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Presidential candidates' plan for the health sector

The election is happening at a time when the sector, which has been heavily reliant on foreign donations, is struggling with significant declines in donor funding.

BY TONNY ABET

As Uganda races towards the general election next week, the battle for State House has sharpened focus on the state of the country's health system that leaves millions, one illness away from poverty.

The election is happening at a time when the sector, which has been heavily reliant on foreign donations, is struggling with significant declines in donor funding. This declining funding, according to a recent report by Uganda NGO Forum, has caused notable disruptions in access to care and community health interventions.

With eight presidential candidates cleared by the Electoral Commission, *Daily Monitor* examined their manifestos and consulted health policy experts and activists to assess whether the proposed policies respond to the health needs of the population.

The contestants in the heated race include the incumbent President Yoweri Museveni of the National Resistance Movement (NRM), Opposition heavyweights Mr Robert Kyagulanyi of the National Unity Platform (NUP), Gen (rtd) Mugisha Muntu of the Alliance for National Transformation (ANT), and Mr Nathan Nandala Mafabi of the Forum for Democratic Change (FDC), among others.

In our assessment, all the candidates indicate increased investment in the health sector but NUP states a clear figure of 15 percent of the national budget going towards the sector as opposed to the current average of seven percent. All the candidates also promise a range of interventions aimed at increasing access to quality healthcare for the population.

Analysts speak out

Health policy experts and activists interviewed by this publication emphasise the urgent need for increased domestic financing for health and reduction of out-of-pocket expenditures.

Uganda's health budget currently stands at about five to seven percent of total government spending, far below the Abuja Declaration target of 15 percent, leaving public facilities understaffed, under-equipped, and frequently short of essential medicines.

The experts also highlight the need to improve governance and accountability in the sector, increasing access to quality care and prevention of diseases.

"Uganda is right now at crossroads," observed Prof Peter Waiswa, a health policy specialist at Makerere University School of Public Health, highlighting the urgency as the Sustainable Development Goals deadline looms just four years away. "We need to double or even triple our efforts."

Prof Waiswa warns against continued


MUGISHA MUNTU

The presidential candidate is focusing on constructing specialised kidney and cancer care centres, ensuring wellness and preventive healthcare, addressing maternal and newborn deaths, upgrading existing and constructing new facilities, increasing funding to health to increase accessibility, functionalising appropriate health insurance scheme, providing more drugs and equipment and employing more health workers.

Specifically, he wants to put in place specialised kidney and cancer care centres at the regional level, backed by dedicated policy and budgetary frameworks.

In his disease prevention and community health agenda, he intends to strengthen the Village Health Teams (VHTs) system and also address maternal and newborn deaths through deliberate investment and deployment of skilled health care workers and leveraging technology for health.

He also says his government will focus on the renovation, upgrading and construction of new facilities.

Mulago and Butabika national referral hospitals will be revamped into real centres of service delivery, research and excellence, thereby saving money spent on treatment abroad. He says the cancer institute will be equipped with the badly needed modern diagnostic technology.

donor dependency, noting that while Uganda has made progress relative to other Sub-Saharan African countries, much of it was driven by donor funding that is now declining.

"Donors once funded over 60 percent of the sector. That support is drying up post-Covid and amid global shifts such as US aid cuts," he says.

Currently, donor funding accounts for about 23 percent of the health sector budget, according to a report by the Uganda NGO Forum and the Centre for Health, Human Rights and Development.

Prof Waiswa adds that out-of-pocket


ROBERT KYAGULANYI

He is committed to increasing the allocation of the national budget to health from the current seven percent to 15 percent to ensure quality and accessibility for all.

He also promises to increase the number of doctors 16 times from the current number and triple number of other health workers, in addition to procurement of modern equipment for hospitals and helicopter ambulances. Mr Kyagulanyi says he will place a doctor and a fully equipped Health Centre III (HCIII) in every parish, prioritising underserved areas.

