

CDC in UGANDA



Accessible version: www.cdc.gov/globalhealth/countries/uganda/

The Centers for Disease Control and Prevention (CDC) began working in Uganda in 1991 and officially established a country office in 2000. CDC works with the Ministry of Health (MOH) and other partners to deliver evidence-based health services to prevent, control, and treat HIV/AIDS. CDC also supports tuberculosis (TB) and malaria control efforts, and maternal and child health services, including vaccination. CDC works with partners to strengthen Uganda's capacity to prevent, detect, and respond to public health threats such as the COVID-19 pandemic.



Since 2014, the CDC-supported Public Health Emergency Operations Center (PHEOC) responded to more than 270 events, including outbreaks of yellow fever, Ebola, Marburg, Rift Valley fever, Crimean Congo hemorrhagic fever, influenza, measles, cholera, typhoid, meningitis, and anthrax



CDC supports Uganda to maintain polio-free status and strengthen the Expanded Program for Immunization (EPI) system that prevents, detects, and responds to outbreaks of vaccine-preventable diseases



CDC supported 34 Ugandan laboratories to attain international accreditation using the Strengthening Laboratory Management Toward Accreditation (SLMTA) approach



CDC helped develop a network for integrated specimen transport and result transmission. This network increased crucial outbreak response capacities to rapidly move specimens and return results



As of September 2021, Field Epidemiology Training Program (FETP) fellows investigated 260 outbreaks, conducted 271 epidemiologic studies and quality improvement projects, and published 61 manuscripts in peer-reviewed journals



In collaboration with the MOH, FETP-Advanced fellows and graduates conducted 67 projects focused on COVID-19 between March 2020 and September 2021



CDC partnered with religious organizations and health care providers through the Faith-Based Initiative program to disseminate COVID-19 prevention messages and increase vaccine uptake



CDC supported partners and health facilities to locally produce alcohol-based hand rubs at nearly half the price of common commercial hand sanitizers. This effort increased access to hand hygiene resources that help prevent COVID-19



Despite the COVID-19 pandemic, HIV treatment outcomes continued to improve with viral load suppression rates reaching over 95% in 2021



In partnership with the Government of Uganda, CDC conducted the first-ever Uganda Population-based HIV Impact Assessment that focused on refugees



CDC opened a multi-drug resistant TB (MDR-TB) treatment center at the Uganda Prisons Service headquarters. This center is the sole referral and management center for incarcerated patients with MDR-TB in Uganda



Through the U.S. President's Malaria Initiative (PMI), CDC helped distribute 1.9 million bed nets, 1.2 million malaria rapid diagnostic tests, and 1.2 million artemisinin-based combination therapies in 2021

Global Health Security

CDC works with the Ministry of Health (MOH) and local partners to support activities across the 11 technical areas outlined in the Global Health Security Agenda (GHS). These action packages help Uganda build core public health capacities in disease surveillance, laboratory systems, workforce development, and emergency management. One crucial asset to Uganda's public health system is the national Public Health Emergency Operations Center (PHEOC) that the MOH established in 2014 with CDC support. The PHEOC serves as a hub for coordinating preparedness, response, and recovery from public health emergencies. The PHEOC monitors health threats in real-time, coordinates with a network of national laboratories to rapidly identify the source of disease, trains epidemiologists, and has rapid response teams at the ready.

Laboratory Systems Strengthening

CDC began supporting the MOH in 2003 to build a robust laboratory network that provides efficient and effective diagnostic and surveillance services. CDC supports enhanced laboratory infrastructure and equipment procurement to increase the laboratory network's diagnostic capacity. This strengthened laboratory network enables prompt and accurate results that inform clinical decisions, outbreak response, policies, and programs. CDC also uses the Strengthening Laboratory Management Toward Accreditation (SLMTA) approach to train laboratory managers to implement quality management systems in areas with limited resources. CDC's support in Uganda contributed to increased timeliness, reliability, and accuracy of testing. Ugandan laboratories experience fewer adverse safety incidents and higher confidence in laboratory services due to increased quality, lower wait times for patients, and enhanced interactions with clinicians.

