

# Health promotion, disease prevention

THE GOVERNMENT HAS INCREASED WAGES FOR HEALTH WORKERS STARTING 2018/19 FY

By Andrew Masinde

The government policy on health is to provide the highest level of health services to all people in Uganda through delivery of services at all levels.

Dr. Diana Atwine, the Permanent Secretary says the vision of the ministry is to facilitate the attainment of a good standard of health for all people of Uganda, in order to promote a healthy and productive life.

She notes that the sector intends to achieve the vision by putting emphasis on health promotion and disease prevention and increasing access to health facilities.

**Health promotion and disease prevention**

Atwine explains that the sector has reformed its plans and budgets on preventive interventions, particularly community mobilisation and empowerment, immunisation, sanitation and hygiene, malaria prevention and control, HIV/AIDS, non-communicable diseases and nutrition. To undertake this, the directorate of public health has been created in the new structure and recruitment will soon commence.

"Health messages for behaviour change have been redesigned to be communicated in a manner that gives adequate time for the population to understand and the ministry is working closely with other key sectors, local governments and partners, to provide relevant information that emphasises health promotion and disease prevention," Atwine explains.

She adds that the ministry is putting in place community health extension workers (CHEWs) per parish to monitor and promote community health activities. The CHEW policy, strategy and training materials were finalised.

Atwine adds that there is also sensitisation of district leaders and selection of CHEWs trainees in 13 districts, as well as ongoing mobilisation of resources for training.

"Our goal is to establish and strengthen the community health workers programme as part of the national health system, in order to bring services closer to the community and ensure equitable distribution of community and household centred health care services," she says.

**Availability of essential medicines, vaccines and health supplies**

Dr. Sarah Byakika, the acting commissioner for health services and planning in the Ministry of Health, says the ministry has instituted control mechanisms to prevent drug pilferage in the supply chain and at health facilities.

Byakika notes that the relevant control tools for management of stocks levels have been developed and the ministry has increased supervision, inspection and auditing of medicine, together with the Health Monitoring Unit and local governments, in order to curtail theft of drugs.

She adds that the communities are continually being sensitised about government embossed medicines to check theft. Disciplinary action, including speedy prosecution of those found to be stealing medicines, is being implemented in close collaboration with the Health Monitoring Unit.

"During the last Financial Year 2016/17, 75%

**WORKING WITH THE LOCAL GOVERNMENTS, THE MINISTRY CONTINUES TO PROVIDE NON-MONETARY INCENTIVES TO MOTIVATE HEALTH WORKERS ESPECIALLY ACCOMMODATION, REWARDS AND RECOGNITION FOR GOOD PERFORMANCE AND PREFERENTIAL SCHOLARSHIPS FOR UPCOUNTRY STAFF**

of health facilities had no stock outs of essential medicines in the last quarter," she stressed.

Byakika adds that 112 containers for storage of essential medicines and health supplies have been procured for the 112 centres. She adds that the National Medical Stores (NMS) budget has increased by sh41n in the 2018/19 budget.

"Construction of a new warehouse for NMS (co-funded by the Government, Global Fund and GAVI) has commenced at Kajjans, with a capacity of 50,000 pallet positions compared to the current warehouse of 8,000 pallet positions. Works are expected to be completed by August 2019," she says.

Byakika notes that occasionally, the sector experiences some stocks of expired medicines mainly from donations, with short shelf life.

"This raises risks of repackaging and reselling expired medicines. The ministry has put in place guidelines on permissible shelf-life and appropriateness of donated medicines. The National Drug Authority is enforcing this guideline and also managing expenses in the private sector," Byakika stresses.

**Human resources for health and staffing of our health facilities**

She says the staffing levels at government health facilities improved to 73% (45,029 out of the 61,796 approved posts) in the financial year 2016/17, from 69% in the 2014/15 financial year.

"She explains that the ministry continues to work with local governments, district service commissions and the Health Service Commission to fill critical vacant posts such as specialists in hospitals, medical officers, anaesthetists, midwives and public health nurses but is constrained by limitation of wage and failure to attract the above mentioned."

"The Government has also increased the wage for health workers to be effected in the coming Financial Year 2018/19. The ministry is establishing measures to ensure performance by ensuring that all health managers have signed performance agreements with targets and are held accountable," says Atwine.

She adds, "In collaboration with the office of the Prime Minister, partners and local governments, the problem of chronic absenteeism of health workers is being addressed through the automated attendance



President Yoweri Museveni flagging off medical workers heading to India for specialised training at State House, Entebbe on September 13, 2017



Dr. Kavuma Awusi, a Senior physician at Uganda Cancer Institute, Mulago Hospital, unveiling the radiotherapy machine at the Radioterapy Department in November 2017

analysis programme, which is being rolled out to all districts."

