

# Private sector engagement - Busoga

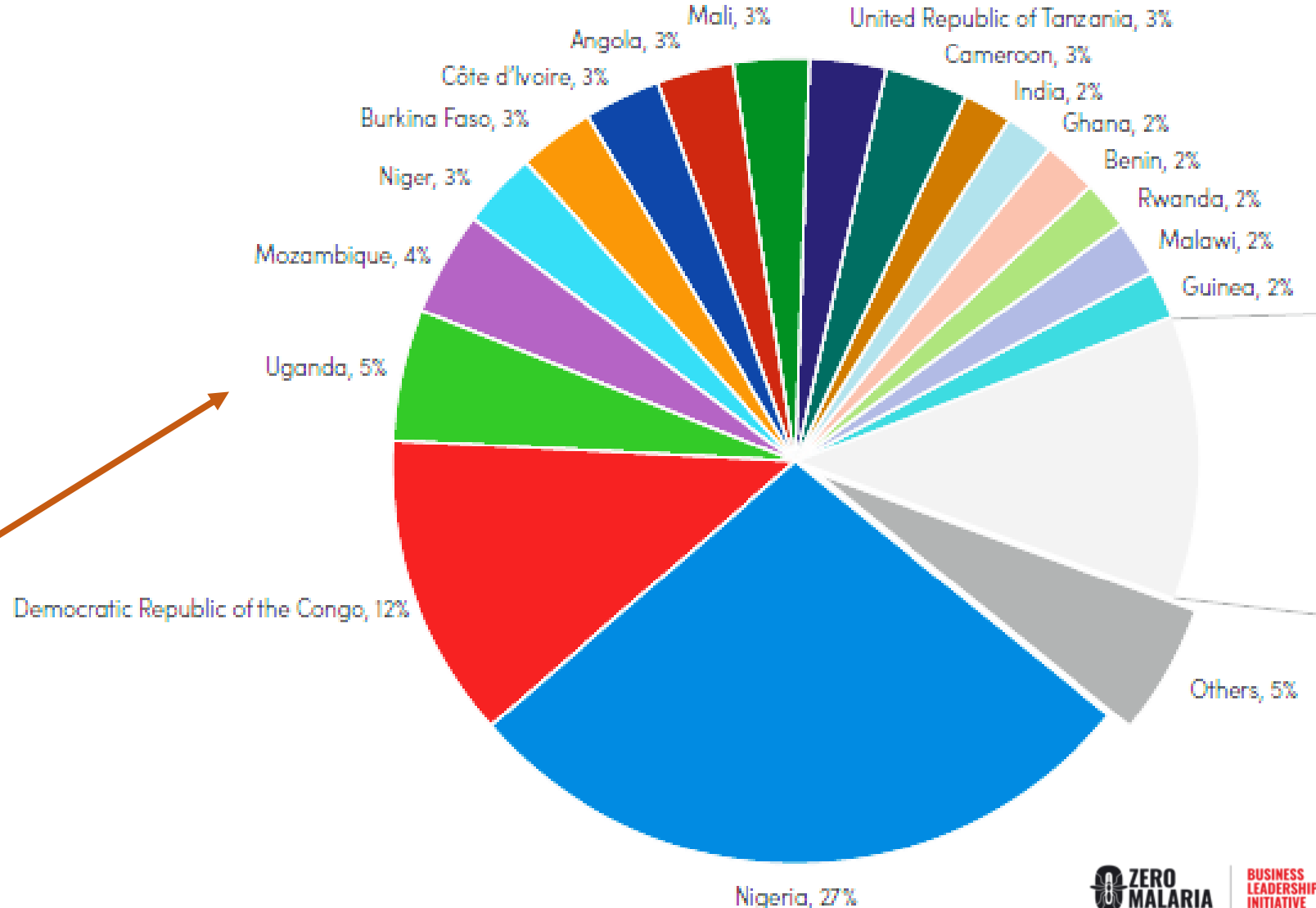


**BUSINESS  
LEADERSHIP  
INITIATIVE**



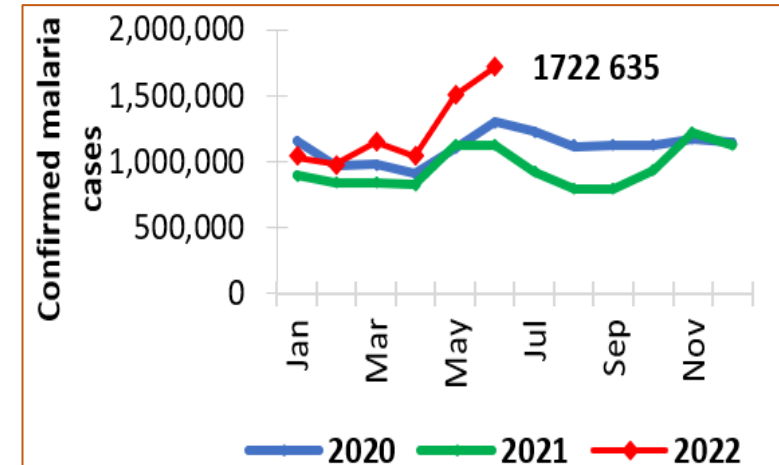
# Malaria in Uganda – overview

- In Uganda malaria is endemic & has a high infection rate *[one of the highest Entomological Inoculation Rates (EIR) in the world ie infective mosquito bites per person per year at **1,586** bites recorded in Apac District.]*
- Although a small country, Uganda has 5% or 3rd highest cases of malaria illness and 3% or 8th highest deaths globally.



# Malaria in Uganda: prevalence & prevention indicators

- Confirmed cases of malaria illness (2022) **13,000,000**
- Patient visits at health facilities due to malaria - **30-50%**
- Hospital deaths caused by malaria - **20%**
- Under 5 inpatient deaths caused by malaria - **27.2%**
- Population with access to Treated Nets - **60.6%**
