The PACT is a global coalition of youth-led and youth serving organisations working in the global HIV response, established in 2013. The PACT has over 90 members globally and works to amplify the voices and demands of young people at the global level and advocate for young people’s rights and empowering young people as leaders and key in the HIV response.

The Sexual Rights Initiative is a coalition of national and regional organizations based in Canada, Poland, India, Argentina, and South Africa that work together to advance human rights related to sexuality at the United Nations.
Key Words: sexual and reproductive health and rights, HIV, right to health, COVID-19 pandemic, youth rights, civil and political rights

Executive Summary

1. This report has been jointly prepared by The PACT with two member organisations in Uganda: the Girls Awake Foundation and Peer to Peer Uganda (PEERU), with support from the Sexual Rights Initiative. The report aims to spotlight the human rights issues facing young people and young key populations in the context of the HIV response in Uganda. Not only does the state fail to protect young people from violence, young people are experiencing violence at the hands of the state and state actors. The government of Uganda also continues to oppress young people’s political and civil rights. Uganda, while supporting many recommendations from the 2016 UPR cycle, has failed to implement them and young peoples’ rights continue to be violated.

2. Young people do not receive adequate specialised health support or services. The current political situation in Uganda and the COVID-19 lockdowns have exacerbated young people’s access to healthcare services and facilities, especially young people living with HIV. This also includes prisons actively withholding antiretroviral treatment from detainees living with HIV. The precarious conditions created by the political unrest and the pandemic has also impacted food security and mental health.

3. The political and legal landscape for young key populations remains as one that actively violates their human rights. Despite recommendations in Uganda’s previous UPR cycle to abolish discriminatory laws and policies, Uganda has recently implemented even more restrictive laws for LGBTQI+ people, and is failing to protect rights, in particular the rights of adolescent girls, young women and other key populations. Protection of the rights of young key populations is key to ending the AIDS epidemic and fully realising the right to health and SDG 3.
The Right to Health

1. In the previous UPR cycle, Uganda accepted the following recommendations relating to the right to health:

- Ensure full and adequate access to health (Indonesia)
- Pursue national efforts to combat HIV and provide health services for all (Egypt)
- Continue to develop the health system (Syria)

Uganda also noted the following:

- Revise legislation on and ensure access to abortion (Congo)
- Fully implement school health policies to improve adolescent reproductive health (Germany)
- Increase the percentage of national budget for health to 15% as per the Abuja Declaration (Zimbabwe)

2. Despite accepting these recommendations, none of them have been effectively implemented and had any positive impact on the lives of young people. The issues highlighted in the rejected recommendations continue to persist in Uganda.

3. Lockdown restrictions and lack of funding are impacting young people’s access to healthcare and health facilities in Uganda, such as peer support groups for young people living with HIV, mental health services, and other sexual and reproductive health services. Young key population-led and general youth-led health service providers that have stepped in to fill the gaps left by poor coverage by the national health system are also forced to self-fund their operations in an environment that is becoming increasingly difficult due to restrictive legal frameworks. The 2015 NGO Organisations Bill introduced much more stringent regulations on NGO registration, operations and funding, and youth-led organisations continue to struggle to navigate these new regulations.

4. In 2014 the HIV Prevention and Control Act was introduced, criminalising the transmission of HIV. This happened despite international recognition and understanding, including by UNAIDS, that criminalization of HIV does not prevent transmission. Criminalization exacerbates stigma and results in people living with HIV being reluctant to seek health services.

5. The Constitution prohibits abortion unless it is carried out to save a woman’s life.
However, in practice, most doctors refuse to perform abortions despite this exception. Abortion is essentially inaccessible to all. Legal, safe, free and accessible abortion services are essential to the realization of young people’s rights. Without access to free, safe, and legal abortion, young people who are pregnant resort to seeking unsafe methods of abortion that can have disastrous health consequences including death. Young people who are pregnant may also face stigma if they are not married and may be excluded from school and their community.

