



MINISTRY OF HEALTH

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The Ministry of Health leadership and its entire staff congratulates His Excellency, Yoweri Tibuhabwe Kaguta Museveni, the NRM party and Ugandans upon the reaching 61st year of Independence. As a sector, we celebrate the transformation the health sector has achieved, which enables Ugandans to live a healthy life as they work towards securing their future.

The Government recognizes health and service delivery as a fundamental human right, as enshrined in the constitution of the Republic of Uganda. The Ministry provides health promotion, disease prevention, treatment and rehabilitative services in fulfilment of promoting, protecting and defending health for all Ugandans.

HEALTH INFRASTRUCTURE DEVELOPMENT

At the time of Independence, Uganda had 27 hospitals and 1,288 staff for a population of seven million. After Independence, another 22 new rural hospitals were built throughout Uganda, bringing the total number of hospitals to 49.

Today, we now have a total of 71 Public Hospitals under the Ministry of Health. These include: 4 Specialised Hospitals (Mulago Specialized Maternal & Neonatal Hospital, Children's Surgical Hospital, Entebbe, Uganda Cancer Institute and Uganda Heart Institute), 5 National Referral Hospitals (Mulago, Butabika, Kawempe, Kiruddu and Naguru), 16 Regional Referral Hospitals and 46 General Hospitals. By 2018, there were 6,937 health facilities in Uganda; 3,133 (45%) public, 2,976 (40%) private for profit with over 90% in Greater Metropolitan Kampala, and 1,008 (15%) Private-not-for profit. Access to health facilities has increased from 75% of the population within a 5km reach to a health facility in 2005 to 92% in 2020.

Under the leadership of His Excellency, the President, the Ministry has refurbished hospitals that were in dilapidated state. In this regard, the following infrastructure developments have been undertaken in the recent years:

Rehabilitation, expansion and equipping of 9 hospitals (Mityana, Nakaseke, Kiryandongo, Entebbe Grade B, Nebbi, Anaka, Iganga, Moyo and Moroto RRH);

Renovation and expansion of 26 Health Centre IVs and IIs which included 10 Theatres / 16 Maternity Wards and Water Supply including 40,000 Litre Reservoir for 26 was completed by June 2017

Construction and equipment of 450 Bed Specialised Women & Neonatal hospitals at Mulago was completed and commissioned in October 2018 Mulago NRH rehabilitation and equipping is at 92%

Construction of Kawempe and Kiruddu Hospitals was completed in 2018 and have been designated as National Referral Hospitals to decongest Mulago National Referral Hospital

Rehabilitation, expansion and equipping of Kawolo, Kayunga and Yumbe General hospitals was completed and they were commissioned. Kayunga and Yumbe GHs have been upgraded to Regional Referral Hospitals Major rehabilitation of Gombe general hospital is ongoing.

The Children's Surgical Hospital in Entebbe was completed and commissioned. It provides free paediatric surgery to children aged 1 month to 14 years from Uganda and neighbouring countries. Entebbe, Mulago and Mbarara Isolation Units were completed and this has increased the country's capacity to handle contagious disease outbreaks. There are six regional blood banks. Construction of Soroti Blood Bank is ongoing. Hoima and Arua will start this year.

With support from the Government of Japan we have undertaken infrastructure upgrade and equipping in Masaka, Mubende, Kabale, Hoima, Lira, Arua and Gulu Regional Referral Hospitals. Three hundred and thirty-one Health (331) Centre IIs have been upgraded to HC IIs since 2018 in line with the policy of a HC III per subcounty.

A new 30,000 pallet position state of the art medicines ware house for National Medical Stores has been completed at Kajjansi. Government has procured CT Scan for 14 RRHs and an MRI machine which will be installed in FY 2022/23.

With funding from a World Bank loan and grant from the United States Government, the Ministry of Health has undertaken laboratory infrastructure improvement in Mbarara Regional Hospital, Mbale Regional Referral Hospital and Arua Regional Referral Hospital. Plans are underway to equip these Laboratories to the levels of Reference status to strengthen communicable and non-communicable disease diagnosis in the regions including diagnostic testing for diabetes, cancer, cardiovascular diseases and rapid response to epidemics.

Medical Oxygen production plants have been enhanced in all National, RRHs and NMS. A total of 10,000 Oxygen cylinders were distributed to hospitals across the country. Increased ICU bed capacity in the National and RRHs from 43 to 186. To functionalise the ICUs, the Ministry of Health trained 401 critical care nurses.

