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CDC began working in Uganda in 1991 and established a country office in 2000. CDC works with the Ministry of Health (MOH) and other partners to strengthen sustainable public health systems, reduce the burden of HIV and malaria, expand access to life-saving vaccines, and respond quickly to disease outbreaks and other health emergencies. CDC's work aims to protect the health of Americans and public health around the world.

KEY ACCOMPLISHMENTS



- Supported population and case-based surveillance to generate up-to-date data to drive evidence-based HIV, TB, and other health programs and policies.



- Supported over 85 laboratories in attaining international accreditation—up from only 7 in 2015



- Strengthened Uganda workforce capacity through training of 878 fellows from the Field Epidemiology Training Program (FETP) and 5 Lab Leadership Fellows



- Responded to more than 651 outbreak events, including outbreaks of monkeypox, Ebola, Marburg, Rift Valley fever, Crimean Congo hemorrhagic fever, yellow fever, COVID-19, influenza, measles, cholera, typhoid, meningitis, and anthrax



- Supported MOH in reaching more than 9,000 children with catch-up vaccinations in targeted districts and linked 90% of identified zero-dose children to immunization services.



- Provided life-saving HIV treatment to nearly 800,000 people living with HIV (with 97% achieving viral suppression), and supported more than 860,000 pregnant women with HIV testing services—linking 99% of those diagnosed to antiretroviral treatment to prevent mother-to-child transmission in 2024



- Uganda's third Population-based HIV Impact Assessment, launched in 2025, was fully implemented by Ugandan institutions—marking a major milestone in national ownership—and newly includes data on select noncommunicable diseases to support integrated health planning and accelerate progress toward ending the HIV epidemic

PROGRAM OVERVIEW

GLOBAL HEALTH SECURITY

Renowned for its expertise in disease detection, outbreak investigation, laboratory systems and emergency response, CDC works with the MOH and local partners to support activities aligned to the Global Health Security Agenda (GHSA) with a focus on strengthening the country's public health systems across the following core areas:

Laboratory systems strengthening

Since 2003, CDC has supported MOH to build a strong national laboratory network and expand diagnostic capacity. Today, this network delivers efficient, quality-assured diagnostic and surveillance services that guide patient care, strengthen surveillance, and support outbreak response. Established in 2011, Uganda's national integrated sample transport and referral network now moves more than 4 million samples annually for HIV and TB testing, disease monitoring, and outbreak response. In 2014, MOH launched centralized testing, which has grown from just 8 hubs to 100 hubs and six standby mobile units to expand timely access to testing across the country.

Additionally, the CDC-supported National Equipment Calibration Laboratory (NECL) has ensured uninterrupted testing by certifying more than 1,000 biosafety cabinets and calibrating a wide range of laboratory instruments across Uganda's diagnostic network. These efforts keep equipment accurate and reliable, strengthen infectious disease detection that protects U.S. health security, and safeguard laboratory staff and the environment.

Workforce development

In 2015, CDC collaborated with MOH and Makerere University School of Public Health to establish FETP to build skills in disease detection, data use, and outbreak response across all levels of the health system. The program, which trains public health professionals at national (advanced), regional (intermediate), and district (frontline) levels, is the only FETP in Africa that enrolls post-master's degree fellows. Building on the success of FETP, CDC collaborated with the Uganda National Institute of Public Health to launch the complementary Laboratory Leadership Program to strengthen laboratory management and leadership capacity. FETP trainees and alumni continue to play a vital role in Uganda's outbreak investigations and response, including during recent Ebola and monkeypox outbreaks.

Emergency response

In 2013, CDC supported MOH to establish Uganda's Public Health Emergency Operations Center (PHEOC) to coordinate preparedness, response, and recovery from public health emergencies. Over the past decade, the national PHEOC has managed more than 70 major public health emergencies (of international concern). To strengthen response capacity at the source, CDC supported MOH in establishing six of the 13 regional PHEOCs, all of which receive ongoing technical support from CDC. During the COVID-19 pandemic and recent Ebola and monkeypox responses, CDC and partners supported MOH to contain disease spread and strengthen emergency operations, cross-border surveillance, vaccination, laboratory, and workforce capacity. Since 2018, CDC has also supported disease surveillance in 45 border districts and 66 points of entry, enabling rapid detection and containment of major outbreaks, including Ebola (2019, 2022, and 2025)—all contained within 90 days with no cross-border spread—cholera (2024), and monkeypox (2025).

Integrated Health Information/Data Systems

CDC supports Uganda's MOH to strengthen national health information systems through digital solutions that promote integration, sustainability, and government ownership. With CDC support, the Ministry established a National Digital Health Data Warehouse to consolidate data across programs, provide real-time analytics, and support evidence-based decisions to improve patient care, surveillance, and overall health system performance.

HIV and TB

As a key implementer of the U.S. President's Emergency Plan for AIDS Relief (PEPFAR), CDC plays an essential role in the fight against HIV and TB. With unmatched scientific and technical knowledge and long-standing relationships with ministries of health, CDC is uniquely positioned to advance HIV, TB, and other global health security activities that keep Americans safe at home and abroad.

Through PEPFAR, CDC provides critical support to Uganda's public health infrastructure, improving the country's ability to prevent, detect, and respond to HIV, TB, and other infectious diseases and minimizing their risk from entering the U.S.

Uganda is one of five countries conducting the TB Guidance for Adaptable Patient-Centered Service (TB GAPS) operational research study. The research aims to identify better ways to screen, diagnose, and prevent TB in children and adults.

MALARIA

Malaria remains a major health challenge in Uganda, causing 37% of hospital admissions. CDC has supported MOH and partners to implement malaria prevention and control activities, including improving diagnosis and treatment, preventing malaria during pregnancy, and promoting community awareness. Since 2006, collective efforts to distribute 107,000 mosquito nets, spray 750,000 homes (protecting 2.7 million people), and provide 1.4 million rapid tests have helped to reduce child mortality by 53% and lower malaria prevalence among children under five from 42% to 9% (2019 Uganda Malaria Indicator Survey).

IMMUNIZATION

Working through MOH's Uganda National Expanded Program on Immunization (UNEPI), CDC helps to strengthen Uganda's immunization systems that protect children and communities from vaccine-preventable diseases. Through the Global Immunization Division, CDC supports routine vaccination, new vaccine introductions, and rapid outbreak response for diseases such as polio, measles, and Ebola. CDC also supports health worker training, data use, and community outreach to expand vaccine access, reach children who have missed routine vaccines, and respond quickly to outbreaks before they spread.

Uganda recently introduced the R21 malaria vaccine, marking a major step in reducing childhood illness and death. CDC supported the Ministry of Health in the vaccine's rollout. CDC also played a key role in introducing the MVA-BN monkeypox vaccine by providing technical support, data to guide vaccination strategies, last-mile distribution, and real-time monitoring—with close to 200,000 high-risk persons already vaccinated.

