



THE NATIONAL BUDGET FRAMEWORK FY 2021/22

BUDGET BRIEF NO. 2021/3

INVESTING IN HEALTH

(Source: National BFP FY 2021/22 - 2025/26)

Due to the shift from Sector Based to Programme Based Budgeting, the health sector lies under the Human Capital Development programme. The brief therefore assesses the contribution of the health sector to the new HCD programmes as articulated in the NDPIII.

The health sector is a critical component towards achieving the Human Capital Development Programme goal of increasing the population's productivity through strategic investment. Since March 2020, health has taken up a prominent role in the development discourse due to the coronavirus pandemic.

Through the Human Capital Development Programme, health contributes to NDP III objectives by:

- Offering quality primary health care services and evidence-based integrated curative services to the people of Uganda
- Researching natural products and traditional medicine systems to treat and manage human diseases and justify their therapeutic claims
- Strengthening the health infrastructural system (buildings, medical equipment, and emergency transport), laboratory services and the pharmaceutical supply chain system
- Promoting policy development, planning, implementation, coordination oversight of public health services and creating scientific knowledge for the application of evidence-based health policies and interventions to improve healthcare
- Improving sector partnerships, quality of health care and patient safety

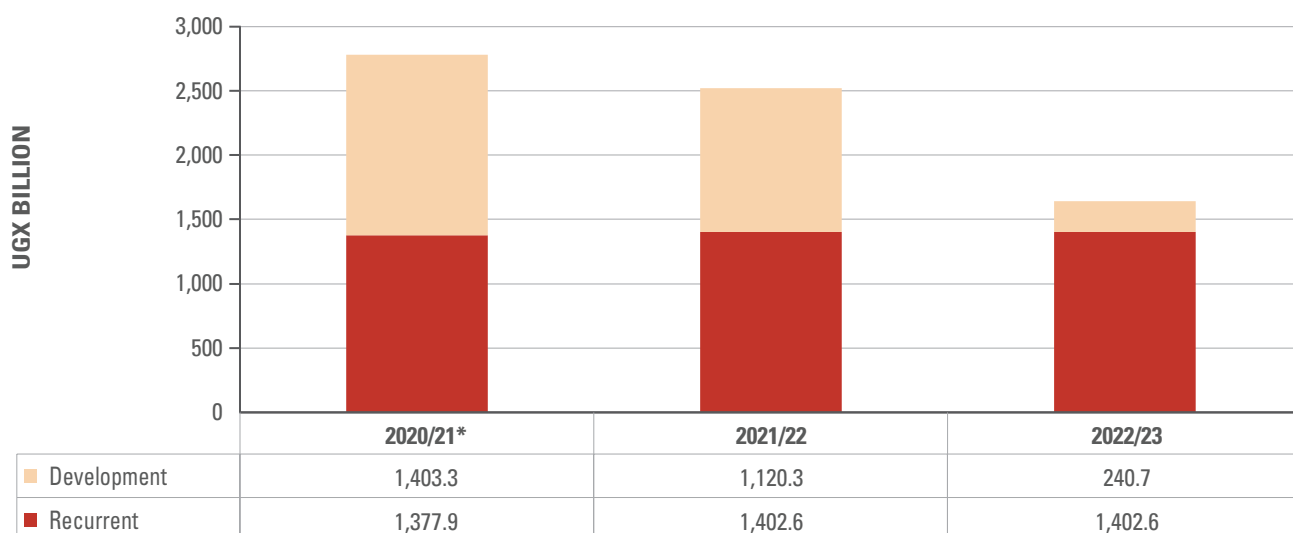
FIGURE 1: FY 2021/22 PROGRAMME BUDGET SHARES



KEY FACTS

- The Human Capital Development (HCD) programme accounts for 20.4% of the total Budget allocation in FY 2021/22
- The health sector accounts for 35.8% of the HCD programme in FY 2021/22
- The sector nominal allocation is estimated to decline by 9.3% (UGX 2,781 billion in FY 2020/21 to UGX 2,523 billion in FY 2021/22)
- The health sector's development share is expected to account for 44.4% in the FY 2021/22 budget. This decline is expected to fall further in the subsequent year of 2022/23 owing to an expected cut in external funding

