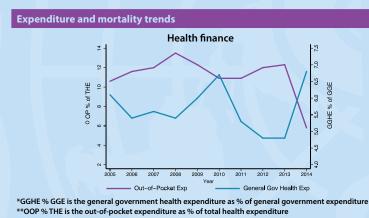
Oman: Health Systems Profile

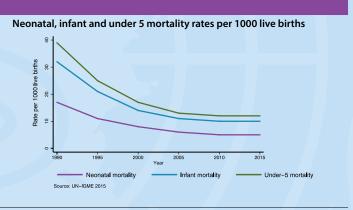


WHO-EM/PHC/141/E

Health status (2015)			Proportional mortality (% of total deaths, all ages, both sexes)
Life expectancy at birth in years	total	76.6	
	males	75.0	
	females	79.2	
Maternal mortality ratio per 100 000 live births	total	17	
Communicable diseases (2015)			Injuries 15%
Tuberculosis notification rate per 100 000 (2014)		8.5	Cardiovascular
Incidence rate of malaria per 1 000 population			diseases
Number of newly reported HIV cases		142	Communicable, maternal, perinatal
			and nutritional
Behavioural risk factors			conditions 17%
Estimated prevalence (%) males	females	total	
Current tobacco smoking (2014)*	1.0	13.5	
Insufficient physical activity (2010)			Other NCDs Cancers
			Other NCDs 13% Cancers 10%
Metabolic risk factors			Diabetes
2014 estimated prevalence (%) males	females	total	10%
Raised blood pressure		17.2	Chronic respiratory diseases
Raised blood glucose		16.4	2%
Overweight		67.4	

30.9





Health system: selected coverage interventions		Health system: finance (2014)	
Antenatal care visits (4+ visits) (2014)	76.5	General government expenditure on health as % of general government	
Measles immunization coverage among 1-year-olds (2015)	100.0	expenditure	6.8
Treatment success rate of new bacteriologically confirmed TB cases (2013)	96.0	Out-of-pocket expenditure as % of total health expenditure	5.8
DTP3-containing vaccine / Pentavalent coverage group among children under 1		Per capita total health expenditure at exchange rate (US\$)	675
year of age group (2015)	99.0		

Health system: workforce (2015)	Health system: information (2012-2015)			
Health workforce per 10 000 population				
Physicians	21.4 Percentage of births	is registered	97.0	
Nurses/midwives	46.3			
Dentists	2.8 Percentage of death	ths registered	85.0	
Pharmacists	5.8			

Health system: medicines and medical devices (2011)			Health system: service delivery (infrastructure) (2015)	
Availability of selected essential medicines and medical products in health facilities (%)	public private	96.7 70.3	Primary health care facilities per 10 000 population	1.2
Number of scanners (in public facilities) per million population ^a	CT MRI	6.9 4.4	Hospital beds per 10 000 population	15.6

 $[\]dots$ No data available a Computed tomography (CT) and Magnetic resonance imaging (MRI)

Obesity

Please note the data sources are in the attachment

^{*} Age-standradized estimated

Health System Strengths, Weaknesses, Opportunities, Challenges, and Priorities - Oman 2016

Strengths

- Sustained investment in economic development and highest level of political commitment to health
- Good health infrastructure based on PHC with near universal access
- Well-established evidence-based 5-year planning process involving all levels of health personnel
- Existence of a National drug policy, a commitment to rational use of medicines and good governance, an efficient government supply system and general availability of essential medicines/ technologies at all levels of care
- Well-established health information system including a strong surveillance system and a commitment to research

Weaknesses

- High dependence on non-nationals, particularly in specialized areas
- Gaps and maldistribution of health personnel (in actual numbers and competencies/skill mix)
- Performance/accountability measures (i.e., extent of coverage, compliance to treatment, quality outcomes, etc.) needs improvement
- Health services, particularly at 2nd and 3rd level, are provider friendly rather than patient-friendly
- Weak referral system with sub-optimal distribution of resources (both human resources as well as equipment)
- Limited capacity for pharmacovigilance (human resources, regulatory framework, information management, etc.)

Opportunities

- Health sector involved in setting National Development Strategy (2040)
- Commitment to long-term planning (Health Vision 2050 has been finalized and approved), strengthening and expanding health service provision
- Expansion in the production of various cadres of health professionals both nationally and internationally and with it possibility to promote the "professionalization" of a various cadres of health workers
- Potential to build on existing examples of intersectoral collaboration/partnership (governmental and private)
- · Commitment to decentralization
- Establishment of a Central Public Health Laboratory and commitment to ensuring implementation of IHR
- Building on efforts to strengthen public health emergency preparedness and response system
- Development of a Medical City will enhance advanced specialized health care delivery

Challenges

- Demographic and epidemiological transition
- Limited non-health involvement in health to address social determinants of health and the changing behaviors and lifestyles
- Strengthening human resource capacity to meet increasing demand for better quality of health care services
- · Health system finance sustainability
- Growing unregulated private health care sector
- Awareness on the strategic planning process and up-to-date health system thinking requires more attention
- Sub-optimal productivity in service delivery based on available resources
- Co-ordination between levels of care and service provision as well as between institutions needs strengthening

Priorities

- Restructuring health institutions and organization chart of the Ministry of Health (within Health Vision 2050)
- · Strengthening human resource capacity including restructuring health professions (quantity and quality)
- Financing options for the health system for ensuring long term sustainability
- · Strengthening capacity in formulating, monitoring and evaluating policies and plans including regulating the private health care sector
- Developing an appropriate mix and distribution of skilled health professionals based on a national human resource development plan and career path for all cadres of health professionals
- Expanding health information and research system to monitor disease trends, risk behaviors and health system performance at national and regional levels and ensure evidence-based policies and plans
- · Establishing a national health accounting system including improving allocation of resources based on need
- Developing a quality management/health performance system to ensure provision of quality services at all levels of care

