

# Saudi Arabia: Health Systems Profile

## Health status (2013)

Life expectancy at birth in years	total	76.0
	males	74.0
	females	78.0
Maternal mortality ratio per 100 000 live births	total	16.0

## Communicable diseases (2014)

Tuberculosis notification rate per 100 000 population	12.0
Incidence rate of malaria per 100 000 population	...
Number of newly reported HIV cases	...

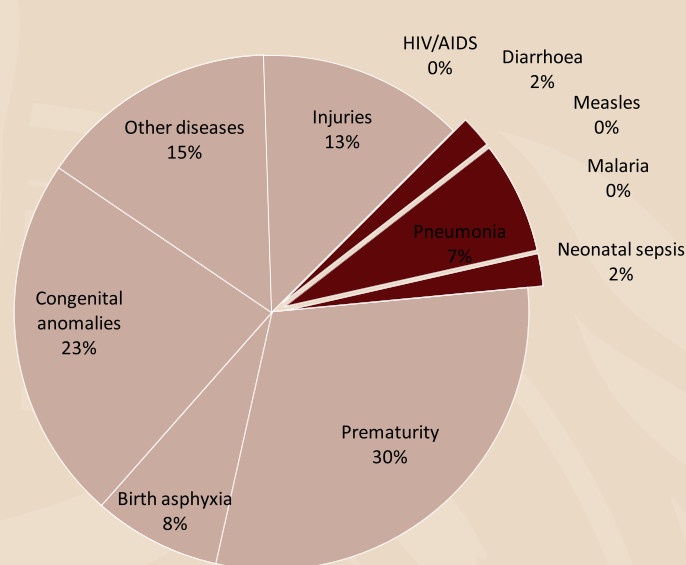
## Behavioural risk factors

Prevalence (%)	males	females	total
Current tobacco smoking (2011)*	3.0	26.8	17.1
Insufficient physical activity (2008-)	...	...	61.0

## Metabolic risk factors

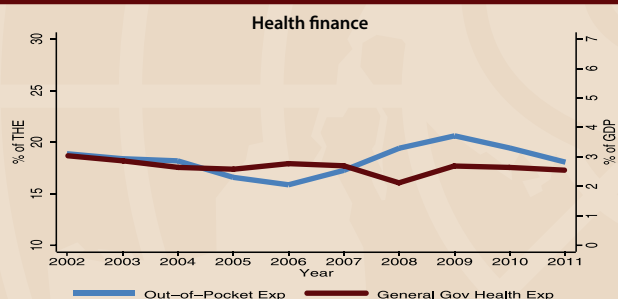
2014 estimated prevalence (%)	males	females	total
Raised blood pressure	...	...	21.8
Raised blood glucose	...	...	18.3
Overweight	...	...	69.6
Obesity	...	...	34.7

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



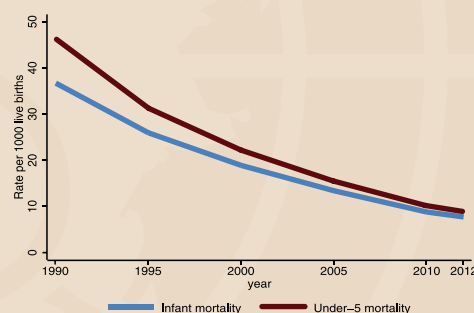
Communicable diseases are estimated to account for 49% of all deaths among children aged <5 years

## 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)	82.3
Measles immunization coverage among 1-year-olds (2014)	98.2
Treatment success rate of new bacteriologically confirmed TB cases (2014)	64
DPT3-containing vaccine / Pentavalent coverage group among children under 1 year of age group (2014)	98.1

## Health system: finance (2013)

General government expenditure on health as % of general government expenditure	5.4
Out-of-pocket expenditure as % of total health expenditure	19.8
Per capita total health expenditure at exchange rate (US\$)	808

## Health system: workforce (2014)

Health workforce per 10 000 population	
Physicians	26.5
Nurses/midwives	53.73
Dentists	4.11
Pharmacists	7.23

## Health system: information

Percentage of births registered	0.95
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	3.816
	MRI	0.971

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

Primary health care facilities per 10 000 population	0.74
Hospital beds per 10 000 population	26.5

... 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 - Saudi Arabia 2015

Strengths	Weaknesses
<ul style="list-style-type: none"> <li>• Large pool of funds allocated towards the development of the healthcare sector (% GDP to healthcare was 4.3% in 2010)</li> <li>• Established national agency for accreditation of healthcare institutions resulted in mandatory accreditation for all hospitals and improved quality and safety of services. Same is underway for primary health care centres</li> <li>• A network of health system infrastructure has improved access of remote areas to health services</li> <li>• High level of health care coverage and improved health related indicators</li> <li>• Well established intersectoral collaboration among governmental sectors</li> <li>• Annual Hajj experience enhances the capacity to respond to emergencies</li> <li>• Ministry of Health's purchasing power as it is the largest healthcare institution in the Gulf Cooperation Council countries</li> </ul>	<ul style="list-style-type: none"> <li>• Centralization of managerial and financial authority and absence of autonomy of regional health directorates</li> <li>• Moderate level of out-of-pocket health expenditure (24.2%)</li> <li>• High cost of the health services and "free-of-charge" policy puts considerable cost pressure on the government</li> <li>• Shortage of local healthcare professionals, such as physicians, nurses and pharmacists, leads to high rate of turnover and instability in the health workforce</li> <li>• Lack of consistency and quality of healthcare services and facilities</li> <li>• Suboptimal distribution of health care services and health professionals across geographical areas</li> <li>• Lack of standardization in technology investments as well as limited connectivity between primary and secondary health care facilities</li> <li>• Lack of institutionalization and performance management system</li> <li>• Limited optimization of resource use</li> </ul>
Opportunities	Challenges
<ul style="list-style-type: none"> <li>• Health development features high on the sociopolitical agenda</li> <li>• New national policies and strategies for primary health care are patient-centred and focus on health promotion and protection with emphasis on social determinants of health</li> <li>• Coordination between the Ministry of Health and other development sectors is paving the way to advocate for health in all policies</li> <li>• Support from government in adopting a robust performance management system</li> <li>• Foreign scholarship programme building national capacities of health workforce and health system managers</li> </ul>	<ul style="list-style-type: none"> <li>• Changes in disease pattern; there is an alarming increase in the prevalence of chronic and noncommunicable diseases and their risk factors</li> <li>• Availability and continuity of services, across a very broad and diverse geography</li> <li>• Limited availability of experts</li> <li>• Managing and planning health services for an increasing number of visitors and risk of infectious disease during the Hajj (and Umrah)</li> <li>• Addressing distinct issues faced by the health system and care providers such as increasing motor vehicle accidents and chronic diseases</li> <li>• Increased public demands and rising expectations</li> <li>• Increased cost of healthcare services</li> <li>• Rapid changes in health technology</li> </ul>

### Priorities

- Implementing the Ministry of Health national strategy
- Implementing a newly developed health financing plan
- Implementing comprehensive and well-coordinated programmes to reduce the incidence of noncommunicable diseases and road traffic injuries
- Improving the effectiveness of prevention, curative and rehabilitative care
- Ensuring the availability of missing services required especially in remote areas
- Improving and promoting disaggregated health information systems
- Implementing the Ministry of Health e-health strategy and rolling out key applications
- Developing a national health workforce development plan including training and deployment
- Strengthening the supervisory and monitoring role of the Ministry of Health
- Encouraging public-private partnership in health care provision

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