

DELIVERING ON THE PROMISE OF IMMUNISATION FOR ALL UGANDANS

56%
decrease in deaths
of children under 5
since 1990

nearly 400
children die per day



11 vaccines supported
by the Uganda
Expanded Program on
Immunisation

45%
of children do not
receive all recommended
immunisations

UGX224billion
increase in annual
immunisation spending
from 2012 to 2016
(US\$60.5 million)

Vaccines save lives and prevent unnecessary suffering from diseases like measles, polio, pneumonia, and cervical cancer. However, despite their lifesaving potential, immunisation coverage in Uganda has stagnated in recent years. Just over half of Ugandan children receive all routine immunisations; some children receive none at all.

The government of Uganda has demonstrated its commitment to improving immunisation coverage, most notably by joining African Heads of State in endorsing the Addis Declaration on Immunisation (ADI) in 2017. However, new efforts, investments, and strategies will be required to meet the commitments made in the ADI and ensure that all Ugandans receive the promise of immunisation.



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Implementing the Addis Declaration on Immunisation

In 2017, African Union Heads of State made an historic commitment, endorsing the Addis Declaration on Immunisation. These leaders recognized that despite tremendous progress on immunisation in recent years, too many African children lack access to lifesaving vaccines, which is a threat not only to the health of children and families, but also to the economic strength of the continent. To guide African leaders in implementing the ADI, the World Health Organization (WHO) published A Roadmap for Implementing the Addis Declaration on Immunisation in June, 2017. It presents three priority approaches for achieving the promise of the ADI: generating and sustaining political commitment and funding; strengthening technical capacity and overcoming barriers to access; and closely monitoring progress.



Members of Parliament and the Ministry of Health must ensure Uganda fulfills its commitments to the ADI, most notably in these three areas:

Prioritizing equitable access to immunisation

Essential to fulfilling the ADI commitment is keeping universal access to immunisation at the forefront of Uganda's efforts to reduce child mortality, morbidity, and disability. Uganda has shown great potential in this respect, by enacting into law the Immunisation Act in 2016. The act aims to support immunisation of children, women of reproductive age, and other target groups against vaccine-preventable diseases, and calls on parents, health workers, and school and district authorities to ensure that all targeted groups are immunized with vaccines available in the national immunisation schedule of the Uganda National Expanded Program for Immunisation (UNEPI). The act mandates that the state provide routine immunisations free of charge, and ensures that all health centers have access to vaccines and related services. UNEPI has also moved to introduce new vaccines in recent years, such as those against pneumonia and diarrhea. Members of Parliament and the Ministry of Health must build on the success of UNEPI to date and expand the protection of immunisation to all Ugandans.

Increasing domestic investment

To meet the above goals, funding for immunisation programs must be adequate, predictable, and sustainable. In recent years, the new vaccines, systems, and equipment put in place to support the UNEPI have required a four-fold increase in immunisation spending, from UGX 70.5 billion (US\$19 million) in 2012 to UGX 294.9 billion (US\$80 million) in 2016. More than 60% of this cost is currently being met by development partners. Going forward, especially if Uganda reaches its goal of achieving middle-income country status, the costs to the Government of Uganda will rise as a result of new co-financing requirements, new vaccine introduction, and the higher cost of reaching the hardest to reach with vaccines. To address these challenges, the Immunisation Act mandated the establishment of an immunisation fund. The objective of the fund is to purchase vaccine-related supplies, as well as cold chain equipment, and to support immunisation outreach services. Now Members of Parliament must lend their support to ensure the immunisation fund is fully enacted and budget is allocated to operationalize it.

Addressing barriers to service delivery

The ADI recognizes that fully realizing the promise of immunisation also requires overcoming significant barriers in the health care delivery system, especially as it relates to reaching the poorest, most vulnerable, and most marginalized communities. Uganda has made improvements in this area thanks to efforts by UNEPI leadership. For example, they are now systematically tracking progress toward supply chain improvements using Effective Vaccine Management indicators, which has generated a culture of accountability. We must continue to improve data collection and reporting, at the national and district levels, and build more efficient supply chains to ensure that vaccines are available where and when they are needed.

For every \$1 spent
on immunisation globally, there is
an estimated \$16 return,
in **reduced treatment costs**
and **productivity losses** avoided