Expansion and upgrading Hospitals goes hand in hand with expansion of other necessities like beds, mattresses and furniture. 8,027 hospital beds and mattresses as well as assorted equipment were distributed country wide. Delivery beds (normal and for disabled mothers) were also distributed to 65 hospitals and 167 HC IVs.

A total of 26 semi-detached staff houses were constructed and completed in 2018 in 15 districts of Kalangala, Namayingo, Bugiri, Bulambuli, Kakumiro, Kagadi, Mayuge, Namutumba, Wakiso, Buvuma, Bundibugyo, Kanungu, Kasese, Kisoro & Mukono while 68 semi-detached staff houses have also been constructed in the Karamoja region. A number of staff houses have been constructed in Mulago NRH, Butabika NMRH, Moroto, Masaka, Mbarara (16 Units) Gulu, Mbale, Soroti (24 Units) and Lira RRHs. Other RRHs have also prioritized this in their strategic plans.

Immunization / Vaccination services aimed at enhancing uptake, efficiency and understanding specific vulnerabilities

Vaccination is one of the tools for prevention of diseases and promoting the citizens right to health. Uganda provides vaccines against childhood illnesses, prevention of cancers and diseases in adulthood, and vaccines in response to disease outbreaks guided by the vulnerability profiles of the priority groups;

The goal of the vaccination program is to ensure every child and priority populations at risk of Vaccine Preventable Disease are fully vaccinated. To this end the Ministry strives to; Provide equitable access to and create demand for immunisation services; Ensure availability of effective vaccines and supplies, and appropriate storage; Monitor and evaluate program performance, occurrence of Vaccines Preventable diseases and Adverse Events Following Immunisation

Prevention of childhood illnesses and mortality: Children are vulnerable to severe diarrhoea, pneumonia, Diphtheria, Polio, Pertussis, Tetanus, Tuberculosis, Measles and Rubella which can

be prevented through vaccination. New vaccines are being progressively added to the national immunization schedule and we now vaccinate against 13 immunizable diseases compared to 6 in 1986. In 2022, the Ministry added Yellow Fever, second dose of Measles- Rubella, and Hepatitis B birth dose.

Ministry of Health has increased vaccination coverage for DPT3 to 92% in 2021 compared to immunization of 9% in 1981 and 14% in 1986. There is a corresponding reduction of childhood mortality to 42 per 1,000 lives in 2016 from 98 per 1,000 live births in 1988.

Prevention of cancers and diseases in adulthood:

In line with the epidemiological transition of the national disease profile, Ministry of Health has introduced two vaccines against control of the leading cancers in Uganda; cancer of the liver caused by Hepatitis B Virus and cancer of the cervix caused by the Human Papilloma Virus in 2002 and 2015 respectively. The birth dose of Hepatitis B has been introduced to consolidate the current gains in hepatitis control.

Vaccination against Epidemics and pandemics:

Ministry of Health established the Integrated Disease Surveillance and Response system since 20 years ago for monitoring diseases with epidemic potential and disease targeted for eradication or elimination. Upon confirming outbreaks of such diseases, Ministry of Health response institutes public health measures including vaccination of vulnerable persons for example against Yellow Fever, Cholera, Meningitis outbreaks and of recent Ebola and COVID-19.

Emergency Medical Services

The establishment of a functional National Ambulance Service is one of the top priorities of the MoH. It is embedded in the National Emergency Medical Services (EMS) Policy and Strategy, National Development plan III and the NRM Manifesto 2021-2025. The National EMS system includes the following three levels of care: Response at the scene of emergency; transportation with care; and response at the health facility level and critical care.

The approval of the EMS policy by the Cabinet of Uganda chaired by HE YKM Museveni and subsequent launch of EMS Policy and Strategic Plan has paved way for systematic development of EMS in the Country. The Ministry of Health procured 12 Boat ambulances to support 20% of the population that lives around water areas. The boat ambulances were launched on 11th May, 2022 by the President, His Excellency Yoweri Kaguta Museveni.

The MOH approved the Standards and Norms of ambulances in 2021 which recommend Type B ambulance (Basic Life Support) for universal coverage and Type C ambulance (Advanced life support/Specialized ambulance) used for critically ill patients. Each constituency in Uganda (100,000 population) will be allocated one Type B ambulance and each health region (2,000,000 population) will be allocated one Type C ambulance.

