#### World Health Organization / Regional Office for the Eastern Mediterranean - Health System Country Profile, 2015

<sup>b</sup> Gross domestic product

# **Oman**: Health Systems Profile

Health status (2013)

 Life expectancy at birth in years
 total
 76.0

 males
 74.0

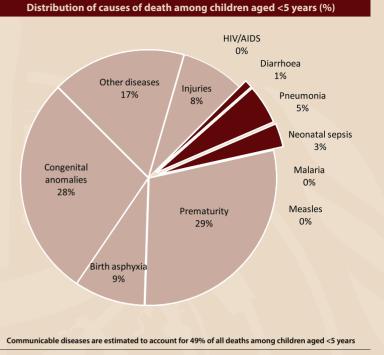
 females
 79.0

 Maternal mortality ratio per 100 000 live births
 total
 11.0

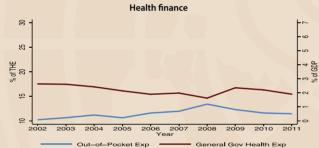
Communicable diseases (2014)	
Tuberculosis notification rate per 100 000 population	9.0
Incidence rate of malaria per 100 000 population	
Number of newly reported HIV cases	103.0

females total
19.5 13.5

Metabolic risk factors			
2014 estimated prevalence (%)	males	females	total
Raised blood pressure			17.2
Raised blood glucose			16.4
Overweight			67.4
Obesity			30.9



#### **Expenditure and mortality trends**



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

Infant and under 5 mortality rates per 1000 live births

\*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

Health system: selected coverage interventions		Health system: finance (2013)	
Antenatal care visits (4+ visits) (2013)	71.3	General government expenditure on health as % of general government	
Measles immunization coverage among 1-year-olds (2014)	100	expenditure	4.8
Treatment success rate of new bacteriologically confirmed TB cases (2014)	97	Out-of-pocket expenditure as % of total health expenditure	12.3
DPT3-containing vaccine / Pentavalent coverage group among children under 1		Per capita total health expenditure at exchange rate (US\$)	678
year of age group (2014)	97		

Health system: workforce (2014)	Health system: information
Health workforce per 10 000 population	
Physicians 21.7	Percentage of births registered 0.97
Nurses/midwifes 47.1	
Dentists 2.6	Percentage of causes of death recorded 0.85
Pharmacists 4.9	

Health system: medicines and medical devices (2013)			Health system: service delivery (infrastructure) (2014)	
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	0.58
Number of scanners (in public facilities) per million population <sup>c</sup>	CT MRI	6.882 4.405	Hospital beds per 10 000 population	15.8

... No data available

\* Age-standardized estimated

Please note the data sources are in the attachment

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



## Health System Strengths, Weaknesses, Opportunities, Challenges, and Priorities - Oman 2015

Strengths	Weaknesses
<ul> <li>Sustained investment in economic development and highest level of political commitment to health</li> <li>Good health infrastructure based on PHCwith near universal access</li> <li>Well-established evidence-based 5-year planning process involving all levels of health personnel</li> <li>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</li> <li>Well-established health information system including a strong surveillance system and a commitment to health system research</li> </ul>	<ul> <li>High dependence on non-nationals, particularly in specialized areas</li> <li>Gaps and maldistribution of health personnel (in actual numbers and competencies/skill mix)</li> <li>Performance/accountability measures (i.e., extent of coverage, compliance to treatment, quality outcomes, etc.) needs improvement</li> <li>Health services, particularly at 2nd and 3rd level, are provider friendly rather than patient-friendly</li> <li>Weak referral system with sub-optimal distribution of resources (both human resources as well as equipment)</li> <li>Limited capacity for pharmacovigilance (human resources, regulatory framework, information management, etc.)</li> <li>Institution-based information with limited ability to monitor disease trends and service provision at the regional and Wilayat levels</li> </ul>
Opportunities	Challenges
<ul> <li>Health sector involved in setting National Development Strategy (2040)</li> <li>Commitment to long-term planning (Health Vision 2050 has been finalized and approved), strengthening and expanding health service provision</li> <li>Expansion in the production of various cadres of health professionals both nationally and internationally and possibility to promote the "professionalization" of a various cadres of health workers</li> <li>Potential to build on existing examples of intersectoral collaboration/partnership (governmental and private)</li> <li>Commitment to decentralization</li> <li>Establishment of a Central Public Health Laboratory and commitment to ensuring implementation of IHR</li> <li>Building on efforts to strengthen public health emergency preparedness and response system</li> <li>Development of a Medical City will enhance advanced specialized health care delivery</li> </ul>	<ul> <li>Demographic and epidemiological transition</li> <li>Limited non-health involvement in health to address social determinants of health and the changing behaviors and lifestyles</li> <li>Strengthening human resource capacity to meet increasing demand for better quality of health care services</li> <li>Sustained health system financing</li> <li>Growing unregulated private health care sector</li> <li>Awareness of health authorities aboutthe strategic planning process and up-to-date health system thinking</li> <li>Sub-optimal productivity in service delivery based on available resources</li> <li>Strong co-ordination between different levels of care as well as between institutions</li> </ul>
Drie	rities

### **Priorities**

- Restructuring health institutions and organization chart of the Ministry of Health (in line with Health Vision 2050)
- Strengthening human resource capacity including restructuring health professions (in terms of 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 providers
- 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 evidence based allocation of resources Developing a quality management/ health performance system to ensure provision of quality services at all levels of care