FIGURE 2: SECTOR NOMINAL ALLOCATIONS¹



2020/21* - Refers to the approved budget for FY 2020/21

SECTOR INTERVENTIONS

According to the NBFP 2021/22, Government will direct attention and resources to increase universal health access from 44% to at least 65%. Noteworthy, emphasis will be put on further improvement of the most pressing public health issues, especially Primary Health Care (PHC) interventions through the following:

- i) Prevention and control of Communicable Diseases focusing on high burden diseases (HIV/AIDS, TB and Malaria), e.g. Indoor Residual Spraying (IRS) in the malaria high incidence districts, house to house TB screening
- ii) Prevention and control of Non-Communicable Diseases (NCDs) and injuries through the promotion of physical exercise, healthy eating and regular health checks and advocacy for reducing the consumption of alcohol and tobacco products to reduce the increasing burden of NCDs
- iii) Improving the functionality of health facilities at all levels by installing requisite equipment and improved availability of essential medicines and health supplies
- iv) Improving the emergency medical services and referral system by functionalizing Intensive Care Units (ICUs) in referral hospitals and hospitals along the highway and improving communication on referral and ambulance systems
- v) Commence the first phase of the Centre of Excellence's construction for cardiovascular services at the Uganda Heart Institute and establishment of Regional Cancer treatment centers in Northern Uganda
- vi) Training of super specialists in Oncology and Cardiovascular services