6. There has been an increase in mental health issues amongst young people due to lack of access to justice and lack of protection for human rights. Democracy and the legal system in Uganda are not working to support young people, rather they serve government interests. The parliament has been equally ineffective in passing laws that protect and support the rights of young people. Despite advocacy, there have been no recommendations on supporting young people’s mental health in Uganda’s previous UPR cycles. Young people’s mental health is just as important as other aspects of health when it comes to the right to health.

7. Young people living with HIV who have been arrested are denied access to their antiretroviral treatment in prisons. Depending on the duration of their detention, there is a real risk for people with an undetectable viral load to become detectable again, which endangers their health and is in direct violation of their right to health.

8. Over 20 years ago, Uganda committed through the Presidential Initiative on AIDS Strategy Communication to Youth (PIASCY) to providing sexuality education to young people and has failed to do so. However, the (PIASCY) was focused on abstinence education and was not comprehensive. Until 2018 there was a parliamentary ban on the provision of sexuality education beyond abstinence, and despite the overturning of this ban in 2018, the new framework for sexuality education continues to focus on abstinence while preaching hate against sexual minorities. CSE is another key aspect required for young people to realise their sexual and reproductive rights, and essential to tackling the AIDS epidemic: Uganda is failing its young people in this aspect.

9. National government spending on health remains at only 5.1%, which is far off from the expected 15% in line with the Abuja Declaration, as per the UPR recommendation by Zimbabwe in the previous cycle. During 2018-2019, government health spending was around 9.2%. Despite the numerous issues that arise with an underfunded health system, particularly for mental health and young people’s sexual and reproductive health, funding continues to be cut. The government states poor national economic conditions to justify their decision- but this a false economy, with austerity measures targeting the most marginalized groups.
Violence & Discrimination

1. Uganda has existing laws that are designed to protect the rights of children, prevent gender-based violence, and provide protection against rape and torture. In reality, these are not implemented to protect the rights holders. The state and state actors including the judiciary actively use tactics such as torture, kidnapping, and GBV to violate human rights and to suppress any dissent.

2. In the 2016 UPR cycle, Uganda supported the following recommendations on violence and discrimination:
   - Strengthen mechanisms to tackle sexual and gender based violence (Mauritius)
   - Combat stigma and discrimination against people living with HIV (Colombia)

3. Uganda rejected all recommendations to repeal laws and policies that discriminate against people based on sexual orientation and/or gender identity (Austria, Guatemala, Mexico).

4. The Sexual Offenses Bill 2019 criminalises consensual same-sex behaviour and does provide adequate protection from violence for young people, in particular adolescent girls and young women. The Bill punishes any sexual act between people of the same gender, and anal sex between people of any gender with up to 10 years in prison. The legal concept of consent was also removed, including the provision on withdrawal of consent during sex. The Bill also includes a provision on death penalty for “aggravated rape” when the perpetrator is a person living with HIV. Not only is the death penalty a human rights violation, the specification of it only for people living with HIV further adds to stigma and discrimination. The Bill also introduces a penalty for false sexual allegations, which will result in even fewer survivors of SGBV report these crimes due to potential legal repercussions.

5. Many laws in Uganda target key populations in the AIDS epidemic: trans people, men who have sex with men, people who use drugs, sex workers, and people in prison. Uganda's Narcotics Law punishes possession of drugs with 10 to 25 years in prison. Sex work is criminalised through the Penal Code. The Anti-Homosexuality Act, 2014 increased the sentence for homosexuality to life imprisonment. These laws make key populations go into hiding and they are reluctant to access health services due to the fear of being outed by medical professionals. Many health professionals also do not respect the right to privacy for young people. Being outed could have legal ramifications and is a form of state-sanctioned violence against key
populations. Further, the criminalization of sex work already puts sex workers at a greater risk of violence from clients.

6. Sex workers and LGBTQ+ people are targeted by the government through legislation and the police, imprisoned arbitrarily for indefinite periods of time, and raped and tortured in custody. This is despite both the Constitution and the Prevention and Prohibition of Torture Act, 2012, providing protection from torture. This tactic has been demonstrated not to work as a deterrent. It only increases the stigma facing people living with HIV.

