Malaria transmission occurs all year round in most parts of Uganda. The annual reported number of malaria cases in 2012 was 10,338,093 with 6,585 deaths.
Uganda ALMA Quarterly Report  
Quarter One, 2014

**Urgent Global Fund Update**
The Global Fund has announced that Uganda will receive US$ 421 million for HIV, tuberculosis, malaria, and health systems strengthening as the country allocation under the New Funding Model. The total figure includes all existing, unspent funds from previous rounds and the Interim New Funding Model. The Global Fund has determined the total allocation amount based on Uganda’s disease burden and income level, as well as several other factors. The malaria component is also allocated a specific proportion of the total, according to a formula developed by the Global Fund that takes into account several factors, including disease burden and previous disbursements. For Uganda this is calculated at US$ 142.1 million, including US$ 84.8 million of new resources. The allocations to the individual disease components are not fixed, and can be adjusted according to decisions made at country level. Uganda is urged to ensure that resources are allocated to malaria control from the overall Global Fund country allocation at a level that is sufficient to sustain the gains made in recent years.

**Progress**
Uganda has made steady progress in scaling-up malaria control interventions and has been successful in attracting resources through the Global Fund. Additionally, the country has made significant progress in policy issues including banning oral artemisinin-based monotherapies and introducing Community Case Management of malaria and pneumonia. The LLIN universal coverage campaign is currently rolling out country wide. The country has sufficient funding for the LLINs, ACTs, and RDTs needed in 2014. Uganda has improved PMTCT and DPT3 coverage and has a relatively high coverage of breastfeeding. The country has reduced the under-five mortality rate by 61% since 1990.

**Impact**
The annual reported number of malaria cases in 2012 was 10,338,093 with 6,585 deaths.

**Key Challenge**
- Weak monitoring and surveillance make it difficult to track progress and identify program weaknesses.

**New Key Recommended Action**

<table>
<thead>
<tr>
<th>Objective</th>
<th>Action Item</th>
<th>Suggested completion timeframe</th>
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<tbody>
<tr>
<td>Address funding</td>
<td>Ensure the NFM concept note is submitted by Q3 2014 and ensure that resources are allocated to malaria control at a level that is sufficient to sustain the gains made in recent years</td>
<td>Q3 2014</td>
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