Atwine stresses that by April 2018, unauthorised absenteeism was around 9% and overall absence from duty at 22% (unofficial absenteeism + official request + leave). But through this programme, local governments were able to enforce disciplinary action on absconding staff, as well as enforce duty rosters and work schedules for all staff.

"Working with the local governments, the ministry continues to provide non-monetary incentives to motivate health workers especially accommodation, rewards and recognition for good performance and preferential scholarships for upcountry staff," she says.

She highlighted that in the financial year 2017/2018, the ministry is offering the following scholarships for critical cadres: 24 Bachelor scholarships in Anaesthesia; 29 Diploma in Anaesthesia; 30 Certificate in Theatre Techniques (Theatre Assistants); 4 Diploma in Paediatric Nursing and 4 Masters of Medicine in Obstetrics and Gynaecology under the Uganda Reproductive Maternal and Child Health Services Improvement Project, funded by the World Bank Loan, and a grant from the Global Financing Facility for Every Woman and Child and Swedish International Development Aid.

Atwine explains that the construction of 68 staff houses in Karamoja region under the Italian Government grant is to be completed by December 2018.

In addition, 26 staff houses have been

constructed under GAVI (Bulambuli (2), Namutumba (1), Bugiri (2), Namayingo (2), Mayuge (2), Kakumiro (1), Kagadi (1), Bundibugyo (2), Kasese (2), Kanungu (2), Kisono (2), Mukono (2), Wakiso (1), Kalangala (2) and Buvuma (2). In addition, 100 units of staff houses were constructed by Mulago National Referral Hospital.

"In 2018, the ministry developed Internship training guidelines to regulate and streamline the training of medical, pharmacy and nursing graduate interns, and a Senior House Officer's policy to redefine the minimum quality standards for specialist training programmes. The ministry is paying salaries for 970 interns and allowances for 358 Senior House Officers," Atwine says.

**Improvement in Health Infrastructure and equipment**

Atwine says there was significant progress or completion of various infrastructural developments.

For instance, the ministry completed the rehabilitation and equipping of nine hospitals under World Bank funding for the Uganda Health Systems Strengthening Project and they include; Mityana, Nakaseke, Kiryandongo, Entebbe Grade B, Nebbi, Anaka, Iganga, Moyo and Moroto.

All these hospitals received an increase in their annual budgets as follows; PHC wage, sh150m to cater for wages for specialists, non-wage, sh135m to cater for operational costs

# prevention key focus areas



Health minister Dr. Jane Ruth Aceng receiving motorbikes from American Ambassador Deborah Malac. The motorbikes were donated by government of the United States of America to support health facilities

and sh135m for essential medicines and health supplies," she elaborates.

She adds that the construction of 10 theatres and 16 maternity wards and water supply of 40,000 litre reservoir for 26 health centres IVs was completed under the Uganda Health Systems Strengthening project by June 2017.

"These are Abokwe, Aduku, Atiak, Budaka, Kibuyanda, Kasanda, Kibuku, Kiganda, Kikamulo, Kitwe, Kiyunga, Kyankwanda, Mweru, Mwila, Nankoma, Ngoma, Ntenjeru-Kojia, Obongi Health Centre IVs," she highlighted.

Atwine says Kawempe and Kiriddadi hospitals in Kampala were completed and are currently occupied by Mulago Hospital which was temporarily closed for rehabilitation.

"Expansion, rehabilitation and equipping of Mulago National Referral Hospital and its transition into a super-specialised facility are in the final stages. Construction will be concluded by October 2018. Construction of a 450-bed Specialized Maternal and Neonatal Health Care Unit at Mulago commenced in June 2015 and is expected to be completed by June 2018," notes Atwine.

Byakika says the Cancer Institute installed and commissioned the Cobalt 60 cancer radiotherapy machine. In the financial year 2018/19, the Cancer Institute plans to acquire an MRI and a linear accelerator.

She explains that the Government secured funding from the African Development Bank to develop the Uganda Cancer Institute into a Regional Centre of Excellence in oncology

**THE GOVERNMENT SECURED FUNDING FROM THE AFRICAN DEVELOPMENT BANK TO DEVELOP THE UGANDA CANCER INSTITUTE INTO A REGIONAL CENTRE OF EXCELLENCE IN ONCOLOGY CARE, RESEARCH AND TRAINING**

up to increase the availability and utilisation of oxygen at higher level facilities," Atwine explains.