- Big surge in deaths and severe malaria since Oct 2021, with reported resistance to medicines and parasite mutation



# Disease burden in Busoga (Jan-Jul, 2023)

TOP TEN CAUSES OF MORBIDITY IN BUSOGA REGION (ALL AGE GROUPS)			
No.	Disease	Number	% tage
1	Malaria	48302	36.2
2	Malaria in pregnancy	8188	6.1
3	Anaemia	6916	5.2
4	No Pneumonia - Cough and cold	5221	3.9
5	Septicemia	5207	3.9
6	Pneumonia	4748	3.6
7	TB	4640	3.5
8	Peptic Ulcer Disease	4061	3.0
9	Abortions	3565	2.7
10	Urinary Tract Infections (UTI)	3287	2.5
	<b><i>All other causes</i></b>	<b>39391</b>	<b>29.5</b>

TOP TEN CAUSES OF MORTALITY IN BUSOGA REGION (ALL AGE GROUPS)			
No.	Disease	Number	% tage
1	Malaria	178	12.8
2	Other Neonatal Conditions	74	5.3
3	Pneumonia	72	5.2
4	Hypertension	66	4.8
5	Anaemia	64	4.6
6	Animal bites - Domestic	60	4.3
7	Premature baby	51	3.7
8	Septicemia	33	2.4
9	Peptic Ulcer Disease	33	2.4
10	Neonatal Sepsis 0-7days	32	2.3
	<b><i>All other causes</i></b>	<b>723</b>	<b>52.1</b>

