

CHE Research Summary 11

Getting more health from limited resources in Uganda

Written by [Sakshi Mohan](#)

Research Team: Sakshi Mohan, [Simon Walker](#), [Paul Revill](#) (Centre for Health Economics, University of York), [Freddie Sengooba](#), [Elizabeth Ekirapa Kiracho](#), Chrispus Mayora, [Aloysius Ssenyonjo](#) (School of Public Health, College of Health Sciences, Makerere University, Uganda), [Candia Tom Aliti](#) (Ministry of Health, Uganda).



All countries face the challenge of how to allocate their limited healthcare resources in order to improve the health of their population. This challenge is amplified in low- and middle-income countries, where healthcare budgets and health system capacities are highly constrained.

Trying to meet all the health needs of the population is not only infeasible but also not an efficient way to use resources. “Health Benefits Packages” (HBPs) can be used to identify which interventions offer the highest value for money and should be prioritised by the health system.

CHE researchers collaborated with researchers from Makerere School of Public Health and planning officers from the Ministry of Health to investigate this challenge in the context of Uganda. We used evidence on the health benefits generated by different health services and the resources needed to deliver them. This allowed us to generate a HBP for the country. The methodology ensured not only that the chosen services provided the biggest health impact for every dollar spent, but also that the current

budget for drugs and medical commodities, as well as the availability of health workers, would be sufficient to deliver the services to all those in need.

However, delivery of health services is not the only use of healthcare budgets. Money also needs to be allocated for expanding the capacity of the health system to meet the current and growing needs of the population. To answer the question of which health system inputs should be prioritised for further investments, we applied the same methodology to estimate the potential health impact from relaxing two of the constraints in the current health system in Uganda: the budget for drugs and medical commodities and health worker capacity. The analysis showed that investing in expanding health worker capacity - particularly nurses, pharmacists and nutrition staff - would provide the greatest value for money in Uganda at the current time.

The research offers valuable insights into strategic resource allocation for improved healthcare delivery and population health outcomes in Uganda. It is important that HBPs are reviewed regularly in order to respond to changes in health needs, medical technology, health system capacity and the availability of evidence.

The methodology used in this work can also be used to consider other objectives beyond health maximisation (such as equity) and other constraints (such as medical equipment), depending on policy objectives and the availability of evidence and data.

Read the full article in [Health Economics](#)

Funding for this study was provided by the UK Research and Innovation as part of the Global Challenges Research Fund (Thanzi la Onse MR/P028004/1).

September 2023