

# Iraq: Health Systems Profile

## Health status (2013)

Life expectancy at birth in years	total	70.0
	males	67.0
	females	74.0
Maternal mortality ratio per 100 000 live births	total	67.0

## Communicable diseases (2014)

Tuberculosis notification rate per 100 000 population	24.0
Incidence rate of malaria per 100 000 population	...
Number of newly reported HIV cases	...

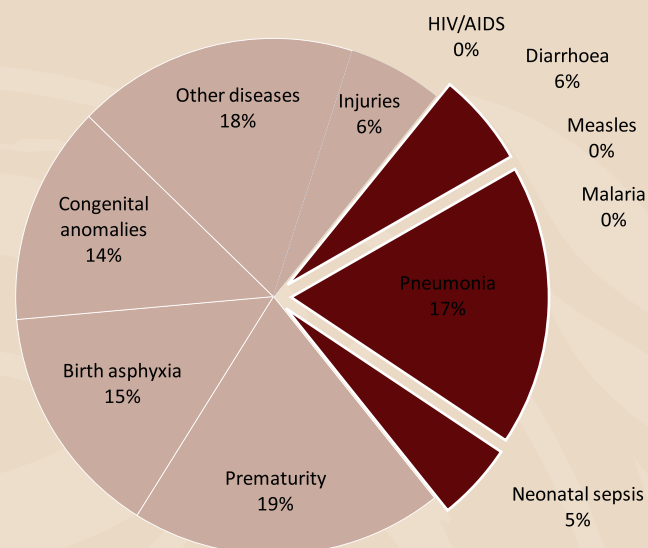
## Behavioural risk factors

Prevalence (%)	males	females	total
Current tobacco smoking (2011)*	...	...	...
Insufficient physical activity (2008-)	...	...	49.3

## Metabolic risk factors

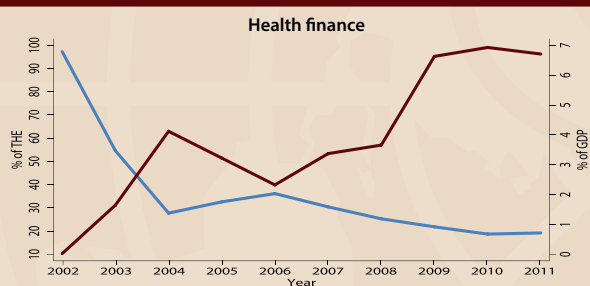
2014 estimated prevalence (%)	males	females	total
Raised blood pressure	...	...	21.8
Raised blood glucose	...	...	16.8
Overweight	...	...	57.9
Obesity	...	...	23.8

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



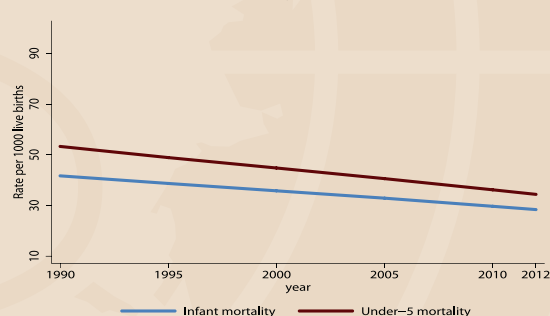
Communicable diseases are estimated to account for 49% of all deaths among children aged <5 years

## Expenditure and mortality trends



\*GGHE%GDP is the general government expenditure on health as % of gross domestic product  
\*\*OOP%THE is the out-of-pocket expenditure as % of total health expenditure

## Infant and under 5 mortality rates per 1000 live births



## Health system: selected coverage interventions

Antenatal care visits (4+ visits) (2013)	35
Measles immunization coverage among 1-year-olds (2014)	71
Treatment success rate of new bacteriologically confirmed TB cases (2014)	88
DPT3-containing vaccine / Pentavalent coverage group among children under 1 year of age group (2014)	74

## Health system: finance (2013)

General government expenditure on health as % of general government expenditure	6
Out-of-pocket expenditure as % of total health expenditure	36.5
Per capita total health expenditure at exchange rate (US\$)	305

## Health system: workforce (2014)

Health workforce per 10 000 population	
Physicians	8.4
Nurses/midwives	17.8
Dentists	2.2
Pharmacists	2.4

## Health system: information

Percentage of births registered	0.99
Percentage of causes of death recorded	0.8

## Health system: medicines and medical devices (2013)

Availability of selected essential medicines and medical products in health facilities (%)	public	...
	private	...
Number of scanners (in public facilities) per million population <sup>c</sup>	CT	2.2212
	MRI	1.6289

