

OUTPATIENT NUMBERS INCREASES DUE TO SUPPLIES AVAILABILITY

By Simon Masaba

Malaria, mental illness, hypertension and tuberculosis are among the leading diseases affecting police officers and the communities they serve, according to a new report.

The 2025 Annual Performance Report of the Directorate of Police Health Service, released by Assistant Inspector General of Police in charge of Police Health Services Dr Moses Byaruhanga shows a sharp rise in patient numbers and disease burden across police health facilities countrywide, putting pressure on infrastructure, staffing and funding.

Outpatient attendance increased by 17.56%, from 531,375 patients in 2024 to 644,521 last year, a figure largely driven by improved availability of health workers and medical supplies.

The facilities treated 90,096 police officers, 145,773 family members and 408,652 civilians, highlighting the expanding role of Police Health Services as a key public healthcare provider, especially in underserved communities.

“Our facilities are no longer serving only police officers; they are increasingly serving the wider community, which

MALARIA, MENTAL ILLNESS COMMONEST DISEASE AMONG POLICE OFFICERS

BETWEEN THE LINES
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Dr Moses Byaruhanga

has significantly increased the patient load and pressure on our systems,” Byaruhanga said while presenting the report at the Police headquarters in Naguru, Kampala, on Friday.

FUNDING, REFORMS
Police Health Services spent sh6.68b in non-wage recurrent expenditure last year, mainly funded by the Government

with support from the justice, law and order sector.

Nearly 45% of the budget (sh3.2b) went to drugs and medical supplies, largely sourced through the National Medical Stores (NMS), while sh887m supported training, supervision and health

information management, among others.

Despite this, the Police’s health directorate continues to face critical shortages of clinicians, laboratory staff, midwives, radiographers and specialists, along with gaps in medicines, diagnostic equipment, emergency transport and digital infrastructure.

Byaruhanga said the growing disease burden and rising civilian use of police facilities now require urgent structural reforms.

The report recommends fast-tracking recruitment, upgrading police health centres to attract more medicines from NMS and expanding laboratory services. Additionally, it recommends

DOMINANT ILLNESSES

The report shows that malaria remains the leading disease among police patients across all age groups, accounting for 26.5% of all outpatient visits, followed closely by cough and colds (26.2%) and urinary tract infections (8.1%).

Malaria cases rose by 12.1%, from 154,823 cases in 2024 to 173,517 cases last year. Non-communicable diseases (NCDs) also emerged as a serious challenge. Hypertension was the most prevalent NCD, with women more affected than men; 3,926 females (65.3%) compared to 2,085 males (34.7%).

Mental health conditions, though still at a small scale, continue to rise. Reported mental health cases increased from 1,400 in 2024 to 1,492 in 2025, accounting for 0.23 % of all outpatient attendances.

“We are seeing a clear shift where NCDs like hypertension and mental health conditions are becoming more prominent, alongside infectious diseases,” Police Health Services director Dr Moses Byaruhanga said.

Tuberculosis also showed a worrying trend, with cases increasing from 214 per 100,000 in 2024 to 221 per 100,000 last year.

Although 24 police health facilities were renovated in 2025, Byaruhanga said only 17 out of the 116 facilities are equipped with electronic health management information systems, limiting digital reporting, drug ordering and real-time monitoring.

“The demand is growing faster than our infrastructure and systems. Most of our facilities are still operating manually, which affects efficiency and service delivery,” he said.

strengthening emergency systems, as well as expanding and ambulance services, specialised services, including improving information and mental health, maternal health, communications technology HIV and forensic care.