

Policy Brief

Advancing Self-Care in Uganda's Health System

Background

Self-care is increasingly recognized as a vital component of health systems. The World Health Organization (WHO) defines self-care as “the ability of individuals, families and communities to promote health, prevent disease, maintain health, and cope with illness and disability with or without the support of a healthcare provider”. WHO released its first consolidated guideline on self-care interventions in 2019 (focused on sexual and reproductive health and rights) and updated it in 2022 to encompass health and well-being broadly. These guidelines emphasize that self-care interventions are critical for achieving universal health coverage (UHC). Currently, an estimated 3.6 billion people – half the world’s population – lack access to essential health services, and WHO recommends self-care as a key strategy to bridge this gap. By empowering people to take charge of their own health, self-care approaches can expand coverage, improve health outcomes, and relieve overburdened health facilities.

Uganda has been at the forefront of adopting self-care in policy and practice. In 2020, the Ministry of Health (MOH) established a multi-stakeholder Self-Care Expert Group to adapt the WHO guidelines to Uganda’s context. With support from partners, Uganda developed a National Self-Care Guideline for Sexual, Reproductive and Maternal Health, which was officially launched in 2024, making Uganda one of the first countries in the world with a national self-care policy framework. Even before the guideline launch, Uganda piloted several self-care interventions over the past five years – including self-injectable contraceptives (DMPA-SC), HIV self-testing, and HPV self-sampling – demonstrating the feasibility and benefits of these approaches. The focus now is on scaling up these interventions and integrating self-care into health services nationwide.

This policy brief, issued by WHO Uganda in collaboration with the Ministry of Health, is intended for a wide range of stakeholders – government health officials, district leaders, development partners, and cultural and religious leaders – who are gathering for an orientation on self-care interventions. It provides key messages on the importance of self-care and outlines recommendations to accelerate implementation. Strengthening self-care in Uganda’s health system will require both technical action and advocacy, and the commitment of all stakeholders is crucial to success.

Key Messages

- **Self-care is a powerful tool to expand healthcare access and quality.** It enables individuals to take proactive steps in maintaining their health and managing certain conditions, which in turn eases the burden on overstretched health facilities. WHO identifies self-care interventions as a critical path to reach UHC because they give people more control over their health and extend services to those who might otherwise be left behind. Importantly, self-care complements the healthcare system – it does not replace professional medical care, but rather works alongside it to improve health outcomes.
- **Self-care interventions cover a broad range of health needs.** These interventions include, among others, self-administered contraception (such as self-injectable birth control), self-testing or home-based screening for diseases (e.g. HIV, COVID-19, and HPV testing kits), routine monitoring of chronic conditions (like checking blood pressure or blood sugar at home), and self-management of mental health (techniques to cope with stress or anxiety). Such tools and practices empower people to prevent illness, detect problems early, and manage their well-being with or without immediate clinical supervision. In times of health system disruptions – for instance, during the COVID-19 pandemic or other emergencies – self-care options have proven invaluable in providing continuity of care when facility-based services are disrupted.
- **Uganda's commitment to self-care is strong and growing.** Uganda is among the pioneers in institutionalizing self-care – having established national guidelines and begun integrating self-care into health sector plans and policies. The government's leadership, through the Ministry of Health, has been instrumental in driving this agenda. The National Self-Care Guideline aligns with global best practices and ensures that self-care is people-centered and safe. It emphasizes equity, aiming to reach women, youth, and vulnerable groups with the information, supplies, and support they need to practice self-care safely. Ongoing efforts by the MOH and partners – including trainings for health workers, community awareness campaigns, and integration of self-care indicators into health information systems – are laying the groundwork for nationwide scale-up.
- **Multi-stakeholder engagement is essential for successful implementation.** No single organization or sector can advance the self-care initiative alone. Healthcare providers, policymakers, development partners, civil society, and community leaders each have a critical role. A coordinated approach ensures that policies are translated into action on the ground – for example, that health workers are prepared to support patients' self-care, communities are educated about new self-care options, and necessary commodities are available and affordable. Broad partnership also helps address cross-cutting challenges (such as combating myths or ensuring quality standards) through shared responsibility. The orientation of stakeholders on self-care – including district officials and cultural and religious leaders – is part of building this collaborative movement. Together, these stakeholders can create an

enabling environment where self-care practices are widely accepted, properly supported, and sustainably integrated into Uganda's health system.