# Malaria in Busoga, a high burden area

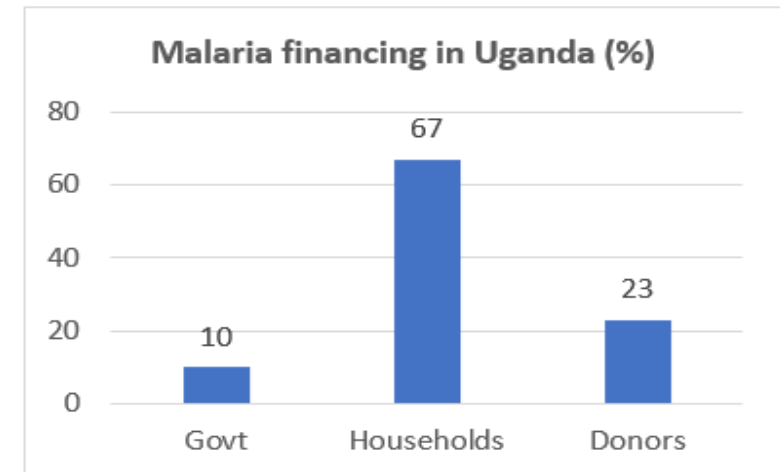
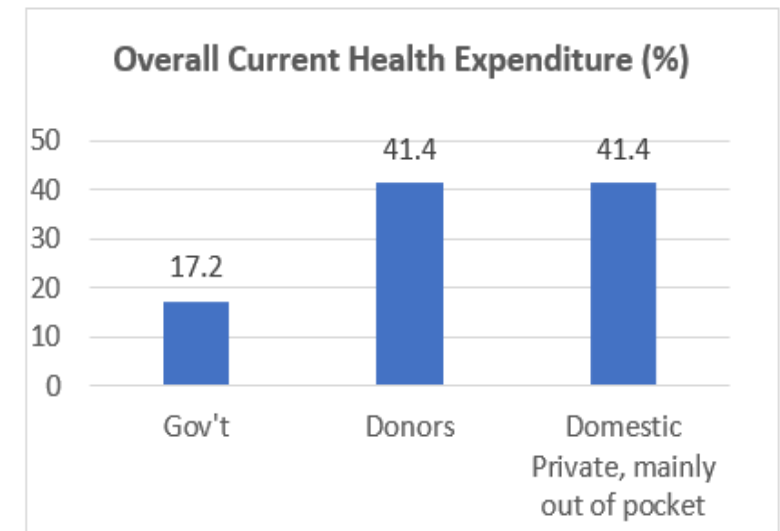
- Confirmed cases of malaria illness (Jan-Jul,2023) **911,029 (61.2%)**
- Patient visits at health facilities due to malaria – **1487622 (44.3%)**
- Hospital deaths caused by malaria – **12.8%**
- Under 5 inpatient deaths caused by malaria - **24.2%**
- Population with access to Treated Nets - **48.7%**

# Why malaria is a social-economic burden in Uganda

- **Health insurance is only 2% of population** mainly those in formal employment, the lucky few with employer-paid schemes, the rest pay out of pocket = impoverishing health expenditure
- The population below poverty line is 21.4%, and poor families **spend up to 25% of their household income** on malaria treatment
- Malaria **impairs up to 60% of children's learning ability**, contributing to an adverse Human Capital Index of 0.38 or just 38% national productiveness
- A malaria sufferer **loses 1-3 weeks of work per episode**, affecting productivity
- Malaria reduces GDP by 0.25-6%

# Health and malaria control funding in Uganda

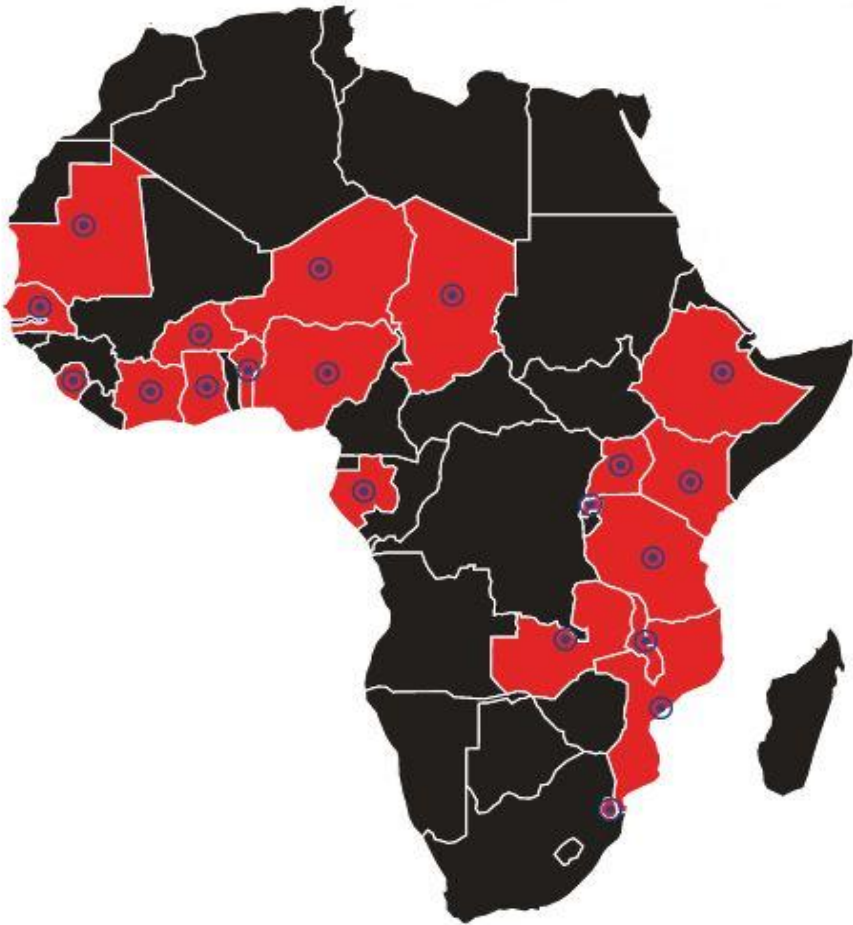
- National budget allocation to health reduced by average of 1.4 percentage points annually from 9.2% in 2017 to 5.1% in 2020 which is below 2001 Abuja Declaration commitment of 15%
- There is unsustainable reliance on donors & poor households on malaria funding
- There is inefficiency within malaria financing ie only 30% of funds are allocated to prevention (Vs treatment) contrary to global and national malaria control priorities = unbalanced curative focus