In addition, the MOH has taken the response to the highway road traffic crashes as one of the key outputs of the Emergency care response team. Annually we lose over 3,500 people due to road traffic crashes. The MOH with funding from Government of Uganda has partnered with Uganda Red Cross Society (URCS) to establish a responsive EMS system along the highways and to date have placed 21 type B ambulances across the highways in Uganda.

The MOH will establish one National and 16 ambulance stations / Call and Dispatch Centers in which ambulance vehicles are serviced and refilled with equipment and medicines/health supplies. Currently, two regional centres have been set up at Naguru National Referral Hospital and Masaka Regional Referral Hospital.

Access to Essential medicines and Health Supplies

In a bid to prioritize storage of essential medicines, vaccines and medical supplies at the National Medical Stores, Government of Uganda co-funded the construction of a modern 30,000 pallet warehouse to accommodate the increasing volume of health commodities. The UGX 70 billion first state of the art warehousing facility in Africa has been completed and has a drive-in cold room and an oxygen plant. The facility will increase storage capacity to allow National Medical Stores to meet the demand of its customers. The facility will also be supported with a USD10 million Enterprise Resource Planning (ERP) to facilitate proper visibility, tracking and tracing of health commodities up to the end users. Through collaboration with developmental partners, the Ministry of Health has provided necessary logistics and infrastructure that enables the use of Electronic Logistic Management Information Systems down to Health Centre IIs.

The GOU has promoted the integration of traditional and complementary medicines by enacting the Traditional and Complementary Medicines Practitioners (TCMP) Act of 2019 and supported research aimed at finding local solutions for Ugandans including research on COVID-19 remedies.

MATERNAL AND CHILD HEALTH

There has been remarkable improvement in maternal health services delivery in the country; with a remarkable reduction in the numbers of maternal deaths reported over the past 20 years. According to the Uganda Demographic and Health survey 2022, under-5 mortality rate has reduced from 84/1000 live births (2016) to 52/1000 live births (2022). Infant mortality rate has reduced from 43/1000 live births (2016) to 36/1000 live births (2022). Neonatal mortality rate has reduced from 27/1000 live birth to 22/1000 live births (2022). Maternal mortality ratio has reduced from 336/100,000 live births (2016) to 189/100,000 live births (2022). And today, 91% of births are delivered in a health facility.

This has been due to several high impact and health system interventions implemented, with support of Government of Uganda and Donor agencies/ implementing partners. This reduction in numbers of maternal deaths is attributed to improved access to emergency obstetric and newborn care services, especially at the sub-county level (HC III).

In 1988, the Ugandan woman was producing an average of eight children in her life time; one of highest fertility rates in the world. As a result of various interventions to improve family health at the household level, the Ugandan woman currently produces about five to six children in her lifetime.

Since 1986, the country has made significant progress in reducing infant and child deaths. Infant (children under one year of age) deaths have reduced from 98 per 1,000 live births in 1988 to 43 per 1,000 live births in 2016, while deaths among children under five years have reduced from 177 per 1,000 live births in 1988 to 64 per 1,000 live births in 2016.

This remarkable achievement has been due to strengthened interventions in addressing the known leading causes of infant and child deaths in Uganda. These include; Malaria, lung infections, Diarrhoea, HIV, among other preventable childhood illnesses.

LABORATORY SERVICES

The National Health Laboratory services is organized in a tiered system of Laboratory networks composed of more than 1,500 Laboratories in the Public Health Sector alone and a little over 1,000 (legally licensed) Laboratories in the private sector. There are 3 Major Specialized Reference Laboratories under the Ministry of Health: - The National Public Health Services Laboratory, the National Tuberculosis Reference Laboratory, and Uganda Virus Research Institute which are centres of excellence in the East African region and supporting 26 countries in Africa. The number of Internationally Accredited Laboratories in Uganda have increased from 12 in 2019 to 52 to date, thereby improving quality and safety of services provided in those Laboratories to the level comparable Globally and improving competitiveness of Uganda's healthcare industry.

HIV & AIDS Prevention and Control

Regarding HIV/AIDS, the country has made very good progress during the past decade, and is committed to attainment of HIV epidemic control, and ultimately ending HIV/AIDS as a public health threat by 2030. The prevalence of HIV among adults 15 to 49 years reduced from 18% in the early 1990s to 6.2% in 2016 and 5.5% 2020. This was due to political commitment of government to end HIV. ART Coverage for all ages is 95% (1.3 million/1.45 million PLHIV). Available evidence shows that the country is well on track to meet its HIV epidemic control targets.