Recommendations

To fully realize the potential of self-care in Uganda, the following actions are recommended for key stakeholders:

- **Ministry of Health (National Leadership):** Provide strong leadership and oversight for the rollout of self-care interventions. This includes integrating self-care into national health strategies, policies, and budgets so that it remains a priority area. Ensure essential self-care commodities (e.g. family planning supplies, HIV self-test kits, and chronic disease monitoring tools) are readily available and affordable at all levels of the health system. Incorporate self-care indicators into the national health management information system to track progress, and regularly review implementation outcomes to inform policy decisions. By institutionalizing self-care in national plans and monitoring, MOH will set the tone for sustained commitment and accountability.
- **District Leaders and Local Governments:** Champion self-care at the district and community level. Each district health management team should integrate self-care activities into its annual work plans and budgets, ensuring resources are allocated for community sensitization, health worker training, and procurement of necessary self-care commodities. Designate a District Self-Care Focal Person (as outlined in the national guideline) to coordinate stakeholders and initiatives on self-care in the district. Monitor and report on self-care uptake through existing health performance review mechanisms, which will promote accountability for results and allow sharing of best practices between districts. By prioritizing self-care in local health agendas, district leaders will bring services closer to communities and address local needs more effectively.
- **Development Partners and Implementing Agencies:** Align programs and resources to support Uganda's self-care agenda. International agencies, donors, and NGOs should provide technical and financial assistance to scale up self-care interventions across the country. This support can include funding and expertise for training health workers on the new self-care guidelines, developing and disseminating user-friendly educational materials, and introducing innovative self-care solutions (including digital health tools) in communities. Partners are also encouraged to document and share data, lessons, and best practices from self-care pilot projects to inform national scale-up efforts. Such collective support is critical to build the evidence base for self-care and to maintain momentum. By working in concert with the MOH and districts, development partners will help ensure that self-care initiatives are well-resourced, evidence-driven, and effectively integrated into the health system.

- **Cultural and Religious Leaders:** Leverage your influence and respected positions to foster community acceptance of self-care practices. We urge cultural institutions and faith-based leaders to incorporate positive health and self-care messages into sermons, community gatherings, and teachings. Your endorsement of practices such as family planning, HIV testing, antenatal care, chronic disease management, proper nutrition and mental wellness can go a long way to dispel myths and reduce stigma in communities. Emphasize that caring for one's own health is a virtue and in line with family or faith values – for example, using preventive health tools or seeking support for mental health is responsible and acceptable, not a sign of weak faith. By openly supporting self-care initiatives and even leading by example (for instance, organizing community health days or encouraging community members to utilize available self-care services), cultural and religious leaders can significantly boost public trust and uptake of self-care. In partnership with health workers, your voices will help normalize self-care as a part of everyday life and encourage more individuals to proactively look after their health.

By acting on these recommendations, Uganda's stakeholders will collectively strengthen the health system through self-care. Empowering individuals and communities with knowledge, tools, and support for self-care not only improves health outcomes but also contributes to broader development goals. As we move forward together, the commitment of all – from the national level to the village level – is essential. Embracing self-care is a timely and strategic investment in Uganda's journey toward healthier communities and universal health coverage.

References

- Ministry of Health [Uganda]. (2024). *National Guideline on Self-Care Interventions Health and wellbeing*. Ministry of Health, Kampala.
- World Health Organization. (2018). *WHO guideline on health policy and system support to optimize community health worker programmes*. World Health Organization, Geneva.
- World Health Organization. (2019). *WHO consolidated guideline on self-care interventions for health: sexual and reproductive health and rights*. World Health Organization, Geneva.
- World Health Organization. (2020). *Community engagement: A health promotion guide for universal health coverage in the hands of the people*. World Health Organization, Geneva.
- World Health Organization. (2022). *WHO guideline on self-care interventions for health and well-being (2022 revision)*. World Health Organization, Geneva.
- World Health Organization & United Nations Children's Fund (UNICEF). *Operational Framework for Primary Health Care: Transforming vision into action*. World Health Organization, Geneva.