# Enter ZMBLI ...

- Led by **Ecobank Group** , **Speak Up Africa** and in collaboration with the **RBM partnership**
- Supports ***Zero Malaria Starts with Me*** campaign which was launched in 2018 by African Union.
- Aims to stimulate private sector engagement in fight against malaria.
- In Uganda being implemented under Malaria Free (MFU) Uganda in line with Uganda Malaria Reduction Strategic Plan (UMRESP)

# ZMBLI part of 'Zero Malaria Starts with Me' campaign



- ZMSWM is pan-African campaign mobilizing and empowering communities to **take ownership** over the fight to end malaria
- Launched by African Union Heads of State/Govt in July 2018 in Nouakchott, Mauritania.
- Now adopted and localised by over **20 countries** with different local adaptations

**MASS ACTION AGAINST MALARIA (MAAM)**

**A MALARIA FREE UGANDA IS MY RESPONSIBILITY**

H.E. THE PRESIDENT OF UGANDA \_\_\_\_\_  
Y.L. MUSEVENI

RIGHT HONOURABLE SPEAKER \_\_\_\_\_  
REBECCA KADAGA

RIGHT HONOURABLE PRIME MINISTER \_\_\_\_\_  
RUHAKANA RUGUNDA

HONOURABLE MINISTER OF HEALTH \_\_\_\_\_  
ACENG JANI

HONOURABLE CHIEF JUSTICE \_\_\_\_\_  
BART MAGUNDA KATUUREBE

**05-APRIL-2018**

Map of Uganda showing regions: Koboko, Yumbe, Adjumani, Karamoja, Karamoja, Karamoja, Karamoja.

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# ZMBLI Intervention Countries

- Phase 1 (launched in 2020-2021)



Senegal



Burkina Faso



Benin

- Phase 2 (launch in 2022)



Ghana



Uganda

# ZMBLI: Objectives and Outcomes

**PRIMARY OBJECTIVE : TO SUSTAIN/INCREASE FUNDING FOR NATIONAL MALARIA CONTROL THROUGH 2023**

## **INTERMEDIATE OBJECTIVES :**

1. To strengthen the network of private sector champions to advance malaria strategic objectives between 2021-23
2. To strengthen the capacity and coordination of the private sector advocacy coalition in support of cross-sector malaria agenda

## **SPECIFIC OUTCOMES**

1. Increased commitments and disbursements from the private sector for malaria control
2. Increased/sustained private sector participation in the implementation of national malaria strategies
3. Increased capacity of private entities on the tools to contribute to the fight against malaria
4. Improved national policies and coordination mechanisms for effective private sector contribution in the fight against malaria
5. Improved access & use of information on the impact of private sector contribution to the fight against malaria

# The case for private sector involvement in malaria



## Impact on the Economy :

- Malaria reduces GDP growth by up to 1.3%
- Staff absenteeism, reduced productivity, low purchasing power of clients.
- Companies have direct stake in malaria control.