The provision of antiretroviral treatment from 236,956 adults and children in 2010 to 1,240,000 by end of 2019. Uganda adopted the "Test and Treat" approach in 2016, where all HIV-infected individuals regardless of HIV disease stage became eligible for and are provided antiretroviral treatment.

Government through PEPFAR, our multilateral partners especially the Global Fund. Uganda has also ramped up all the other elements of combination HIV prevention including all evidence-based interventions such as PMTCT, safe male circumcision, PREP, condom use, behaviour change communication, etc. As a result of all these measures, the number of new HIV infections has declined by 45% from approximately 97,000 in 2010 to approximately 53,000 in 2019 and averted significant numbers of HIV infections. At the same time, vertical HIV infections (from mother –to-child) have declined from 22,690 in 2010 to approximately 5,600 in 2019. In addition, AIDS related death declined from - approximately 53,400 in 2010 to 21,267 in 2019, thereby saving many lives that would have been lost to AIDS.

Tuberculosis and Leprosy Prevention and Control

Today, we have a TB treatment coverage of 103% and Treatment Success Rate at 87% in FY2021/22. This has been possible with increased screening for TB at health facilities and communities through;

- 1) Improved systems at health facilities to ensure screening, diagnosis and care. Screening of individuals attending health facilities increased from 50% in 2020/21 to 66% in 2021/22 FY.
- 2) Provision of 320 GeneXpert machines in 290 health facilities to strengthen diagnosis and treatment of TB. This in addition to Truenat machines & TB -LAMP in 40 and 16 sites respectively. Genexpert machines and Truenat machines detect both the sensitive and drug resistant TB strains.
- 3) Procurement of 584 microscopes
- 4) Introduction of Mobile Digital x-ray with Artificial Intelligence (AI) at 12 health facilities, and 2 mobile TB clinics that facilitate community level TB screening and diagnosis to Ugandans that would otherwise not have access to Xray services.
- 5) Implementation of a bi-annual (March & September) CAST TB Campaign as a strategy to increase community awareness, screening and testing for TB & Leprosy. So far, 2 campaigns have been implemented where over 6,000 individuals have been confirmed with the disease and saved in addition to those identified during routine care at the health facilities.
- 6) To improve oversight by the Local governments on tuberculosis and Leprosy, the Ministry has procured and distributed 100 motorcycles to support coordination of TB activities in districts without motorcycles.

So far, Seventeen (17) Multi-Drug Resistant (MDR) TB treatment sites have been established at Mulago NRH, all the 13 RRHs and General Hospitals in Kitgum, Iganga and St. Kizito Matany.

Leprosy remains under control, though with sporadic cases across the country with 264 newly diagnosed cases this year as opposed to 459 cases diagnosed in 2021/22. The program developed a Zero Leprosy road map and built capacity of health workers to ensure increased vigilance and surveillance targeting to reach the zero-leprosy status by 2030.

Malaria Prevention and Control

The Malaria prevalence has significantly reduced from 42% in 2009 to 19% in 2014 and now to 9.2% in according to the Malaria Indicator Survey, 2018/19. This is due to serious preventive interventions of mass distribution of LLINs, Indoor Residual Spraying in high prevalence districts, effective treatment with ACTs including Integrated Community Case Management for children and Preventive treatment during pregnancy.

The story of the Malaria fight will not be complete without a talk of the mosquito net! How well shall one know about Malaria? Every three years, the government distributes over 26 million nets throughout the country. This campaign started in 2013/2014 and a total of 23 million bed nets were distributed throughout Uganda. The second campaign was undertaken in 2016/2017 while the third was conducted in 2020/21.

And now 2023, the Government is currently carrying out a nationwide distribution of mosquito nets dubbed, "Under the Net" and this is the fourth Universal coverage campaign that the country is undertaking. This campaign will see the distribution of 28.5 million Long Lasting Insecticide Treated Nets (LLINs) throughout the country costed at \$120m and funding was mobilized from the Government of Uganda, the Global Fund against HIV/TB and Malaria, USAID/PMI and the Against Malaria Foundation (AMF). Distribution and proper use of mosquito nets is one of the most effective ways of preventing Malaria. Mosquito nets use can reduce the number of uncomplicated malaria episodes in areas of high malaria transmission by half (50%), and have an even bigger impact in areas of medium or lower transmission.

