



October - December 2023



OVERVIEW

- ✓ Uganda records significant reduction in new HIV infections among newborns
- ✓ Uganda has one of the Best Emergency Preparedness and Response Systems in Africa
- ✓ WHO Assesses Uganda's Preparedness to Respond to Public Health Emergencies
- ✓ WHO African countries convene ahead of two International Conferences on Tobacco Control
- ✓ Strategic Multisectoral Partnerships to Transform the Health System and Workforce
- ✓ Improving care for chronic diseases among people living with HIV in Uganda

[Uganda records significant reduction in new HIV infections among newborns](#)

"Since I started taking my HIV treatment in 2017 without interruption, I have given birth to two HIV-negative babies."

Bitali Mwanaisha,
A beneficiary of the Mother-To-Child Transmission programme in Uganda.

Uganda records significant reduction in new HIV infections among newborns



Bitali Mwanaisha, a 29-year-old pregnant woman living with HIV.

In Uganda, women are disproportionately affected by HIV. Out of 1.4 million people living with the disease, 860,000 are women and 80,000 are children.

Bitali Mwanaisha is a 29-year-old pregnant woman living with HIV. Every month, she undertakes a thorough routine medical examination to check on the development of her pregnancy. A mother of two children, Mwanaisha discovered her HIV status in 2017 during her first pregnancy.

“When I got the news that I was HIV positive six years ago during my first antenatal visit, I was devastated. I thought that all my children would be sick like me, starting from my unborn baby,” she says.

As part of the drive to reduce the number of babies born with HIV, Uganda has a robust prevention of mother-to-child transmission (PMTCT) programme. It involves following up women of reproductive age living with, or at risk of acquiring, HIV from their reproductive years, throughout pregnancy, and to the end of the breastfeeding period.

Using a well-coordinated, multi-sectoral response and through strong coordination between

the Government of Uganda, World Health Organization, the United Nations Children’s Fund and, the United States President’s Emergency Plan for AIDS Relief, the PMTCT programme has led to a dramatic reduction of HIV infections among newborns by 77%, from 20,000 cases in 2010 to 5,900 cases in 2022.

“From the health facility where I was diagnosed, I was referred to Baylor, a specialized HIV management centre. I was immediately put on HIV treatment and since then, I have given birth to two HIV-negative babies,” says Bitali.



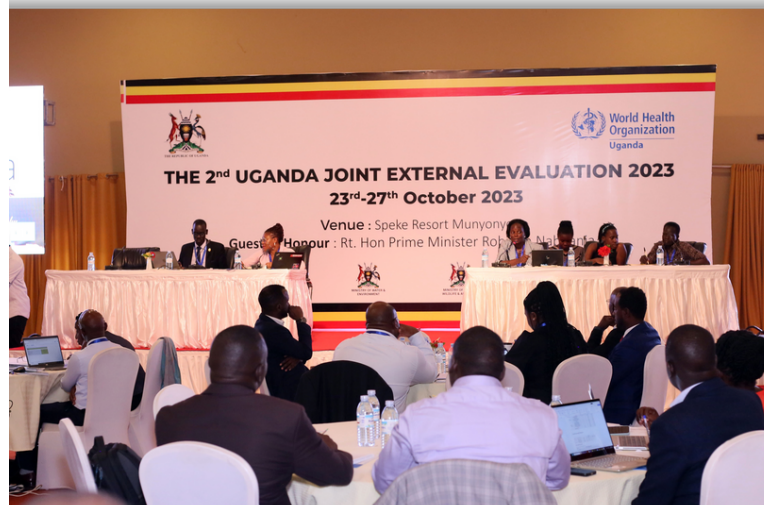
Bitali going through physical examinations, including listening to the foetal heartbeat using a foetal scope.

The Second Joint External Evaluation Exercise Applauds Uganda for Having one of the Best Emergency Preparedness and Response Systems in Africa

Uganda has one of the best emergency preparedness and response systems in Africa. These were the findings of the second Joint External Evaluation (JEE) exercise that assessed the country's capacity to detect, prevent, and respond rapidly to public health emergencies following the International Health Regulations (IHR, 2005).

The JEE took place in Kampala and was coordinated by the Prime Minister's Office, with support from the World Health Organization and partners. During the process, a team of external evaluators mobilized through WHO assessed the measures taken by the country to strengthen its pandemic prevention, early detection, and rapid response capacities since 2017, when the first evaluation exercise was carried out.

"It is always important to know our strengths and weaknesses in emergency preparedness and response, to improve our strategy and actions," said Dr Jane Ruth Aceng Oceru, Uganda's Minister of Health.



Participants of the Second Joint External Evaluation (JEE) Exercise in Uganda

The evaluation found that Uganda has a strong immunization system to prevent and contain epidemics. The country was also commended for its strong surveillance system, which enables early detection of outbreaks.