Civil & Political Rights

7. In the previous UPR cycle, Uganda supported the following recommendations on civil and political rights:

- Take necessary measures to allow for the enjoyment of civil and political rights by all (Botswana)
- Thoroughly investigate threats against human rights defender and civil society organisations and bring to justice those responsible (Uruguay)
- Ensure that civil society organisations and human rights defenders can operate in a safe environment (Ireland)

8. Uganda rejected the recommendations to ratify optional protocols of the International Covenant on Civil and Political Rights. Despite being party to the International Covenant on Civil and Political Rights, young people do not find these rights to be respected or fulfilled. The politicians in power refuse to hand over/pass on power to younger generations and continue to violate their rights as a way of control. In direct violation of Article 9 of the Covenant, young people are arrested, kidnapped, and tortured for speaking out against the ruling party.

9. Young people continue to be disenfranchised from decision-making bodies. Civic space is shrinking as the government has suspended some of the biggest funders of civil society organizations. The 2015 NGO Organisations Bill introduced much more stringent regulations on NGO registration, operations and funding, in particular youth-led organisations. NGOs are required to register with the NGO Bureau and are prohibited from work that is contrary to the interest of Uganda and the dignity of the people of Uganda. This ambiguous requirement has been used to limit advocacy and political work. This has deeply impacted and restricted work on sensitising young people on their rights, in particular their sexual and reproductive rights.
10. The $10 million USAID funded GiveDirectly-run direct cash transfer programme had to be terminated early due to non-compliance with these new Ugandan regulations. The beneficiaries of these suspended organizations were left in shock and without any way forward. This is despite Uganda supporting Botswana's recommendation for engagement with support for civil society in the previous UPR cycle.

11. Current national human rights mechanisms and bodies are easily influenced by the government and cannot operate independently and impartially. Young people have no recourse to demand and fulfill their rights.

COVID-19 Pandemic

12. In the previous UPR cycle, the following recommendation was supported by Uganda:
   - Improve education as a component of the right to an adequate standard of living (Bangladesh)

13. Uganda rejected a recommendation by Haiti to implement a school meals programme, impacting young people's and in particular children's right to food security.

14. Many adolescents and young people who were temporarily out of school because of the COVID-19 pandemic have permanently dropped out. There has also been an increase in teenage pregnancies, rape, incest, and gender-based violence. As young people we see education as one of the key tools to tackle the AIDS epidemic. The closure of schools has also had ramifications on the families of young people, as more people being at home increases stress and also impacts food security.

15. Due to funding cuts to CSOs, community-level COVID-19 response has been completely stifled. For CSOs that are still able to operate, COVID-19-related restrictions have led to the suspensions or at least reduction of programming, including HIV prevention and support.

16. Poor communities are deeply affected by Covid-19: economically, socially and with a higher likelihood of transmission and death. Many people living with HIV and other diseases like diabetes, TB and cancer can no longer receive treatments due to suspended functioning of health facilities. Many people no longer have the resources and access to transportation to be able to reach facilities or to pick up their medications. People are also too afraid to go to public health centres to access care and have been self-medicating with various pharmaceuticals.
Recommendations

17. Repeal all laws criminalising HIV transmission. Implement programs of holistic support for people living with HIV and tackle HIV-related stigma.
18. Guarantee access to sexual and reproductive health services, including safe abortion and post-abortion care for all, including young people.
19. Through meaningful civil society engagement, amend the Sexual Offenses Bill to ensure that survivors of sexual violence have adequate access to justice and social services. Clarify the definition of consent to include consent withdrawal at any time during sexual activity.
20. Amend the Sexual Offenses Bill to remove all provisions related to people living with HIV and harsher punishments for their conduct.
21. Guarantee free education and school meals programmes up to secondary level, with a particular focus on recovering from missed schooling due to the COVID-19 pandemic.
22. Fully implement mandated comprehensive sexuality education in line with international technical guidance for youth in and out of school.
23. Ensure meaningful and safe youth engagement and participation in political processes, including fair and transparent elections, and protect the civil and political rights of all people with proper investigations for related violence.
24. Repeal all laws that criminalise the behaviours and identities of LGBTQI+ people, sex workers, and people who use drugs, and protect the health and human rights of people who are incarcerated.