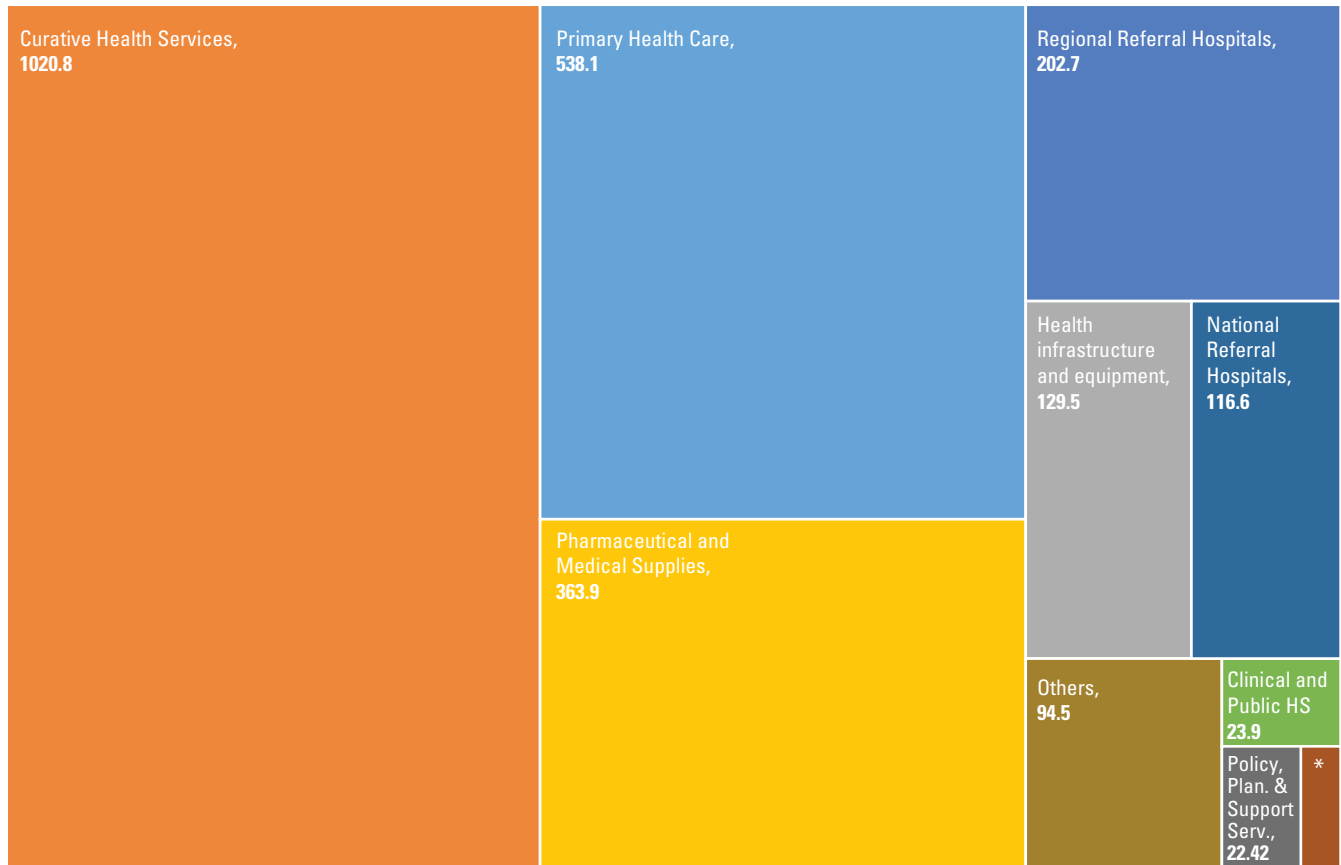
LEVERAGING POINTS FOR GOVERNMENT

The COVID-19 pandemic has exacerbated the challenges in the health sector, it has increased the number of vulnerable people, and to improve health and wellbeing in the country, there is a need to:

- Prioritize funding into health services that have been overstrained by the COVID-19 pandemic, such as emergency infrastructure and maternal facilities
- Increase access to social protection, especially to the most vulnerable to COVID-19 like those with underlying conditions
- More emphasis on sensitization about health self-protection measures such as sanitation, the regular wearing of masks, family planning methods, among other safety measures

¹ **Notes:** Total external funding share to the development component was UGX 1,179.9 Billion in the FY 2020/21, estimated to reduce to UGX 915.5 Billion in FY 2021/22 and projected at only UGX 35.9 Billion for the FY 2022/23.

