

Communities Generate Evidence to inform National Advocacy for improved Human Resources for Health in Uganda.

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Background:

The Advocacy for Better Health aims to equip citizens with enabling environment and systems to effectively advocate for strong action plans to improve health services. This is because the 2020 Government target for Uganda to transform into a middle income country (*National Development Plan II, 2015*) will be achieved if investment is made in keeping the population healthy and productive.

Methods:

Citizen participation as an important foundation for change (*Parker, B, 2003*) has been emphasized to gather data through participatory rural appraisal (*Chambers, R., 1997*) and inform evidence-based advocacy for recruitment and motivation of human resources. Citizens conduct problem ranking during advocacy forums on staffing levels and health worker absenteeism. Citizens prioritised inadequate number of midwives and absenteeism. On triangulation, health worker to population ratio in Uganda remains at 0.25/1,000 which is far below the World Health Organization (WHO) threshold of 2.3/1,000 (*IntraHealth, 2015*).

Interventions:

Working with IntraHealth, the project advocated for recruitment of critical skilled staff (doctors and midwives) and scale up health workers motivation strategy to reduce Uganda's Neonatal Mortality Rate of 22/1,000 and Maternal Mortality Ratio of 320/100,000 (*World Health Series, 2015*).

Results:

Government has committed to increase staffing to 80% by 2018 (*Health Sector Development Plan, 2015*), 10 districts have passed ordinances and revived use of duty rosters to address health worker absenteeism. The better health advocacy debate has been elevated with need to increase health sector budget allocations from 8% to 10%.

Conclusion:

Building a body of evidence from citizens enhances the advocacy agenda. Communities will further monitor government commitments to reduce Neonatal Mortality Rate and Maternal Mortality Ratio.

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