



Yemen: Health Systems Profile

Health status (2018)

Life expectancy at birth in years	<i>total</i>	65.3
	<i>males</i>	63.9
	<i>females</i>	66.8
Maternal mortality ratio per 100 000 live births	<i>total</i>	385

Communicable diseases (2017)

Tuberculosis notification rate per 100 000 population	35.0
Incidence rate of malaria per 1 000 population	6.3
Number of newly reported HIV cases (2012)	...

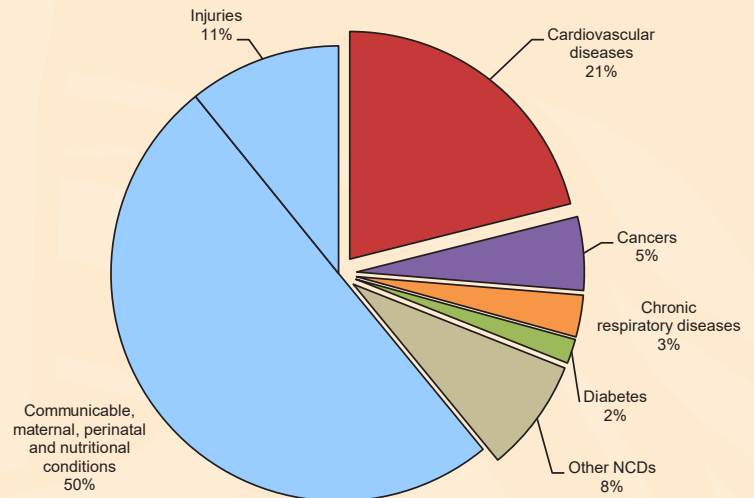
Behavioural risk factors

Estimated prevalence (%)	<i>males</i>	<i>females</i>	<i>total</i>
Current tobacco smoking (2015)*	...	...	...
Insufficient physical activity (2016)*	...	...	...

Metabolic risk factors

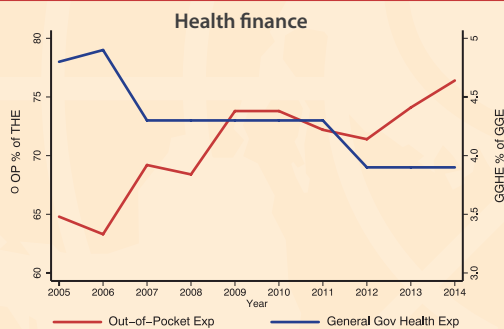
Estimated prevalence (%)	<i>males</i>	<i>females</i>	<i>total</i>
Raised blood pressure (2015)	...	...	30.7
Raised blood glucose (2014)	...	...	11.3
Overweight (2016)	...	...	48.8
Obesity (2016)	...	...	17.1

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



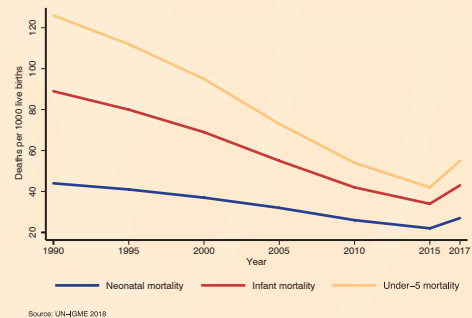
Total deaths: 163,000
NCDs are estimated to account for 39% of total deaths.

Expenditure and mortality trends



*GGHE % GGE is the general government health expenditure as % of general government expenditure
 **OOP % THE is the out-of-pocket expenditure as % of total health expenditure

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



Health system: selected coverage interventions

Antenatal care visits (4+ visits) (2013)	25.1
Measles immunization coverage among 1-year-olds (2017)	73.0
Treatment success rate of new bacteriologically confirmed TB cases (2016)	89.0
DTP3-containing vaccine / Pentavalent coverage group among children under 1 year of age group (2017)	83.0

Health system: finance (2014)

General government expenditure on health as % of general government expenditure	3.9
Out-of-pocket expenditure as % of total health expenditure	76.4
Per capita total health expenditure at exchange rate (US\$)	80

Health system: workforce (2017)

Health workforce per 10 000 population		
Physicians	1.8	
Nurses/midwives	7.3	
Dentists	0.4	
Pharmacists	1.1	

Health system: information (2007-2016)