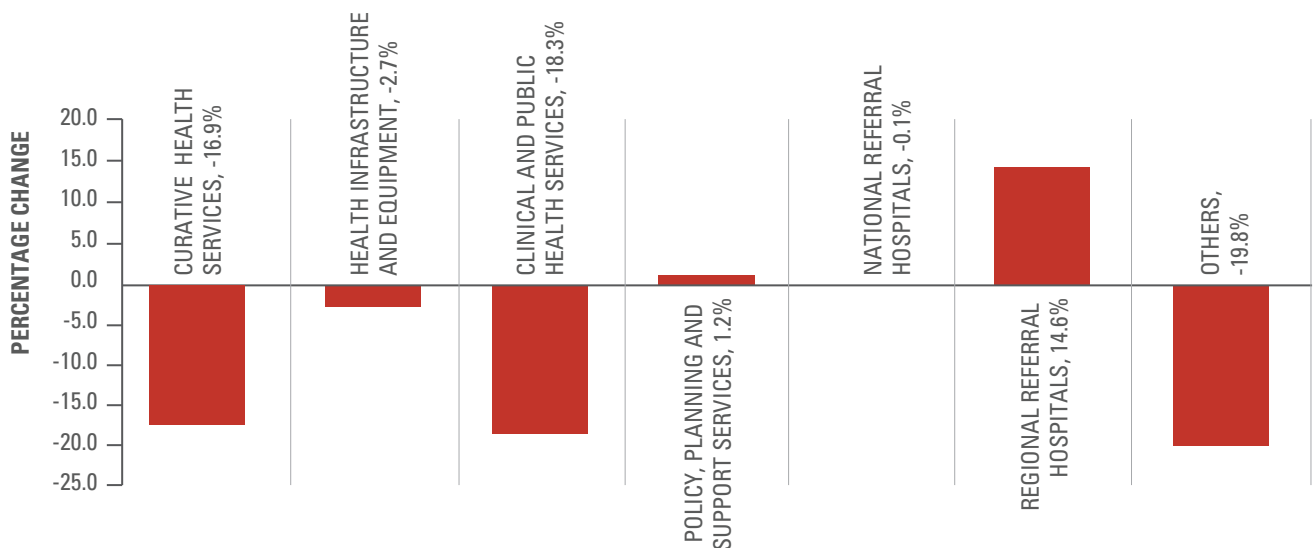
FIGURE 3: HEALTH NOMINAL ALLOCATIONS BY VOTE FY 2021/22 (UGX BILLION)¹



*Cancer Services: 11.2

With the shift from the Sector to Programme based budgeting approach, the “Others” component entails new sub-programmes that were previously not indicated in the FY 2020/21. The sub-programmes include; health governance and regulation, health research, management and support services, governance and support services, governance and management services, curative and rehabilitative services, governance and support services among other sub-programmes. For instance, Budget for the FY 2021/22 does not have allocation for the sub-programme of Pharmaceutical and other supplies in contrast to the previous FY 2020/21.

FIGURE 4: PERCENTAGE CHANGE IN NOMINAL ALLOCATION BETWEEN FY 2020/21 AND 2021/22



¹ Others* include; Health Governance and Regulation; Health Research; Curative Health Services; Management and Support Services; Governance and Support Services; Governance and Management Services; Curative and Rehabilitation Services; among other sub-programmes.

CENTRAL GOVERNMENT VS LOCAL GOVERNMENT ALLOCATIONS BY ADMINISTRATION AND PROGRAMME FY 2021/22 (% OF HEALTH SECTOR BUDGET)

