

UGANDA LAUDED FOR ADVANCING HEALTH FINANCING REFORMS

By John Musenze

Uganda has been lauded for taking bold steps towards strengthening health financing systems, as African countries push towards greater self-reliance and sustainability in healthcare delivery.

The recognition came during the closure of the inaugural Community of Practice on Health Sovereignty Conference held at Serena Hotel, Kampala on March 23-25, which brought together top officials from health and finance ministries across eight countries: Senegal, Kenya, Eswatini, Mozambique, Zambia, Tanzania, Botswana and South Africa.

The meeting, co-hosted by Uganda alongside the African Union Development Agency (AUDA-NEPAD) with support from Georgetown University in the US, focused on creating a platform for countries to share experiences and develop practical, country-led solutions to health system challenges.

“We want to commend Uganda for taking the lead in

creating a platform that is not only about dialogue, but action and implementation,” Ntokozo Linton Mchunu, the technical advisor at AUDA-NEPAD, said.

THE TOP THREE PRIORITIES

Mchunu outlined three key pillars that African countries must prioritise: financing, sovereignty and supply chain independence.

Firstly, he said health must be anchored in strong financial systems, calling for improved domestic resource mobilisation, better public financial management and more use of both public and private capital.

Secondly, Mchunu highlighted the need for system sovereignty, where countries build resilient national health systems capable of planning, regulating and delivering services with minimal reliance on external support.

Thirdly, he called for supply chain sovereignty, urging African nations to invest in local production and distribution of medicines, diagnostics and medical technologies.

BETWEEN THE LINES

“Africa must begin to treat health not just as a social service, but as a critical component of economic development and national planning.”

UGANDA'S ACHIEVEMENTS

Uganda's efforts in advancing these priorities were further highlighted by Vivian Tumwebaze, the principal economist and health budget analyst at the Ministry of Finance, Planning and Economic Development, who represented finance minister Matia Kasaija.

She said government financing for health has steadily increased over the years, rising from about sh2.64 trillion in the 2020/21 financial year to approximately sh4.4 trillion in the 2025/26 budget.

The human capital development programme, under which the health sector falls, now takes the largest share of the national budget, reflecting



Aceng (front row, third-left) with other officials from the health and finance ministries of different countries during the closure of the Community of Practice on Health Sovereignty Conference held at Serena Hotel, Kampala on March 23-25

the Government's commitment to improving health outcomes.

Tumwebaze highlighted several achievements linked to increased investment, including improvements in life expectancy, which has risen from 63 years in 2014 to 68 years in 2024. Maternal mortality has also significantly declined, while child mortality rates have reduced over the same period.

NEW REFORMS

Uganda has also introduced key reforms to strengthen the efficiency of health spending. These include the adoption of results-based financing in primary healthcare, integration of donor-funded programmes into the national budget

and mainstreaming HIV/AIDS interventions across all government sectors.

Health minister Jane Ruth Aceng, who was the chief guest, called for greater self-reliance and stronger co-ordination among African countries.

“We are gathering at a time when the global health financing landscape is undergoing fundamental shifts. It is now critical for African countries to design and implement solutions that are country-owned and sustainable,” she said.

Dr Aceng emphasised the importance of the Accra Reset, a continental framework aimed at strengthening health sovereignty by enabling countries to diagnose system gaps, design investment plans,

and implement reforms through national systems.

She urged closer collaboration between the ministries of health and finance, noting that sustainable health systems require strong fiscal backing and co-ordinated planning.

The community of practice is expected to serve as a platform for peer learning, accountability and practicality, with countries committing to measurable reforms within defined timelines.

While Africa grapples with shifting global health dynamics, Uganda's approach, anchored in increased domestic financing, policy reforms and regional collaboration, is being viewed as a model for advancing health sovereignty.