ATLANTIC FELLOWSHIP FOR HEALTH EQUITY (AFHE),
AT GEORGE WASHINGTON UNIVERISTY

TRAINING PROJECT FOR HEALTH WORKERS ON LEGAL PROTECTIONS AGAINST WRONGFUL ARREST DUE TO MATERNAL DEATHS

April 28 2025

KAWEMPE NATIONAL REFFERAL HOSPITAL

TRAINING REPORT

EXECUTIVE SUMMARY

On April 28th, 2025, the Atlantic Fellowship for Health Equity (AFHE) at George Washington University supported a landmark one-day training at Kawempe National Referral Hospital, bringing together 124 health service providers (physicians, nurses, allied health service professionals e.t.c) for an urgent and timely sensitisation of their legal rights in the face of wrongful arrest-particularly in the aftermath of maternal deaths that are overwhelmingly rooted in systemic failures. Against a backdrop of resource constraints and high patient volumes, the training sought not only to inform but to empower, blending legal expertise with practical advocacy, and igniting a sense of collective purpose among participants who too often shoulder the blame for tragedies beyond their control.

BACKGROUND & RATIONALE

Mary Ajwang

AFHE Senior Fellow

Despite progress in reducing maternal mortality, Uganda's rates remain critically high, with the 2022 Uganda Demographic Health Survey reporting 189 deaths per 100,000 live births-well above the WHO target of fewer than 70 by 2030. Kawempe National Referral Hospital, Uganda's largest obstetric and gynecological teaching hospital, carries a heavy burden, recording 992 maternal deaths between 2016 and 2021, 84% of which were preventable. These deaths largely result from systemic challenges beyond individual control, yet health workers often face wrongful arrests following adverse outcomes.

This training, the first collaboration of its kind between a US-based AFHE senior fellow, Dr. Bridgit Carter, and Ugandan senior fellow, Mary Ajwang, was designed to address this urgent gap.
Combining local clinical experience and global health leadership, they partnered with legal experts from Barefoot Law and the Uganda Law Society, whose collaboration brought together grassroots legal empowerment and institutional expertise.

Together, they equipped frontline providers with the legal knowledge and advocacy skills needed to protect themselves, navigate complex legal risks, and continue delivering quality care. Supported by the Atlantic Fellows for Health Equity (AFHE), a global program committed to tackling health inequities, this initiative represents a pioneering step toward empowering health workers and strengthening Uganda's health system.

TRAINING OVERVIEW

The day began with a powerful invocation from Dr. Kazibwe Lawrence, the hospital's clinical director, who framed the session as both a shield and a call to action for frontline health workers. Mary Ajwang, AFHE senior fellow and the training's lead coordinator, then set the stage with a candid overview of the realities at Kawempe: 84% of maternal deaths are considered preventable, yet the root causes- delayed referrals, inadequate supplies, and overwhelming caseloads- are systemic, not individual. The sense of urgency in the room was palpable, as participants recognised that their personal liberty and professional integrity were at stake.

THE LAW PROVIDES ADEQUATE PROTECTION FOR EVERY HEALTH WORKER AGAINST ARREST ESPECIALLY WITHOUT A WARRANT"
JONATHAN OTIM, BAREFOOT LAW, UGANDA

KEY SESSIONS & OUTCOMES

The curriculum, crafted in collaboration with legal experts Jonathan Otim (Barefoot Law) and Gaudius Turyasingura (Uganda Law Society), unfolded as a dynamic journey through the legal, ethical, and practical dimensions of health work in Uganda. Early sessions grounded participants in the Ugandan Constitution, especially Articles 23 and 44, which guarantee protection from unlawful arrest and torture. Through vivid case studies, including the precedent-setting CEHURD v. Attorney General, participants saw how legal advocacy has shifted the narrative around maternal health, highlighting the need for systemic change rather than scapegoating individuals.

The heart of the training lay in its interactivity. Health workers, many of whom had never read the Uganda Public Service Standing Orders 2021, grappled with real-life scenarios-role-playing arrests, debating ethical dilemmas, and dissecting the ambiguous boundaries between professional discipline and criminal liability.

The facilitators did not shy away from hard truths: many providers confessed to feeling unprepared and unsupported when confronted by law enforcement, and there was widespread anxiety about inadvertently violating rules simply due to a lack of awareness. Yet, the sessions also offered hope and clarity.

Legal experts demystified the process of documentation, explained how adherence to national clinical guidelines could serve as a legal defence, and provided direct contacts for emergency legal aid.

PARTICIPANT QUESTIONS & FACILITATOR RESPONSES

The training's most compelling moments emerged during open Q&A, where the fears and frustrations of frontline providers surfaced. One participant asked, "How do we access legal aid during night shifts?" A question met with practical guidance and a commitment to 24/7 support from Barefoot Law. Another queried whether strict adherence to clinical guidelines could shield them from prosecution; facilitators affirmed that thorough documentation and compliance are powerful tools in any legal defence. When concerns arose about being denied access to legal counsel during arrest, the legal team walked participants through their constitutional rights and the steps to assert them, even under pressure.

AREAS OF FURTHER LEGAL PROTECTION LEARNING IDENTIFIED

As the day progressed, it became clear that knowledge gaps were not the only challenge. The ambiguity of the Uganda Public Service Standing Orders left many health workers exposed to disciplinary action for infractions they did not understand. There was also a candid discussion about the appropriate balance between legal defence and internal discipline: management emphasised the need for existing disciplinary mechanisms to function effectively, while legal experts cautioned against bypassing due process.

The session closed with a recognition that fear of reprisal often silences those who witness or experience systemic failures, perpetuating a cycle of blame and vulnerability.

The training concluded with a shared vision for the future. Participants called for ongoing legal literacy programs, especially focused on the Standing Orders and the practical realities of arrest and detention. There was a strong need for knowledge on advocacy skills- how to document systemic failures, engage with policymakers, and build coalitions for systemic reform.

AFHE was urged to partner with the Ministry of Health to simplify and disseminate the Standing Orders, and to facilitate regular legal clinics at Kawempe and other referral hospitals. The ultimate goal: to create an environment where health workers are empowered to defend themselves, advocate for their patients, and drive the systemic changes needed to reduce preventable maternal deaths.

RECOMMENDATIONS FOR AFHE

CONCLUSION

This AFHE-supported training was more than a workshop; it was a turning point for 124 health workers who left not only with new knowledge but with a renewed sense of agency.
By weaving together legal expertise, ethical clarity, and practical advocacy, the session illuminated a path forward-one where health workers are protected, patients are better served, and the health system moves closer to justice and equity.
The challenge now is to sustain this momentum, ensuring that every health worker in Uganda has the tools, knowledge, and support they need to stand strong in the face of adversity and to champion the cause of maternal health for all.

Report produced by Mary Ajwang & Dr Brigit Carter, AFHE Senior Fellows
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