## Contributing to Dev't

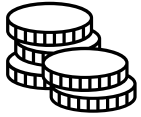
- Company contributions to malaria have a direct impact population well-being and social and economic development.
- Contributions strengthen company image and reputation



## New financing needed.

- New partners and funding sources are critical to meeting malaria reduction targets.

# HOW CAN COMPANIES CONTRIBUTE?



**1. Contributing financially** to the *Zero Malaria Fund* to help fill gaps in the national strategic plan. Companies can also partner with the Ecobank matching fund of (\$120,000).



**2. Contributing in-kind** to meet a specific need of the national strategic plan (e.g. mass communications, community sensitisation, transport/logistics, provision of malaria commodities).



**3. Implementing a programme for staff and their families** (e.g. provision of mosquito nets, access to rapid diagnostic tests, case management, awareness raising etc.).



**4. Implementing a malaria control project** in a geographically defined area according to the needs of the NMCP (e.g indoor residual spraying (IRS), mosquito nets, intermittent preventive treatment (IPT), awareness raising campaigns etc.)

# Examples of companies' contributions



## IAMGOLD - Senegal

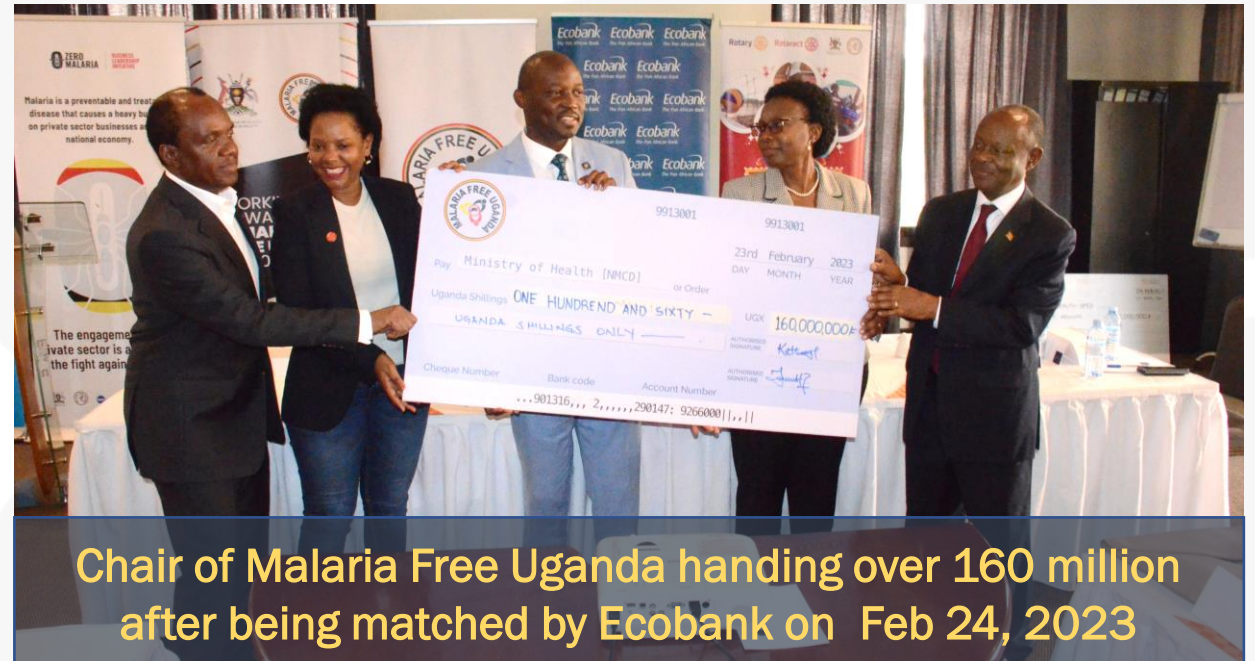
- Mining company operating in highest burden zone of Senegal (Kedougou)
- Implementing a malaria projet in zone of Saraya, including indoor residual spraying, door-to-door sensitisation & community mobilisations, provision of medications.
- Cost of projet : \$48,000