## Health system: service delivery (infrastructure) (2014)

Primary health care facilities per 10 000 population	0.7
Hospital beds per 10 000 population	13.8

... No data available

<sup>a</sup> International Classification of Diseases

<sup>b</sup> Gross domestic product

<sup>c</sup> Computed tomography (CT) and Magnetic resonance imaging (MRI)

\* Age-standardized estimated

Please note the data sources are in the attachment

## Health System Strengths, Weaknesses, Opportunities, Challenges, and Priorities – Iraq 2015

Strengths	Weaknesses
<ul style="list-style-type: none"> <li>• National Health Strategic Plan 2013–2017 is approved and currently being implemented</li> <li>• National health policy 2014 – 2023 has been developed, endorsed and currently being implemented</li> <li>• First national strategy for nursing and midwifery updated.</li> <li>• Existing network of primary health care facilities (one primary health care centre/10 000–45 000 citizens) with a define essential package and list of essential drugs</li> <li>• Existence of functional centres that are accredited on an international basis, such as the Influenza Centre and National Pharmacovigilance Centre in Baghdad, supported by a network of focal points in most governorates</li> <li>• Annual increments in the budget allocated to the Ministry of Health from central government</li> <li>• Availability of medical, nursing and paramedical colleges network distributed throughout all governorates of Iraq</li> </ul>	<ul style="list-style-type: none"> <li>• Centralized decision making processes with limited or no governorate autonomy</li> <li>• High level of reliance on almost 95% imported medical products</li> <li>• Health information systems needs enhancement with heavy reliance on population-based surveys to assess the health situation and monitor trends</li> <li>• Inequitable distribution of primary health care facilities with large differences both between and within governorates</li> <li>• The health facility infrastructure is relatively old</li> <li>• Quality of care at public sector facilities does not meet the required standards</li> <li>• Reliance on line item instead of performance based budgeting in the Ministry of Health</li> <li>• Salaries and incentives of staff are not correlated with employee performance</li> </ul>
Opportunities	Challenges
<ul style="list-style-type: none"> <li>• Article 31 of the Iraqi constitution mandates the state to protect health and social security</li> <li>• The Iraq Public Sector Modernization Programme provides options to reform the Iraqi health sector</li> <li>• Total health expenditure per capita has increased fourfold over the past 10 years</li> <li>• Private health sector is growing in terms of capital investments and provides opportunities for partnership</li> <li>• High commitment to ensure that primary health care system is based on the family practice model</li> <li>• Endorsement of revised provincial power act law 21 in June 2013 which is considered the backbone of decentralization in Iraq in 8 service ministries including Ministry of Health</li> </ul>	<ul style="list-style-type: none"> <li>• Lack of political stability and security undermines a strategic approach towards universal health coverage</li> <li>• High population growth rate, increasing by 3.5% annually and total fertility rate [TFR] is 4.3</li> <li>• Lack of capacity for forecasting and projection of the required workforce in order to meet shortages along with internal and external brain drain of professional expertise</li> <li>• Need to improve quality of health professionals' education, especially nursing and allied health workers</li> <li>• Adverse effect of social determinants; high rate of unemployment in young men and child labour</li> <li>• High number of internally displaced persons (850 000 internally displaced people in Kurdistan and 17441 in Baghdad) and high number of Syrian refugees ( 215000) in Kurdistan putting increased demands on the health system for provision of emergency health care</li> <li>• The governmental leadership is in need of capacity and skills development and for better integration and coordination with development partners</li> </ul>

### Priorities

- Develop a national strategic plan for health workforce including strengthening nursing education
- Finalize and adopt the National Medicines and Health Technology Policy
- Strengthen the health economics unit within the Ministry of Health and implement a new round of national health accounts
- Scale up family practice programme in all governorates including implementation of the essential package
- Developing evidence based strategic action plan to overcome shortage of the family physicians
- Improve quality and safety of care in hospitals/primary health care centres through clinical governance and/or accreditation programmes
- Develop a system for health professionals' regulation to protect the public from unsafe medical practice
- Define the administrative and functional structure of "Kimadia" and strengthen national regulatory authorities to ensure quality, safety and efficacy that covers all technologies including medicines, vaccines, devices and diagnostics
- Reinforce health information systems, including civil registration, risk factor and morbidity monitoring and health systems performance
- Strengthen and supervise strategic planning for noncommunicable diseases according to Global Action Plan for Control of Non Communicable Diseases

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