these districts, not a single isolation centre ever existed.

Moreover, in over 90 percent of health facilities, there were no specialists such as doctors and nurses who would handle an emergency of that magnitude. Even if the Intensive Care units were there. still there would be no trained personnel to man them. Such a lack of the specialists meant that ordinary doctors and nurses without specialty were the ones handling Covid-19 patients. This was endangering the lives of both the patients and the doctors or health care givers themselves.

What was the situation like in regional referral hospitals admitting these patients?

There were two scenarios. One, patients who were suffering from other diseases were not being attended to by health workers as doctors and nurses were busy concentrating on Covid-19 patients.

Many patients suffering from other sicknesses met their deaths at home since many feared to go to health facilities that were admitting Covid-19 patients.

Two, there were hardly enough specialists to handle the large numbers of Covid-19 patients flocking the hospitals.

So, what was being done for the non-Covid-19 patients?

Many of these people went to private health facilities. Unfortunately, the private health facilities took advantage of the situation by charging a lot of money in millions yet these people were already feeling the pinch associated with lockdown. There was simply no money.

How about health sector infrastructure on ground?

Most health centres were lacking basic infrastructure like ICU for critical cases and high dependency unit for serious cases. For example, in the whole of Northern Uganda, there was only one Covid-19 CT scan in Oyam district. The whole country had a poor ambulance service run by government. There were 126 ambulances compared to more than 460 ambulances needed for the emergency cases and referral system to work. Out of the 25 ICU ambulances needed per district, only five were working. This affected the transportation of patients from health facilities to their places of referral.

Another issue was the utility bills such as water and electricity. In most health centres, they were not paid. Therefore, you would find a health facility with an ICU unit, but cannot put it in use because there is no power.



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Abdu Katuntu . Chairperson of the Parliamentary Taskforce Committee on the National Covid-19 Response.

lockdown.....'



After your findings, what was government's response?

The Cabinet directed the Ministry of Health to provide non-medical and reusable face masks totalling 34,109,085 to all persons above six years of age.

In addition, as a pre-requisite to re-opening of schools, the cabinet directed that all learners should be provided with fabric masks. Therefore, this necessitated a procurement of an additional 2,592,963 masks for finalists in candidate classes. Consequently, a total of 36,702,048 masks at sh2,400 per mask were procured and distributed to 135 districts and all finalist learners across the country," reads the report.

However, the committee found out that a review of the Ministry of Health accountability of



Hon. Margaret Makhoha Woman MP for Namayingo district with colleagues interacting with a nurse at Lolwe Health Centre III. Photo: Parliament Press Unit

BIO BRIEF

Abdu Katuntu (born 12 March 1965) is a Ugandan politician, currently serving as the Member of Parliament for Bugweri County, Bugweri District.

Mr Katuntu, has chaired the House committee on Commissions Statutory Authorities and State Enterprises (Cosase) in the 9th Parliament among other parliamentary committees.

Abdu Katuntu . Chairperson of the Parliamentary Taskforce Committee on the National Covid-19 Response.

Covid-19 funding (March 2020 to June 2021) reveals that a total of Shs90.99 billion shillings was spent in respect to the procurement of fabric masks for communities (35,323,287) and finalist learners (2,592,963) totalling to 37,916,250 which is different from figures submitted by the health minister, Dr. Ruth Aceng in her report dated July 7, 2021.

The analysis reveals a discrepancy in both the reported number of fabric masks procured and distributed (1,214,202) and the amount of money received and spent (2,914 billion) on procurement of the fabric masks.

What did you do after finding this Ministry of Health report?

The committee recommends that the Minister of Health should explain the discrepancy arising from her report.

The Taskforce also recommends that government submits detailed accountability to Parliament for Shs22.18b appropriated to facilitate the establishment of 20 isolation centres per district indicating the location in each district where such facilities were established.

We asked the Auditor General to investigate all resources that has been geared towards the pandemic fight and any government official found guilty must be brought to book.

What are your disappointments?

Whereas there is still a deficit of the required budgetary allocation towards procurement of the much-needed vaccines to the tune of sh365.9b, the government is still spending huge sums of money on Covid-19 containment measures instead of prioritising mass vaccination.

