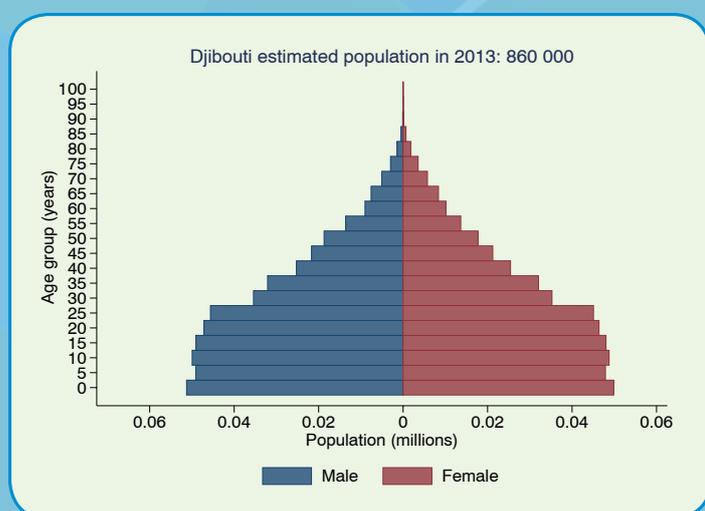




## Universal health coverage

Primary health care facilities per 10 000 population (2013)	0.6
Hospital beds per 10 000 population (2012)	14
Modern contraceptive prevalence rate (2015)	23
Antenatal care visits (4+ visits)	...
Measles immunization coverage among 1-year olds (%) (2016)	75
Tuberculosis treatment success rate of new bacteriologically confirmed cases (%) (2015)	85
DTP3-containing vaccine / Pentavalent coverage among 1-year olds (%) (2016)	68
General government expenditure on health as % of GDP (2014)	6.8
General government expenditure on health as % of total government expenditure (2014)	14.1

## Estimated population in 2013



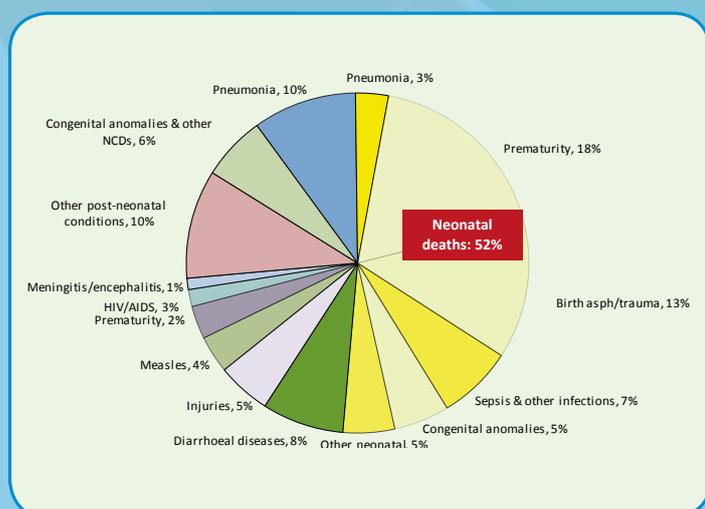
## Selected determinants of health

Population living in urban areas (%)	...
Annual GDP growth (%) (2015)	6.5
Number of refugees <sup>a</sup> (2016)	17 678
Number of internally displaced persons <sup>b</sup> (2016)	0