“We hope that the lessons learned during these emergencies and the assessment will contribute to informing the next 5-year National Action Plan for Health Security in the country,” said Dr Elizabeth Mgamb, WHO Emergency Preparedness and Response Country Team Lead

WHO Assesses Uganda's Preparedness to Respond to Public Health Emergencies



“Strengthening epidemic preparedness and response is part of our goal to support the country in improving its healthcare system to prevent and address public health emergencies,” says Dr Yonas Tegegn Woldemariam, WHO Representative to Uganda.

World Health Organization together with the Ministry of Health in Uganda, Africa Centres for Disease Control and Prevention (CDC), the German Agency for International Cooperation (GIZ), and the East African Community conducted a scoping mission to tailor the country's capacity to implement the flagship initiatives on Epidemic Preparedness and Response (ERP).

The mission aimed to raise awareness among government and critical stakeholders of ERP flagship initiatives, and to assess Uganda's preparedness to respond to epidemics and public health emergencies.

The mission assessed the Ugandan healthcare system, health laboratories, medical supply chain, and public health infrastructure. It served as a platform to advocate for high-level investment in preparedness, detection, and response to public health emergencies.

WHO African countries convene ahead of two International Conferences on Tobacco Control

8 million people globally die from tobacco use every year.

1.2 million of them are second hand smokers.

World Health Organization (WHO) Regional Office for Africa (AFRO), in collaboration with the WHO Framework Convention on Tobacco Control (FCTC) Secretariat, has held a four-day African regional preparatory meeting for two international tobacco control conferences. These are the 10th session of the Conference of the Parties (COP 10) to the WHO FCTC and the 3rd meeting of the parties to the Protocol to eliminate illicit trade in tobacco products (MOP3).

The meeting brought together 160 participants from 47 WHO member states in Africa and regional civil society organizations involved in tobacco control. It aimed to secure regional consensus on key decisions ahead of the two tobacco control conferences (COP 10 and MOP 3) scheduled to take place in Panama City from November 20-25 and 27-30 respectively.

Speaking during the opening session, Dr Jane Aceng Oceru, Minister of Health in Uganda stressed that tobacco use is a major contributor to increased incidence of non-communicable diseases deaths, and disability globally.

“Uganda has banned all forms of advertising, promotion, and sponsorship of tobacco products and also banned smoking in all public places under the Tobacco Control Act 2015. We have strengthened the multisectoral enforcement which has reduced the number of smokers in public places,” Dr Jane Ruth Aceng, Minister of Health in Uganda.



“Building consensus on regional positions on tobacco control and assessing the progress made by WHO Member States in Africa, will enable accelerated actions for the implementation of our agreement to eliminate illicit trade in tobacco products,”

Dr Yonas Tegegn Woldemariam, WHO Representative to Uganda.

With the adoption of the WHO Framework Convention on Tobacco Control in 2003, WHO member states pledged to express the supremacy of public health concerns over economic interests. To date, 183 member states, including 45 from the WHO African region, are parties to the treaty.



Among the successes in the implementation of this convention is the tobacco-free farm initiative implemented in Kenya, with over 4500 farmers who have shifted from growing tobacco to alternative livelihoods including the farming of high iron-beans.

The subnational and multisectoral levels of enforcement to promote a smoke-free environment in Uganda are good steps to reduce the prevalence of tobacco consumption in the country.

Strategic Multisectoral Partnerships to Transform the Health System and Workforce

33

people in Uganda die of TB every year.

94

thousand people diagnosed with TB in 2022.

50%

reduction in TB-related mortality by 2022.

520

health workers trained in comprehensive TB management.

Op-ed

The growing need for public health care, due to health emergencies and humanitarian crises, has created the need to rethink the healthcare system.

Strengthening multi-sector partnerships is a prerequisite for improving the healthcare system. To realize its full potential, multi-sector commitment must involve all key players within the health sector and beyond, including governments, civil society organizations, and the private sector. In this article, I will highlight the impact of a strong multisectoral collaboration in addressing the TB burden in Uganda.



Uganda remains among the 30 high-burden TB/HIV countries in the world with an annual TB incidence of 200 cases per 100,000 population and a TB/HIV co-infection rate of 40%. Approximately 30 Ugandans die daily from TB disease. Tuberculosis is influenced by a wide range of determinants that include health, economic, social, and environmental determinants.

To end TB by 2030, there is a need to accelerate actions, investments, innovation, and multisectoral engagement and accountability.

In 2020, Uganda adopted the WHO Multi-sectoral Accountability Framework for Tuberculosis (MAF-TB). The framework is aligned with the End TB strategy and the United Nations 2030 sustainable development goals, the National Development Plan III, and the Health Sector Development Plan II. It recognizes that TB mortality and morbidity are impacted by multiple factors far beyond the health sector including living conditions, food security, education, and income levels.