Over 7,000 beds and mattresses were donated by the Chinese Government and distributed to hospitals and health centres in 2016.

"There are 19 medicine stores that have been commissioned in the districts of Napak, Ahebinge, Agago, Ntoko, Rubizi, Sheema, Buhweju, Isingiro, Lyantonde, Lwengo, Buikwe, Pallisa, Luuka, Serere, Nakapiripiti, Bukwo, Nakaseke, Bulisa and Zombo," she adds.

Atwine notes that construction of the specialised paediatric hospital was commissioned last February in Entebbe to be completed in three years as well as construction of a state-of-the-art super-specialised hospital at Lubowa, through a private public partnership.

"Under the Government of Uganda and Spanish Debt Swap Grant: Kawolo and Busobwe Hospitals are being reconstructed. The project is expected to be completed in FY 2019/20. Under the Government of Uganda and Saudi Fund/OFID and BADFA expansion, rehabilitation and equipping of Yumbe and Kayunga Hospitals has started and completion is expected to be by end of 2020," says Atwine.

She adds that to address the problem of shoddy work, the ministry has put in place a strict and regular monitoring and supervision mechanism involving top management and the upgraded health infrastructure department and the Health Monitoring Unit.

**Service delivery**

Byakika explains that a number of service delivery interventions were implemented during the year and they include; support from Global Fund, Presidential Malaria Initiative, DFID and the Agant Malaria Foundation. The ministry distributed over 24 million insecticide treated mosquito nets bringing coverage to 100% of households with mosquito net.

According to the malaria prevalence survey 2014, malaria prevalence has reduced to less than 19% and in Kampala to as low as 9%.

This is expected to reduce further with proper utilisation of the mosquito nets and prompt treatment for malaria.

The survey indicates that from 2010 to 2017, malaria mortality reduced by 61% from 59 to 23 per 100,000 people. The availability of anti-malarials (artemisinin combination therapies - ACTs) in public and private-not-for-profit facilities, has continued to improve, with up to 93.3% experiencing no stock-out of ACTs as of June 2017.

A total of 964,232 adults and 64,677 children received anti-retroviral treatment for HIV and the policy of Test and Treat started during the year under review. Transmission of HIV from infected mothers to new born babies fell to less than 3,000 babies during the year.

**Sector priorities for 2018/19**

Atwine explains that the ministry is establishing an effective Community Health Extension Workers programme, to bring services closer to the communities and ensure equitable distribution of household centred health care services.

"Improving primary health care through functionalising health centres III, the ministry will use the loan from The World Bank to upgrade 125 health centres III to III+, in 99 local governments in FY 2018/19. It will also renovate 30 health centres III to fully functionalise 30 health centres III, as well as acquire and provide accommodation for critical staff under the Uganda Reproductive Maternal Neonatal and Child Health Improvement Project," she states.

Atwine adds that addressing the human resource challenges in the sector will be through attraction, motivation, retention, training and development. The salary enhancement will contribute towards attainment of this aspect.

"She also notes that the ministry plans to reduce referrals abroad by training, recruitment and motivation of specialists and other staff, improvement of health infrastructure, as well as acquisition of specialised equipment and medicines.

"There will be improved reproductive, maternal, neonatal, child and adolescent health services to reduce mortality and morbidity. The ministry will also improve blood collection and supply by through community mobilisation for blood donation," she stresses.

Atwine stresses that the sector is making steady progress to achieve most of the planned targets in the NRM manifesto. "The National Household Survey (2015) and Uganda Demographic Health Survey (2016) both show significant improvement in key health indicators."

However, underfunding of the sector affects implementation of the planned interventions in almost all areas - medicines, staffing and improvement in the health infrastructure," she says.

A total of 121 gene expert machines were procured and distributed to health facilities across the country to strengthen diagnosis and treatment of TB. The TB treatment success rate is 85% (2016/17 Financial Year).

Atwine says a department of emergency medical services was established and the Ministry has developed policy and guidelines for emergency medical services and referral.

"Under the support from the African Development Bank, the Ministry procured 1 ambulances for the Kampala Metropolitan area and the Belgian Technical Cooperation (BTC) established an ambulance service system in West Nile and Rwenzori regions," she notes.

Atwine notes that Global Positioning System (GPS) devices were deployed in ambulances to provide information in real time on performance of ambulances.

**Health financing**

Atwine says the national health insurance scheme draft bill has been submitted to Cabinet and Parliament as a priority. Financing is expected to reduce high pocket expenditure for health and improve the quality of health services. "The A scaling up results-based financing health care in 76 districts over a period years. This is expected to improve e and quality of services," she says.