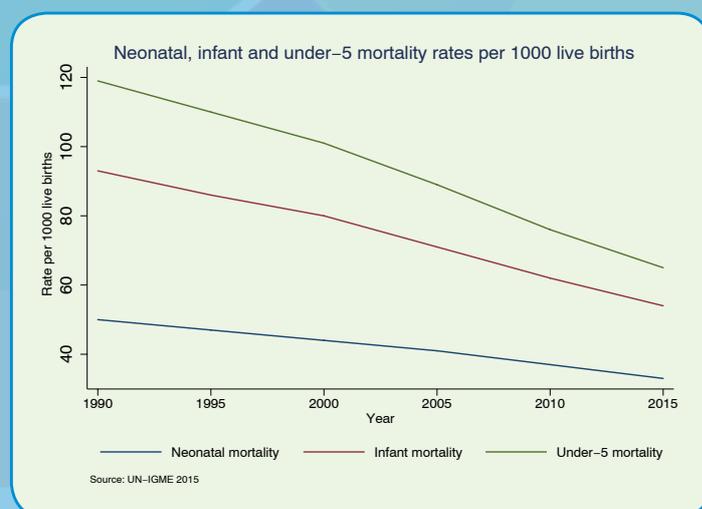
<sup>a</sup> Including persons forcibly displaced from their country of origin due to persecution, war, or violence, as recognized and reported by UNHCR.

<sup>b</sup> Including persons forcibly displaced due to conflict, remaining in their own country, recognized and reported by UNHCR.

## Distribution of causes of death among children aged <5 years (%)



## Neonatal, infant and under-5 mortality rates per 1000 live births



# Selected SDGs health-related indicators\*

## 1 NO POVERTY

Population below the international poverty line % ...

Proportion of employed population below the international poverty line (ILO estimate, 2016)

Male %	...
Female %	...

## 2 ZERO HUNGER

Children under 5 who are (2013)

stunted	%	29.7
wasted	%	17.8
overweight (2012)	%	8.1

## 4 QUALITY EDUCATION

Literacy rate (15-24 years)

Total %	...
Male %	...
Female %	...

Net primary school enrolment ratio per 100 school-age children (2014)

Total ratio	59
Male ratio	63
Female ratio	65

## 5 GENDER EQUALITY

Demand for family planning satisfied with modern methods (UN Population Division estimate, 2015)

%	44.2
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## 6 CLEAN WATER AND SANITATION

Access to improved drinking water (World Health Statistics, 2015) % 90

Access to improved sanitation facilities (World Health Statistics, 2015) % 47

## 8 DECENT WORK AND ECONOMIC GROWTH

Unemployment rate (15+ years) (ILO estimate, 2012)

Total %	...
Male %	...
Female %	...

## 11 SUSTAINABLE CITIES AND COMMUNITIES

Concentrations of fine particulate matter (PM2.5) (WHO/CEHA, 2014)

Total	39.0
Urban	46.0

## 16 PEACE, JUSTICE AND STRONG INSTITUTIONS

Estimated direct deaths from major conflicts (per 100 000 population) (WHO Global Health Observatory, 2011-2015) 0.1

\*Because of the scarcity of data, the above presentation is limited. Where available, information is obtained from the Regional Core Indicators Programme

# Key health indicators

Indicator	Male	Female	Total
Life expectancy at birth in years (2015)	61.8	65.3	63.5
Maternal mortality ratio (deaths per 100 000 live births) (UN-MMEIG 2015 estimate)	—	—	229
Neonatal mortality rate (deaths per 1000 live births) (UN-IGME 2015 estimate)	...	...	33
Infant mortality rate (deaths per 1000 live births) (UN-IGME 2015 estimate)	...	...	54
Under-five mortality rate (deaths per 1000 live births) (UN-IGME 2015 estimate)	...	...	65
Tobacco use among persons 15+ years (%) (2015)	18.6	1.1	9.9
Overweight (18+ years) (%) (2014)	...	...	31.9
Obesity (18+ years) (%) (2014)	...	...	9.6
Raised blood pressure among persons 18+ years (%) (2014)	...	...	24.4
Raised blood glucose among persons 18+ years (%) (2014)	...	...	8.7
Raised cholesterol among persons 18+ years	...	...	...
Mortality between ages 30 and 70 from cardiovascular disease, cancer, diabetes, chronic respiratory disease per 10 000 (2015)	...	...	19
Cancer incidence per 100 000 (2012)	...	...	92.7

**Universal health coverage (UHC)** means provision of quality services to everybody without discrimination of any kind and without exposing people to financial hardship. UHC is one of the targets of Sustainable Development Goal 3, and attaining UHC will also contribute directly or indirectly to achieving the other SDGs. Achieving UHC means ensuring healthy lives and promoting well-being for all at all ages with explicit affirmative action for vulnerable populations including refugees and migrants. Thus, disaggregated data will be necessary to assess and address inequities in health. UHC requires inter-sectoral action. All countries can and must advance towards UHC by year 2030, if not earlier.

