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ACCELERATING SUCCESS: U.S. GOVERNMENT SUPPORT ENABLES DRAMATIC VACCINATION GAINS IN UGANDA

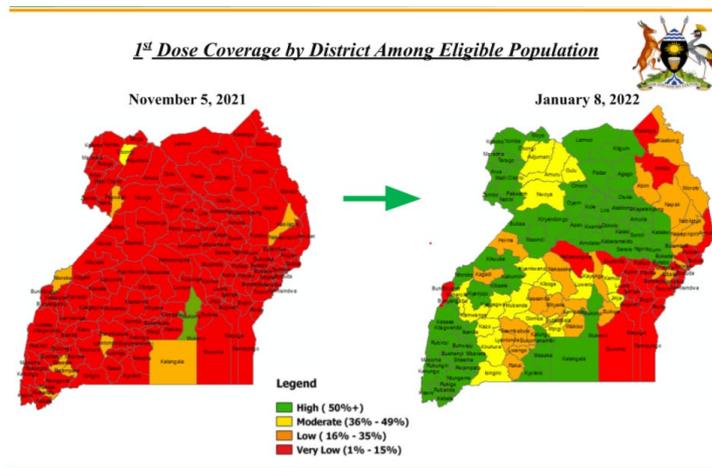
Eight million doses donated by the U.S. Government contribute to a jump in the country's national COVID-19 vaccine coverage from 14 percent to 47 percent in just six weeks



VACCINATED HEALTH WORKERS ENCOURAGE OTHERS TO GET THEIR SHOT.
CREDIT: USAID.

VACCINATION UPTAKE IN UGANDA

March 2021 marked the historic arrival of the first shipment of vaccines to Uganda, but delays due to the global vaccine shortage—compounded by overwhelmed health systems responding to a surge in Delta cases—left gaping vaccination coverage gaps for the majority of the country’s 44 million people. In the fall of 2021, the Government of Uganda (GOU) received several large shipments of COVID-19 vaccines from global donors, including eight million Pfizer doses from the U.S. Government (USG), which was by far the largest series of donations. The influx of vaccines—along with strong USG support for in-country distribution efforts—contributed to a significant increase in the country’s national COVID-19 vaccine coverage over the course of just six weeks (November 8 to December 22, 2021), jumping from 14 percent to 47 percent of eligible Ugandans receiving at least one dose.



GOVERNMENT OF UGANDA, MINISTRY OF HEALTH, UGANDA NATIONAL EXPANDED PROGRAM ON IMMUNIZATION, COVID-19 VACCINATION PERFORMANCE UPDATES. USED WITH PERMISSION FROM DIRECTOR PUBLIC HEALTH, PROVIDED 2 FEB 2022.

EXPANDING ELIGIBILITY AND DRIVING DELIVERY ACROSS THE NATION

From March 2021 to September 2021, the limited supply of COVID-19 vaccines in-country curbed Uganda’s initial vaccination efforts, leading to vaccine eligibility being limited to high-risk groups, such as health care workers, other frontline workers, the elderly, and individuals with comorbidities. Furthermore, initial efforts focused on a few select vaccination sites predominantly in urban areas, resulting in minimal resources deployed to rural and hard-to-reach locations. The nine focus regions had resources to support only five to ten health facilities each for the delivery of COVID-19 vaccinations to eligible populations, requiring people to travel long distances to where the vaccine was offered, often resulting in long lines at distribution centers and not enough vaccines.

To address distribution and eligibility challenges, the GOU, with significant support from USG (including USAID and the U.S. Centers for Disease Control and Prevention (CDC)), developed a comprehensive Accelerated Mass Vaccination Campaign (AMVC) to rapidly utilize the incoming supply of vaccines, pivoting the vaccination approach to be available to all adults, but still with specific focus on high-risk populations. Within USG’s interagency effort, USAID supported critical project management for the coordination, logistics, community mobilization, and strategic development of the mass campaign plans. As more vaccines became available, Uganda was able to expand eligibility from 4.8 million high-risk adults to 22 million persons 18 years of age and older.

