Oman: Health Systems Profile

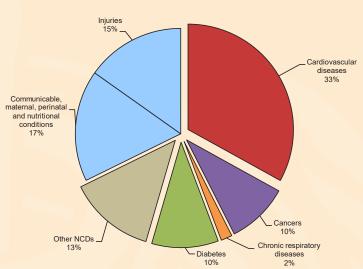


Health status (2016)		
Life expectancy at birth in years	total	77.0
	males	75.3
	females	79.5
Maternal mortality ratio per 100 000 live births (2015)	total	17

Communicable diseases (2017)	
Tuberculosis notification rate per 100 000 population	6.0
Incidence rate of malaria per 1 000 population	
Number of newly reported HIV cases	150



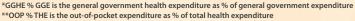
	Metabolic risk factors			
Ī	Estimated prevalence (%)	males	females	total
	Raised blood pressure (2015)			24.8
	Raised blood glucose (2014)			13.5
	Overweight (2016)			62.6
	Obesity (2016)	•••		27.0



Proportional mortality (% of total deaths, all ages, both sexes)

Total deaths: 9,500 NCDs are estimated to account for 68% of total deaths.

Expenditure and mortality trends Health finance 0.9 2007 2010 2011 2012 Out-of-Pocket Exp - General Gov Health Exp *GGHE % GGE is the general government health expenditure as % of general government expenditure



Neonatal, infant and under 5 mortality rates per 1000 live births	
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1980 1985 2000 2005 2010 2015 2017 Year Neonatal mortality Infant mortality Under-5 mortality Source: UN-HGME 2016	

Health system: selected coverage interventions		Health system: finance (2016)	
Antenatal care visits (4+ visits) (2017)	77.1	General government expenditure on health as % of general government	
Measles immunization coverage among 1-year-olds (2017)	100.0	expenditure	6.7
Treatment success rate of new bacteriologically confirmed TB cases (2016)	51.0	Out-of-pocket expenditure as % of total health expenditure	6.4
DTP3-containing vaccine / Pentavalent coverage group among children under 1		Per capita total health expenditure at exchange rate (US\$)	636
year of age group (2017)	100.0		

Health system: information (2007-2016)
Percentage of births registered
Percentage of deaths registered 73.0
Universal Health Coverage
UHC index (2017) 72.0

Health system: medicines and medical devices (2013)			Health system: service delivery (infrastructure) (2015)	
Availability of selected essential medicines and medical products in health facilities (%)	public private		Primary health care facilities per 10 000 population	5.1
Number of scanners (in public facilities) per million population ^a	CT MRI	7.2 1.6	Hospital beds per 10 000 population	14.7

^{...} No data available ^a Computed tomography (CT) and Magnetic resonance imaging (MRI)

Please note the data sources are in the attachment

^{*} Age-standradized estimated

Health System Strengths, Weaknesses, Opportunities, Challenges, and Priorities - Oman 2018

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	

- 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
- 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), 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

- Strengthening human resource capacity including restructuring health professions (quantity and quality)
- Controling NCD burden and their risk factors
- 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