Field Epidemiology Training Program (FETP)

CDC partnered with the MOH and Makerere University School of Public Health to establish a two-year, national FETP in 2015. FETPs train epidemiologists to identify and contain outbreaks before they become epidemics. Participants strengthen their skills in data collection and translation of data into evidence-based action. Uganda's FETP-Advanced, also known as the Public Health Fellowship Program, is the only field epidemiology training program in Africa that enrolls post-master's degree fellows. In August 2021, CDC and partners launched Uganda's first FETP-Intermediate, a nine-month training program for health professionals working at Regional Referral Hospitals. In early 2021, CDC also re-launched FETP-Frontline, a three-month training program for district health workers.

COVID-19

The first case of COVID-19 in Uganda was confirmed on March 21, 2020. Since the pandemic was declared, CDC has worked with local partners to prevent the spread of COVID-19 across borders and within health facilities. Throughout the pandemic, CDC continued to focus on key tuberculosis (TB), HIV, and malaria programs. CDC supports emergency operations, promotes the COVID-19 vaccine, and enhances laboratory, diseases surveillance, and workforce capacities. Previous collaborations between CDC and the MOH to expand regional laboratory capacities to conduct PCR tests and community-based surveillance were critical to the country's COVID-19 response. FETP fellows and graduates greatly contributed to the response by coordinating early airport screening activities, contact tracing, data management, call center management, surveillance analysis, and vaccine studies. FETP personnel also conducted outbreak investigations, risk mapping, and epidemiological studies in sub-populations living at higher risk of COVID-19.

HIV and Tuberculosis (TB)

CDC assisted the development of an integrated national, regional, and district service-delivery model that enhances health system capacity to respond to HIV and TB in Uganda. Throughout the COVID-19 pandemic, CDC has worked to continue HIV and TB service delivery, ensure strategic HIV testing, and retain HIV and TB clients on treatment. CDC also works with local partners to:

- Find people living with HIV, expand antiretroviral treatment (ART), and increase viral load testing
- Eliminate mother-to-child HIV transmission
- Increase access and uptake of HIV pre-exposure prophylaxis (PrEP)
- Monitor and expand voluntary medical male circumcision (VMMC) services and develop guidelines
- Implement non-communicable disease prevention and management services
- Prevent HIV among young women and adolescent girls through the Determined, Resilient, Empowered, AIDS-free, Mentored, and Safe (DREAMS) program
- Support the MOH to design, maintain, improve, and use health information systems, and conduct research and disease surveillance

Malaria

Under the U.S. President's Malaria Initiative (PMI), CDC assigned a resident advisor to support malaria prevention and control activities in Uganda. CDC helps provide long-lasting insecticide-treated nets and indoor residual spray (IRS), prevent malaria during pregnancy, and strengthen diagnostics and case management. CDC partners with the National Malaria Control Division to conduct operational research, surveillance, monitoring, and evaluation. CDC's monitoring support focuses on bed net durability and insecticide and antimalarial resistance.



CDC STAFF

15 U.S. Assignees
101 Locally Employed



AT A GLANCE

Population: > 45.7 million
Per capita income: \$2,260
Life expectancy: F 66 / M 61 years
Infant mortality rate: 42/1,000 live births

Sources:
World Bank 2020, Uganda;
Population Reference Bureau 2021, Uganda



TOP 10 CAUSES OF DEATH

1. Neonatal disorders
2. Malaria
3. HIV/AIDS
4. Lower respiratory infections
5. Tuberculosis
6. Stroke
7. Diarrheal diseases
8. Ischemic heart disease
9. Congenital birth defects
10. Sexually transmitted infections excluding HIV

Source:
Source: GBD Compare 2019, Uganda



For more country information
<https://www.cdc.gov/globalhealth/countries/uganda/>