

STRATEGIC FOCUS

The U.S. Centers for Disease Control and Prevention (CDC) began its work in Uganda in 1991 with a focus on HIV/AIDS research, officially establishing a country office in 2000. With the launch of the U.S. President's Emergency Plan for AIDS Relief (PEPFAR) in 2003, Uganda became a focus country for the program delivering high-quality HIV services. As one of 13 PEPFAR countries selected for the Accelerating HIV/AIDS Epidemic Control (2017-2020) strategy, CDC supports MOH to build its capacity to respond to HIV and tuberculosis (TB) using a service delivery model integrated within national, regional, and district structures.

CDC's current focus is to find more persons living with HIV by testing those most at risk; expanding antiretroviral treatment (ART) to all HIV-positive Ugandans immediately upon diagnosis—irrespective of disease staging or CD4 cell count; and scaling-up viral load (VL) testing to monitor for viral suppression. CDC supports TB diagnosis and treatment through systemic integrated screening of patients attending HIV clinics and linkage to HIV care and ART for TB/HIV co-infected patients. CDC also supports programs to reduce new HIV infections through Prevention of Mother-to-Child HIV Transmission (PMTCT), PEPFAR DREAMS (Determined Resilient Empowered AIDS-Free Mentored Safe), rollout of pre-exposure prophylaxis (PrEP), stronger key and priority population (KP) programs, and voluntary medical male circumcision (VMMC).

KEY ACTIVITIES AND ACCOMPLISHMENTS

Use of data for improved impact: CDC uses up-to-date data including the recent Population-based HIV Impact Assessment (PHIA) survey to help inform and focus country HIV/AIDS and TB interventions. CDC employs successful patient-centered strategies such as differentiated services delivery models to improve access to HIV and TB services. PEPFAR 2018 reporting data shows 627,644 (57%) of the PEPFAR-supported HIV positive Ugandans were receiving ART in CDC-supported sites, and 91% of those were virally suppressed. CDC also supported 340,168 VMMCs, representing over half of male circumcisions in Uganda in 2018.

Quick adoption of informed policies: CDC advocates for rapid adoption of key policies issues for use of optimal ART regimens, TB preventive treatment (TPT), self-testing, and PrEP. Following high levels of pretreatment HIV drug resistance to first-line ART regimens, Uganda was one of the first PEPFAR countries to rollout the combination of tenofovir disoproxil fumarate, lamivudine, and dolutegravir (TLD) for adolescents, and adults as well as Lopinavir/ritonavir-containing regimens for children living with HIV. Since the national scale-up of Option B+ in 2013, Uganda has made tremendous strides in PMTCT with transmission reducing from 7.5% in 2014 to 2.8% in 2018.

TB/HIV: CDC provides ART to over half of the TB/HIV co-infected clients supported by PEPFAR. CDC also and supports TPT scale-up and use of better diagnostic tests, including Gene Expert and Urine lipoarabinomannan (LAM) to improve TB case-finding. Pediatric TB diagnosis, and care and treatment for co-infected patients. CDC employs successful models to improve access to HIV and TB services for KPs, including a direct agreement to support Uganda Prisons Service to scale-up HIV and TB services. CDC has been conducting an operational research project to assist and improve contact tracing for TB and HIV patients in the community. This project has been investigating the use of expanded pediatric specimens to diagnose TB in a programmatic setting as well as TPT provision to people living with HIV and children under five years who are exposed to TB.

Laboratory systems strengthening: Since 2009, CDC has supported the growth of the MOH's lab function from a small unit with only two officers and no operational budget to the recently created autonomous Department of Health Laboratory and Diagnostic Services. CDC supported the development of the first-ever national health laboratory services strategic plan and policy (with subsequent revision in 2022) and the laboratory methodology of service to increase highly qualified staff in key areas of lab service delivery. CDC supported construction of the Uganda National Health Laboratory Services for centralized testing of HIV-VL, early infant diagnosis, and monitoring quality of diagnostic services. This has greatly improved patient management, bolstered by the innovative specimen transport and e-results return system (dashboard) implemented in 100 hub labs across the country.

Human Resources for Health: CDC supports national health workforce development through direct staff recruitment and on-site mentorship. Since 2013, almost half of the PEPFAR-supported health workers recruited to support scaling-up of HIV/AIDS services in government and not-for-profit facilities work within CDC-supported districts/regions. CDC also supports procurement and supply-chain strengthening to improve access to HIV medicines and related commodities across the country.

Key Country Leadership

President:
Yoweri Kaguta Museveni

Minister of Health:
Jane Ruth Aceng

U.S. Ambassador:
Deborah R. Malac

CDC/DGHT Director:
Lisa Nelson

[Country Quick Facts](http://worldbank.org/en/where-we-work)
(worldbank.org/en/where-we-work)

Per Capita GNI:
\$620 (2018)

Population (million):
42.72 (2018)

Under 5 Mortality:
49/1,000 live births (2017)

Life Expectancy:
60 years (2017)

[Global HIV/AIDS Epidemic](http://aidsinfo.unaids.org)
(aidsinfo.unaids.org)

Estimated HIV Prevalence
(Ages 15-49): 5.7% (2018)

Estimated AIDS Deaths
(Age ≥15): 18,000 (2018)

Estimated Orphans Due to
AIDS: 950,000 (2018)

Reported Number
Receiving Antiretroviral
Therapy (ART) (Age ≥15):
936,873 (2018)

[Global Tuberculosis
\(TB\) Epidemic](http://who.int/tb/country/data/profiles/en)
(who.int/tb/country/data/profiles/en)

Estimated TB Incidence:
201/100,000 population
(2017)

TB patients with known HIV
status who are HIV
positive:
40% (2017)

TB Treatment Success Rate:
77% (2016)

TB Mortality:
26/100,000 population
(2017)

DGHT Country Staff:

117.85
Locally Employed Staff:
105.35
Direct Hires: 12.5
Fellows & Contactors: 0

Our success is built on the backbone of science and strong partnerships.

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