FIGURE 5A

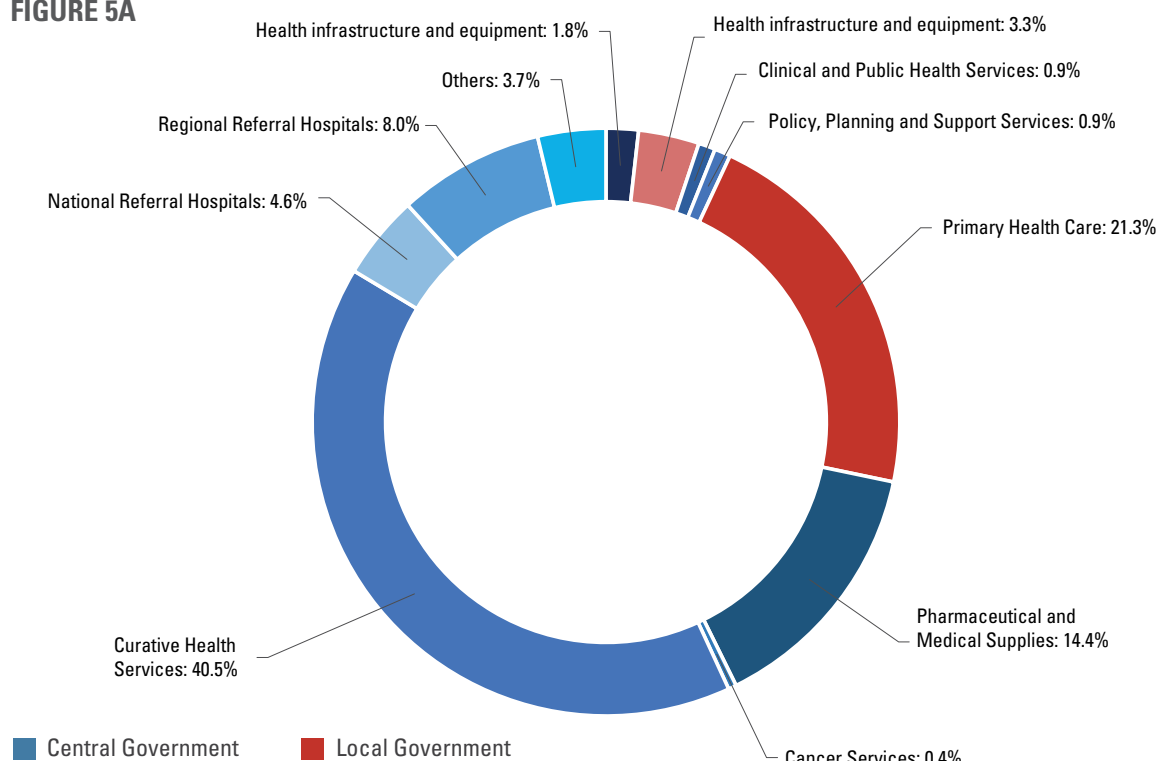
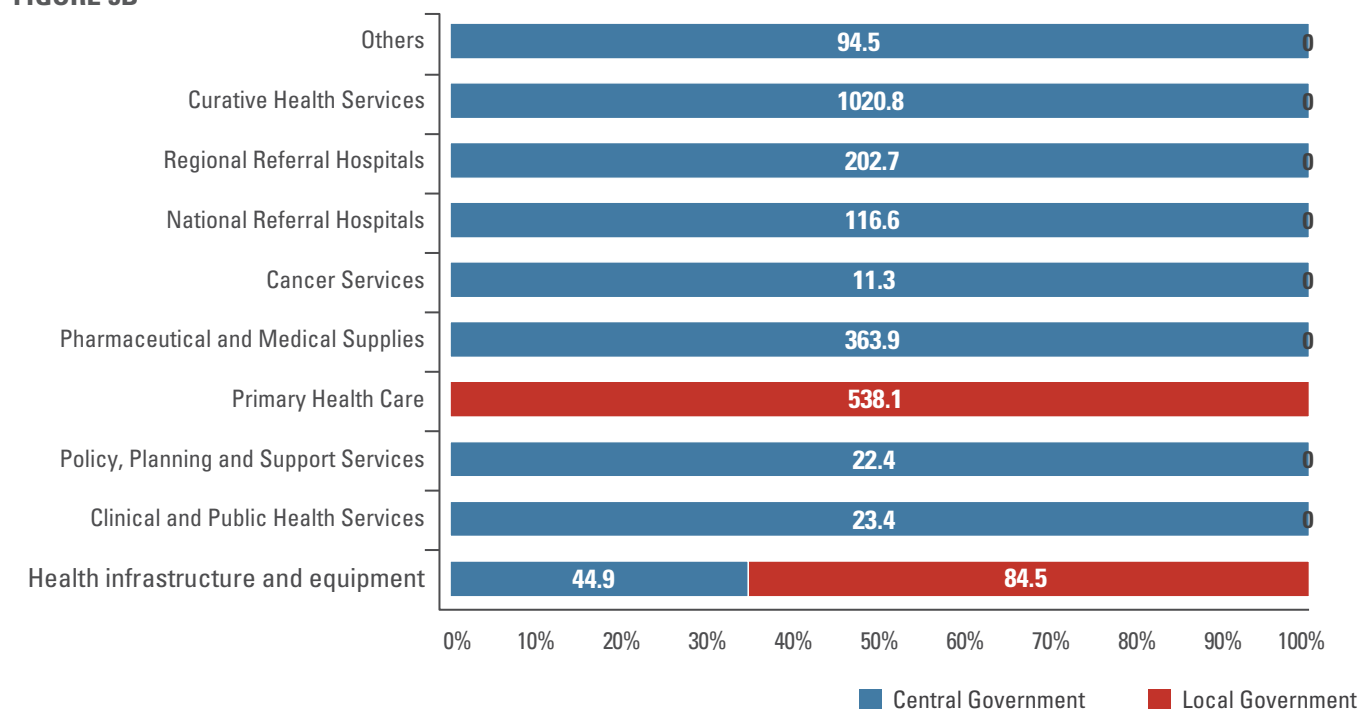


FIGURE 5B



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