The Ministry is implementing Seasonal Malaria Chemoprevention (SMC) as one of the interventions to curb Malaria in Karamoja Region, a region with high prevalence of Malaria.

This vector control weapon has been supported by the country program that saw the roll out of Larval Source Management.

Uganda's journey to Malaria reduction has been supported by the Government arm seen in the Indoor Residual Spraying. Countries all over that have eliminated Malaria largely focused on IRS to bring over mosquito density. The country has over the years deployed this intervention in over 20 districts and has registered great successes. Now the good news is that West Nile, a region that has over the years suffered Malaria has now come on board. The Ministry of Health has rolled out IRS in nine districts in West Nile and Lango sub-regions to reduce on the malaria burden. This is expected to massively solve the malaria problem in the area.

Prevention and Treatment of Lifestyle Diseases and Mental Health His Excellency, the President has championed the campaign to educate Ugandans on prevention of lifestyle diseases (Non-Communicable diseases) like Cancer, Diabetes, high and low blood pressures through good feeding, regular physical exercises, healthy diet, avoidance of alcohol, substance abuse and tobacco smoking, environmental prevention.

The Ministry of Health has developed National Physical Activity Guidelines which are being finalized and shall reinforce NCD prevention efforts by giving the population of the types and duration of physical activity for the different segments of the population.

The country has a Mental Health Act, 2021 which is giving more prioritization to prevention and addressing of mental health at all levels of health care in the country. Government has supported the provision of mental health services with a focus on prevention, treatment and rehabilitation of Mental, Neurological and Substance abuse disorders as well as promotion of mental health. Currently, the country has 42 Psychiatrists, 547 PCOs, 700 psychiatric nurses engaged in active Mental Health services.

The Ministry of Health has made strides in strengthening multi sectoral coordination to address prevention and care for NCDs to achieve the SDG 3 and NDP/III objective of reducing mortality due to NCDs by one-third by 2030 and from 40% to 30% by 2025 respectively.

HUMAN RESOURCES FOR HEALTH

While there are still gaps, the level of availability of health workers stands at 74% (46,829/63,000). It is a prerequisite to reach 100% mark. The Nursing cadre and the Allied Health Professionals make up the majority of the 75%. There is a shortage of medical super specialists and critical cadres such as anesthesiologists, anesthetists, critical care nurses and physiotherapists, yet are important for delivery of super specialized services. To address this issue, over 300 Anaesthetic Officers have been trained for the last three years, and the Ministries of Health and Public Service are working together to ensure that they are recruited into service by provision of a wage bill, so that the HC IVs and other hospitals are functionalized.

Cabinet approved the enhancement of salaries of health workers to be effected in a phased manner since FY 2018/19. So far, salary increments for medical personnel and other cadres has been implemented.

UCREPP at the helm of controlling Pandemics in Uganda

Following the global outbreak of the COVID-19 pandemic in 2019-2020, countries worldwide are still grappling with the unprecedented social-economic challenges posed by COVID-19. To address these challenges, the government of Uganda received funding from the World Bank through Ministry of Health to support the prevention, management and control of the spread of COVID-19 in the country through the Uganda COVID-19 Response and Emergency Preparedness Project (UCREPP).

The Ministry of Health through UCREPP has enhanced pandemic management through a multi-prolonged approach. This has been done through strengthening surveillance systems for early detection and prompt response to COVID-19 and other potential disease outbreaks. Refugee host Districts have been given motorcycles to strengthen surveillance services, thermal scanners have been deployed at entry points of different border stations to help detect any virus that may cross from one country to another.

The project is supporting the construction of satellite laboratories in Lira and Fortportal Regional Referral hospitals. Construction has commenced already and the facilities are expected to be completed by April 2024. These laboratories will enhance investigations of epidemics, and the collection and referral of specimens to the reference laboratories for further testing and confirmation.

In addition to this, the project is supporting the construction of Intensive Care Units (ICUs) for Arua, Hoima and Kabale Regional Referral Hospitals. These will be of help in case of any emergency outbreak that needs the use of ICUs. The construction of these ICUs has kicked off and is expected to be completed by December 2024. In addition to ICUs, the project procured critical equipment including beds for intensive care units. These will be installed at Mulago, Entebbe, Hoima, Kabale, Soroti, Moroto, Lira, Gulu, Arua and Mubende hospitals. Medical Gas Piping has been undertaken for Mbarara RRH Isolation Unit, Entebbe RRH, and Mulago NR Isolation Unit.