Implemented as part of the National Tuberculosis and Leprosy program, MAF-TB has delivered remarkable results, with an observed increase in the number of people diagnosed with TB each year from 65,897 in 2019 to 94,000 in 2022, and a reduction in tuberculosis-related mortality of over 50% by 2022.

Some of the innovations that came through the multi-stakeholder partnership toward ending TB in Uganda include the launch of a ground-breaking initiative for TB awareness, screening, and control (CAST-TB Campaign). CAST-TB is conducted twice a year, approximately 2.8 million households have been screened, and 40,000 cases of tuberculosis have been diagnosed during the first two campaigns held in 2022.

I recommend that all other healthcare sectors learn from the TB multi-sectoral accountability framework initiative to improve the healthcare system. You can always count on WHO in this regard.

By Dr Yonas Tegegn Woldemariam, the WHO Representative to Uganda.

Improving care for chronic diseases among people living with HIV in Uganda



Didas Byaruhanga, Ugandan living with HIV and diabetes

In Uganda, more than 1.4 million people live with HIV, and of these, 5.8% have diabetes. Diabetes is common among people living with HIV and is one of the main causes of death in this population. Overall, non-communicable diseases account for 36% of annual deaths in the country.

To address this health threat, Uganda is implementing a programme to integrate care for noncommunicable diseases into HIV services. Launched in 2019, the programme aims to improve the prevention, timely diagnosis, and long-term management of chronic diseases among people living with HIV.

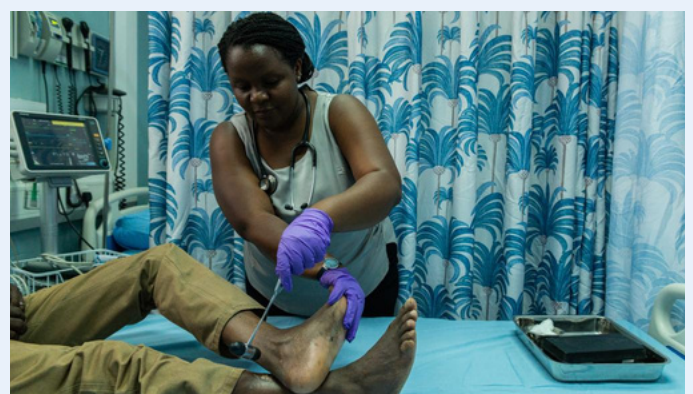
A strong collaboration between the Ugandan government, World Health Organization (WHO), United Nations Development Programme and the United States President's Emergency Plan for AIDS Relief has enabled the mobilization of over US\$ 6 million to scale up the implementation of the programme in 2022 and 2023. These efforts, along with better access to HIV treatment, have led to a decline in the number of deaths among people living with HIV, from 24 245 deaths in 2017 to 16 450 in 2023.

Over 1800 HIV centres across the country are equipped with service providers with the capacity to screen and manage cancer, diabetes, and hypertension.

“The management of non-communicable diseases among people living with HIV, using WHO guidelines and tools, has reduced the number of deaths among HIV-infected people by almost one-third between 2017 to date,” says Dr Franck Mugabe, Principal Medical Officer.

Among the challenges in implementing the programme is the need to ensure access to medication and regular education on chronic diseases to encourage people to undergo screening, adhere to treatment, reduce stigma, and adopt a healthy lifestyle.

“Since 2019 I've been receiving HIV and diabetes medication together, without interruption, and I've never been admitted to hospital,” Didas Byaruhanga, 64 years-old.



A patient being screened for Hepatitis B in Uganda by a medical officer



WHO Football Team Emerged Winners of the United Nations Football League 2023

World Health Organization emerged as a winner of the United Nations Football League trophy 2023. Thanks to outstanding play and solid teamwork, the organization made United Nations soccer history.



WHO Breast Feeding Room Opened

WHO launched a dedicated breastfeeding room for its staff, recognizing the importance of supporting working parents. This initiative aims to foster a family-friendly workplace, acknowledging that employees with babies and young children face unique challenges.

This progressive step aligns with global efforts to normalize breastfeeding and reflects the organization's dedication to creating a supportive environment for its diverse workforce.

The power of partnership

We extend our sincere appreciation to all our partners who have contributed to our work in supporting the Government and the people of Uganda in ensuring continuity of essential health services, improving the health and well-being of people living in Uganda, and responding to the most urgent needs of the health sector. We can only meet our goals through the power of partnership.



Editorial team

Dr. Yonas Tegegn Woldemariam - WHO Representative to Uganda
Mr. Sensasi Benjamin - Health Promotion Officer
Mrs. Elise Tcheutchoua Yonkeu - Communications Officer

For more information, please contact
Elise Tcheutchoua | afwcougcom@who.int

WHO Country Office - Uganda, Plot 60 | Prince Charles Drive

    World Health Organization Uganda