Another upsetting thing is since the onset of Covid-19 in the financial year 2019/2020, a total of 142.23 billion has so far been provided towards operational funds for enforcement of Covid-19 lockdown directives, but results are yet to be seen.

MPs raise flag on the cost of Covid-19 testing, treatment

A Member of Parliament raised a red flag, on the Floor of Parliament, over the exorbitant fees charged by a private facility to carry out Covid-19 tests. Supported by other Members of the House, the Soi County MP, Abdi Fadhil Chemaswet asked the Ministry of Health to review the high cost of mandatory Covid-19 PCR test conducted at Entebbe International Airport.

he cost of testing has not only been a concern in the House but also in the public sphere where members of the public have complained that

the cost is too high for an average Ugandan, leaving most people with the symptoms of Covid-19 to either start on self-medication or go to hospital when they are way too sick. This delay to go to hospital has been blamed for the highest percentage of death, according to the Ministry of Health.

In Uganda, the cost of Covid-19 test in most private entities ranges from \$28 (about Shs100,000) to \$65 (about Shs230,000).

Chemaswet says since the newly arrived Afghan refugees were tested at the government expense, the government should emulate neighbouring Tanzania, where the testing is at the expense of the government, although the Minister of Health, Jane Ruth Aceng defended the cost, saying all countries are conducting the tests and that Uganda's costs are relatively cheaper.

"Globally, all airports are screening and testing people to prevent the importation of new variants; the tests are a result of a collaboration between Ministry of Health, Uganda Civil Aviation Authority and the private sector," she said.

This is not the first time Parliament is concerned about the costs involved in the Covid-19. Members had raised concerns and asked government to urgently intervene and rein in private medical facilities that are charging Covid-19 patients an arm and a leg.

They said government should put up measures to help patients suffering from other diseases to get the required treatment. Since the outbreak of the second wave of Covid-19, some medical facilities revised their treatment rates upwards.

Many of these facilities charge the patients between Shs 2 million and Shs 5 million per day spent in the ICU. Some hospitals also require patients to pay an upfront admission fee ranging



MPs on the Parliamentary Taskforce Eastern region inspecting one of the ICUs under a green zone to see the operations of the ICU at Jinja Regional Referral Hospital on 9th June 2021. Photo: Parliament Press Unit.



Hon. Chemaswet - Soi County

between Shs 5 million and Shs 10 million.

But MPs said these exorbitant fees are making a bad situation worse. "They are cheating the poor Ugandans," said one of the MPs. "This is going to lead to more loss of lives."

In fact, the MPs asked the

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government to earmark some resources to clear medical bills for Covid-19 patients in ICU's as it's becoming expensive to their families meet the bills.

The MPs said with the current crisis, public hospitals have limited capacity to take on all patients that require ICU services compelling the affected persons to rush to the private hospitals which are expensive.

This was also mentioned to the officials from the Ministry of Finance who appeared before the committee on Covid-19, led by ministers Matia Kasaija and Henry Musasizi. The legislators suggested that there is need to for government to earmark some resources to meet medical bills for Covid-19 patients that have been referred to ICUs of various hospitals.

MPs said some patients in ICUs have lost properties after mortgaging them to the money lenders in pursuit of the resources to pay the medical bills. They opposed the proposal by Ministry of Health to use a thirdparty to enable the country access the Covid-19 vaccine saying the country may end up getting poor quality vaccines at a high cost.

The legislators also raised concern over the enforcement of presidential directives on curfew and other related measures aimed at controlling the spread of the disease, saying the enforcers must be restrained from brutalising people.

VOICES ON ROLE OF PARLIAMENT IN FIGHTING Covid-19



"It is Parliament's responsibility to legislate about priorities for every expenditure that government incurs for accountability. We are happy with the way they took the role and hope the outcome will be satisfying."

Jean Abahaire - Student Mbarara University



"Here is a country where Parliament has a lot to do, but seems not doing it sometimes. However, the fight against Covid-19 is a big job and hopefully, their report will cause a lot to be done."

David Vosh Ajuma



"Let this current 11th Parliament restore peoples hope in them so that people have the assurance that Parliament will support them in the fight against the pandemic."

Derrick Ochieng