## Matching - Uganda

Carnival fundraiser Dec '22: UGX 80 million

Ecobank matching: UGX 80 million



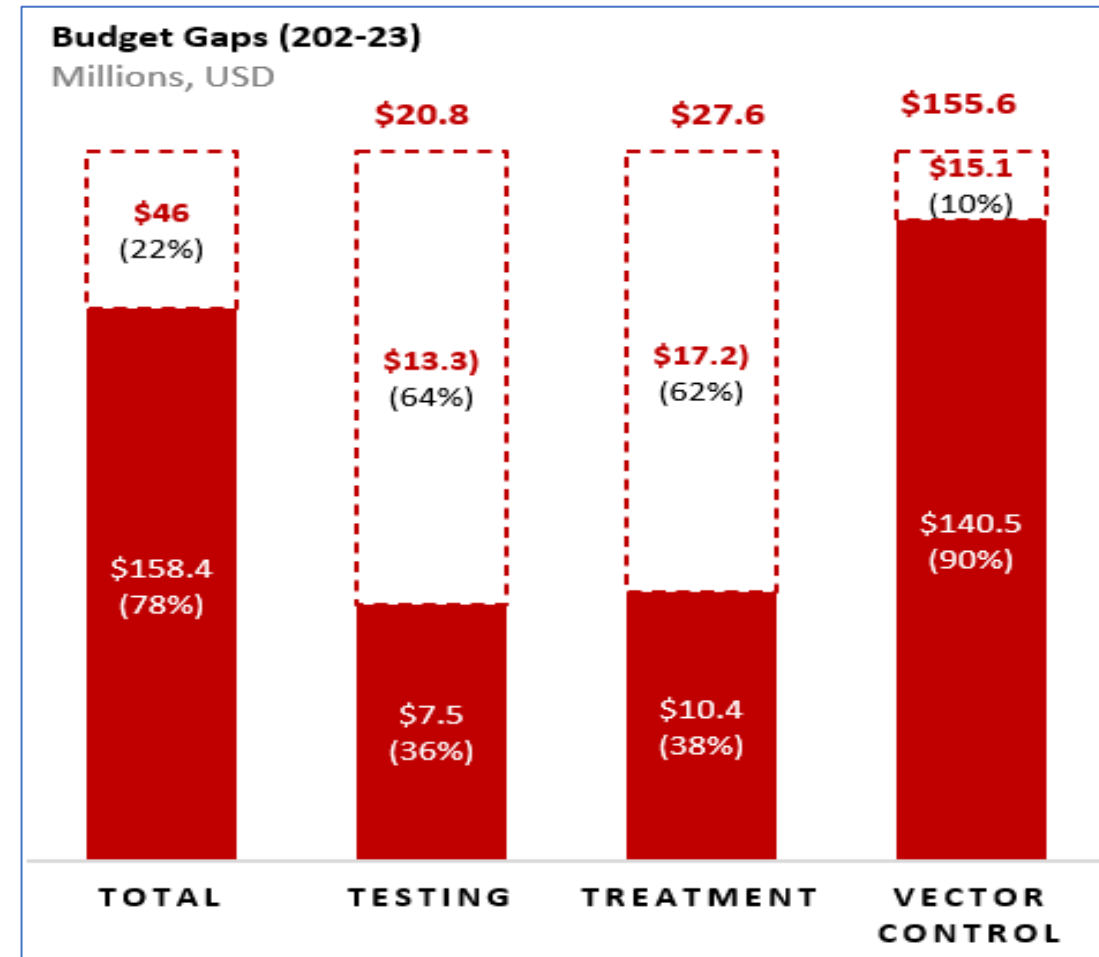
Chair of Malaria Free Uganda handing over 160 million after being matched by Ecobank on Feb 24, 2023

# Ressource gaps for malaria control in Uganda

ZMBLI is aligned with **Uganda Malaria Reduction Strategic Plan** (UMRESP 2021-2025)

UMRESP current priority areas are **testing, treatment and vector control**

Resource gap for this in 2023 is **\$46 million**.



# Thank you

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