Percentage of births registered	...
Percentage of deaths registered	...
Universal Health Coverage	
UHC index (2017)	39.0

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 ^a	CT	3.6
	MRI	1.1

Health system: service delivery (infrastructure) (2017)

Primary health care facilities per 10 000 population	1.6
Hospital beds per 10 000 population (2013)	7.1

... No data available

^a 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 - Yemen 2018

Strengths	Weaknesses
<ul style="list-style-type: none"> Strategic health plan of the Ministry of Public Health and Population 2011–2025 includes health system strengthening as a priority Well established immunization, and control of the communicable diseases programs prior to internationalization of crisis Fully functional 'Health Cluster' mechanism that is coordinating the emergency response Commitment of development partners and their engagement to fulfil the urgent emergency needs 	<ul style="list-style-type: none"> Insufficient functionality and provision of health services and public health programmes and disruption of the health system due to the on-going conflict Insufficient allocation of funds to health and high share of out-of-pocket spending (over 68%) with high risk of catastrophic expenditure and impoverishment Even prior to internationalization of the conflict, more than 40% of population did not have access to basic health services since rural areas (75% of the population) are greatly deprived and bias towards curative care Poor quality and safety of health care services due to shortages of supplies and equipment, as well as severe bottlenecks in funding and low workforce morale and capacities Problem of workforce crisis due to inadequate density and misdistribution including physicians, nurses, midwives and other cadres (< 2.3 per 1000 population) Non-payment of salaries for extended periods has led to high turnover of qualified health workers at all levels, on- going dual practice, and severely curtailed financial access to services Limited capacity to supervise and govern lower levels with issues of accountability, transparency and efficient resource utilization Insufficient capacity to regulate the expanded private health sector and absence of a coordinating mechanism at Ministry of Health Weak and fragmented health information system with poorly functioning civil registration and vital statistics and cause-of-death reporting Reduced surveillance capacity and response due to the on-going crises Lack of essential drug and medical products in public health facilities
Opportunities	Challenges
<ul style="list-style-type: none"> Continued commitment of UN agencies including WHO in providing technical and financial assistance to the Ministry of Public Health and Population Adoption by Government and Partners of the Yemen Minimum Service Package as basis for service delivery recovery strategy being financed with major support from WB/WHO/unicef/WFP partnership as other significant bilateral support. Regular updating of data and analysis from Health Resources Availability Mapping System (HeRAMS) in response planning, resource mobilization and allocation. Use of Vulnerability Analysis to target service delivery support to districts most in need according to vertical equity principles. Potential to establish multi-sectoral coordination mechanisms for health including public and private entities Coordination between humanitarian and development partners is being prioritized with understanding that transition will begin when peace has finally been achieved. 	<ul style="list-style-type: none"> Ongoing conflict has exacerbated the protracted humanitarian crises, resulting in increased need for basic and emergency services beyond health system's regular capacity. Severe bottleneck in provision of lifesaving medicines and supplies due to blockades and other logistical interruptions and constraints. Targeting of health facilities by warring parties Low prioritization of funding for service delivery and public health interventions by authorities in wartime context further aggravated by lack of transparency and accountability and limited use of information in allocating resources Severe staffing depletion country wide due to physical insecurity, attacks on facilities and health workers, migration, and lack of salary payment for extended periods. Implications of the conflict on the functionality of health services and public health programmes, raising the risk of disease outbreaks, and increased morbidities and mortalities in addition to malnutrition Growing number of Internal Displaced People (IDPs) with increased health demands and limited capacity to fulfil their needs Aggravation of existing economic, social and cultural barriers like increased poverty and scattered population
Priorities	
<ul style="list-style-type: none"> Restoration of the functionality of health services and public health program through continued roll-out of Yemen Minimum Service Package implementation (reproductive health, maternal, neonatal and child health, communicable and non-communicable diseases) Advocate for funding pledges towards urgent health needs outlined in the Yemen humanitarian response plan Development of medium term MSP implementation strategy that includes the rehabilitation of the health system to function effectively and will serve as basis for eventual transition to recovery phase Ensuring regularly payment of salaries for Yemeni health workers at level necessary to retain staff in facilities through commitment and action by government, donor, implementing humanitarian and development partner commitment Strengthen the health system capacity to respond to public health emergencies and epidemics Extending the effective role of the 'health cluster' through engaging development partners in post-conflict and recovery plans 	