VARIETY OF COVID-19 VACCINES POSE COORDINATION CHALLENGES

In the early fall of 2021, the influx of vaccines filled the supply gap Uganda was facing but introduced a new set of challenges: a complicated mix of six types of COVID-19 vaccines, including Pfizer, AstraZeneca, Moderna, Sinovac, Sinopharm, and J&J. Each vaccine requires specialized storage, handling, and administration requirements that placed additional strain on Uganda’s ultra-cold-chain capacity and the already sparse power infrastructure, and taxed the logistics and supply chain system already responsible for managing oxygen; personal protective equipment; routine vaccine and

medicines; and a competing polio vaccination campaign. Additionally, the varying expiration dates of the different batches coming into the country compounded the complexity. The GOU initially expected to receive AstraZeneca and had prepared the health workforce to handle that specific vaccine. Following the USG's announcement of the incoming Pfizer doses and the subsequent influx of additional vaccines, the GOU, with USAID funding, developed and deployed an extensive plan to ensure the health workforce was trained to deliver each type of vaccine. With support from global donors, Uganda doubled its ultra-cold-chain capacity to accept and deploy the incoming vaccines. With the Ministry of Health (MOH) in the lead, the USG (including USAID and CDC) supported a comprehensive effort involving all development partners and providing strategic and financial support to the GOU to organize and implement the rollout of the mass campaign, and ensuring effective coordination and deployment of the vaccines to get shots into arms.

DATA TO TRACK DOSES

In July 2021, the USG stood up an interagency Incident Management Team that included USAID and



A HEALTH WORKER ADMINISTERING A VACCINE IN KAMPALA. CREDIT: USAID/REGIONAL HEALTH INTEGRATION TO ENHANCE SERVICES IN EAST CENTRAL UGANDA ACTIVITY

the CDC to provide well-coordinated support to the MOH to manage the COVID-19 response and vaccination activities. With vaccines making their way across the nation through the AMVC, data management became essential to ensuring key populations were reached. With support from the World Health Organization (WHO) and USG, Ugandan officials integrated “EPIVAC” into their existing National Health Information System system. “EPIVAC”, is a critical tool developed by WHO to capture data needed to track COVID-19 vaccine roll-out. USG supported the training of workers to use the system, which is now utilized by all districts to enter COVID-19 vaccination data, including details on the individual being

vaccinated, type of vaccine administered, as well as the availability of vaccines in stock at the district level throughout the vaccination campaign. This robust system, paired with ongoing technical assistance from CDC and others on data analysis and usage, allows GOU to track and respond to evolving vaccination coverage gaps. Following the launch of the AMVC, five of nine regions exceeded 55 percent coverage for at least one dose of vaccine within six weeks, covering 47 percent of the eligible population. Prior to the implementation of EPIVAC, a basic tracking system was utilized to map vaccine coverage. By integrating EPIVAC into the National Health Information System, the GOU is now able to collect extensive detail by district, illustrating AMVC's wide-scale impact.

CALLING COMMUNITIES TO VACCINATION SITES

Leveraging existing USG relationships built over the past 60 years enabled Uganda to communicate key COVID-19 vaccine information through well-established and trusted networks at the district and community levels. Ugandans were eager to receive the vaccine; however, pockets of misinformation and lack of engagement with influential religious, political, and community leaders hampered the rollout of the campaigns in some districts. Interagency USG-supported platforms such as the President's Emergency Plan for AIDS Relief (PEPFAR); the Global Health Security Agenda (GHSA); Maternal and Child Health (MCH); and the Presidential Malaria Initiative (PMI) have built capacity for

service delivery at the district, community, and facility levels. These platforms continue to be leveraged throughout the COVID-19 response as known and trusted points of information gathering, including receiving information on COVID-19 prevention and working specifically with PEPFAR beneficiaries to ensure they are able to access the vaccine. In addition, the USG leveraged radio programs, community influencers, printed materials, and village health teams to generate vaccine demand. The systems, structures, and relationships established through USG investments in Ugandan health systems provided a strong foundation on which USAID has been able to layer additional activities specific to COVID-19. For example, through the Global Health Security investments, USAID's supply chain activity developed and deployed a nationwide electronic Emergency Logistics Management Information System (eELMIS), ensuring rapid information exchange between districts and the National Medical Stores, and adequate stock of lifesaving supplies such as vaccines, therapeutics, personal protective equipment, and oxygen at facilities. The eELMIS has become the foremost tool for inventory management and logistics in Uganda's COVID-19 response.



GLADYS KAHALWA RECEIVES A VACCINE AT A SITE NEAR HER HOME IN BUSOGA REGION.
CREDIT: USAID/REGIONAL HEALTH INTEGRATION TO ENHANCE SERVICES IN EAST CENTRAL UGANDA ACTIVITY

SUCCESS IS POSSIBLE WITH PARTNERSHIP AND SUPPORT

Uganda has emerged as a leader on the African continent for COVID-19 vaccination, demonstrating the power of partnerships and showcasing the possibility that exceptional change is possible with adequate and targeted investment. As a partner of the USG for over 60 years, Uganda, supported by the USG donation of over 12 million vaccine doses as of February 2022, is well-poised to reach the global goal of vaccinating 70 percent of the population by September 2022.