## 3 GOOD HEALTH AND WELL-BEING



ENSURE HEALTHY LIVES  
AND PROMOTE WELL-BEING  
FOR ALL AT ALL AGES

## Voluntary National Review

N/A

## National Focal Point for 2030 Agenda

Mariam Hamadou, Director of Economy and Planning at Ministry of Economy and Finance

## National Focal Point in Ministry of Health for health-related SDGs

Noura Abdi Farah, Director of Studies, Planning and International Cooperation

### 1. How is Djibouti incorporating the 2030 Agenda into its development policy and planning?

In 2014, the government of Djibouti launched its long term development strategic plan Vision 2035. Based on Vision 2035, the government developed an operational plan, SCAPE: Accelerated Growth and Employment Promotion Strategy, to cover the period 2015-2019. Vision 2035 and SCAPE have not been re-oriented with the 2030 Agenda. However, the Department of Economy and Planning of the Ministry of Economy and Finance (MoEF) has planned to incorporate the SDGs in SCAPE during the mid-term review in October 2017.

Vision 2035 is available here (in Arabic): <http://www.djibouti2035.dj/images/VisionSCAPE/Vision%202035-Arabe.pdf>

SCAPE is available here: <http://www.djibouti2035.dj/images/VisionSCAPE/SCAPE-%20Anglais.pdf>

### 2. How is Djibouti incorporating SDG 3 targets in health policy, strategy, and planning?

The current National Health Development Plan (NHDP) 2013-2017 has not been re-oriented with SDG 3 targets. As the NHDP ends on 31 December 2017, the Ministry of Health (MoH) is starting the process of elaborating the new NHDP to cover the next five years, 2018-2022. This will be conducted with the support of health sector partners, particularly WHO. The MoH has planned to use this opportunity to align the new NHDP 2018-2022 with the SDG 3 targets.

### 3. Are there any major partnerships in Djibouti for advancing the 2030 Agenda?

In the context of implementation of SCAPE 2015-2019, the government created a Framework of Dialogue for Aid Coordination under the leadership of the MoEF, including all international development partners of all sectors divided into groups and subgroups according to the axes of development in SCAPE. The MoEF has planned to use the same partnership after integration of the 2030 Agenda in SCAPE during the mid-term review in October 2017. In 2017, the UN Country Team (UNCT) initiated the elaboration of its strategic document for next five years, the UN Development Assistance Framework (UN DAF). This document includes the 2030 Agenda and SDG targets. The SDG 3 targets were used as a background when identifying priorities, setting indicators and targets in the health sector. There are monthly UNCT meetings under the leadership of UNDP, which include the coordination and monitoring of progress towards the 2030 Agenda and SDG targets.

### 4. Are there any major partnerships in Djibouti for advancing the health-related SDGs?

In 2009, the MoH signed the International Health Partnership (IHP+) Global Compact in the context of working towards the Millennium Development Goals for health. In relation to these efforts, the MoH created the Health Partners Group (GPS) to strengthen the coordination of health interventions and the effectiveness of development aid for health. This partnership is still ongoing and will be used as a partnership for health related SDGs during the implementation of the new NHDP 2018-2022, which will be developed during the latter half of 2017.

### 5. Has Djibouti reoriented its National Health Policies, Strategies, and Plans to incorporate Universal Health Coverage?

The NHDP 2013-2017 has not been re-oriented in terms of ensuring progress on Universal Health Coverage (UHC). However, the MoH is planning to include specific actions to address each of the three components of UHC when formulating the new NHDP 2018-2019.