He also promises to procure helicopter ambulances for regional hospitals and positron emission tomography (PET) scan systems to enhance emergency and diagnostic care.

To address gaps in access to services, he says he will ensure every LC1 is within five kilometre range of a functioning health facility and equip and pay VHTs and empower them to manage preventable diseases at village level.

To embrace modernisation, he promises to launch nationwide telemedicine and mental health tele-counselling platforms to reach remote areas.

He also promises to build a national mental health facility in each of northern, eastern, and western Uganda and reform the National Drug Authority and Joint Medical Stores to fix chronic supply issues.

et payments push about 12 percent of households into catastrophic poverty annually, while inefficiencies and waste persist due to poor governance and management.

"The health sector is very wasteful. In hard times, efficiency must go hand in hand with better governance and accountability," he says.

Ms Labia Sumayah Musoke, the head of the right-to-health programme at the Initiative for Social and Economic Rights, criticised weak accountability mechanisms, stressing that the right to health must be treated as a fundamental right.


YOWERI MUSEVENI

The incumbent, in his 2026-2030 manifesto puts construction, renovation and upgrade of health facilities as his top priorities. He is also focusing on equipping facilities, recruiting more health staff, and preventing diseases.

He has also promised to support local research and health products development, completing Lubowa Hospital, fighting absenteeism and stopping theft of medicines.

Mr Museveni said he will construct HCIIIs in sub-counties without them, rehabilitate 40 HCIVs and provide them with theatres, 16 general hospitals, and eight regional referral hospitals.

He has also promised to upgrade Gulu, Mbale and Mbarama regional referral hospitals to national referral status and upgrade Tororo and Kapchorwa general hospitals to regional referral hospitals.

For the Greater Kampala Metropolitan Area, Mr Museveni plans to upgrade and equip several facilities to general hospital status, including Kisenyi, Kawala, Kiswa, Kisugu and Komamboga in Kampala; Nansana, Kira, Wakisio HCIV and Ndejje HCIV in Wakiso; and Goma in Mukono. Additionally, he plans to roll out e-health infrastructure across all health facilities to improve service delivery, curb medicine theft, and leverage technologies such as telemedicine and artificial intelligence.

"We have limited accountability mechanisms for the protection of the right to health in Uganda. So we need to see the government put emphasis on the rights just as they put on civil and political rights," she says.

Dr Jane Ruth Aceng, the minister of Health and a member of NRM party, says in the revised National Health Insurance Scheme (NHIS) Bill, the proposed membership contribution is Shs15,000 per person per month for the general population.

But Ms Musoke rejects the models, saying there are many Ugandans struggling to even put food on the table,


NANDALA MAFABI

He promises sustainable funding for health services by increasing government budget allocation to the health sector, removing all taxes and tariffs on vaccines and medical donations to public health facilities.

He promises to fast track implementation of the national health insurance scheme by establishing a contributory medical insurance fund of Shs20,000 per family per year.

He promises to upgrade district hospitals to regional referral hospitals and all HCIIIs upgraded to HCIVs and investing in public health education to promote a healthy lifestyle and regular screening to mitigate health risks.

Mr Nandala also promises improved access to mental health care, supporting herbal medicines research, recruiting more health workers and functionalising national health insurance scheme.

He also promises to legislate for and assign a percentage of national revenue from established and new extractive fields to the national health insurance fund. This is in addition to legislating for and assigning a percentage of the motor insurance premium to the national health insurance fund to cater for road traffic accident victims.

Mr Nandala says he will train more health personnel in specialised skills and recruit them.

and so may not afford the prescribed amount. "We need to appreciate the right to health as a fundamental right; the government has a responsibility and an obligation to see that everyone attains healthcare where and when they need it," she adds.

Ms Christabel Abewe, the health financing officer, at the World Health Organisation Uganda Country Office, says the country should find a way to functionalise the NHIS. But she says for this to work, the government should put in more money for those who cannot afford it.