

Somalia : Health Systems Profile

Key health system indicators

Health status

Life expectancy at birth in years	total	50
Adult mortality rate (probability of dying between 15 and 60 years) per 1000 population	males	399
	females	316
	total	358

Communicable diseases

Tuberculosis notification rate per 100 000	120
Incidence rate of malaria per 1000 population	0.59
Estimated number of people living with HIV	35000

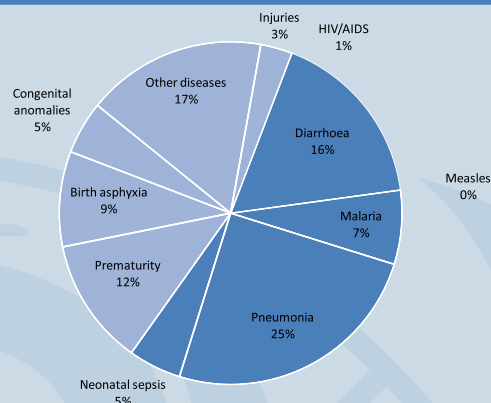
Behavioural risk factors

2008 estimated prevalence (%)	males	females	total
Current daily tobacco smoking
Physical inactivity

Metabolic risk factors

2008 estimated prevalence (%)	males	females	total
Raised blood pressure	39.9 [25.7-54.6]	35.7 [22.7-48.9]	37.8 [28.3-47.9]
Raised blood glucose	7.9 [3.0-14.9]	7.7 [2.9-14.9]	7.8 [4.1-12.6]
Overweight	18.9 [4.9-38.8]	24.0 [5.7-48.2]	21.5 [8.8-36.9]
Obesity	3.4 [0.5-9.2]	7.1 [0.9-19.3]	5.3 [1.4-12.0]
Raised cholesterol	23.6 [9.5-44.2]	25.5 [9.1-49.6]	24.7 [12.9-39.9]

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



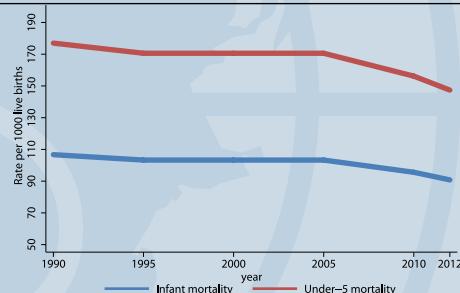
Communicable diseases are estimated to account for 54% of all deaths among children aged <5 years

Expenditure and mortality trends

Health finance

The general government expenditure on health as % of Gross Domestic Product (GDP)
The out-of-pocket expenditure as % of Total Health Expenditure (THE)

Infant and under 5 mortality rates per 1000 live births



Health system: governance

Existence of a national health strategy/strategic plan and time frame	No
Annual publication/dissemination of ministry of performance report	No
High level multisectoral advisory council for health available	No

Health system: information

Functioning civil registration and vital statistics

Percentage of births registered	3
Percentage of causes of death recorded	...
Year most recent use of ICD in mortality classification reported	...
Year most recent annual health statistics report published	...

Health system: health workforce

Health workforce per 10 000 population (2011)

Physicians	0.3
Nurses/midwives	0.8
Dentists	...
Pharmacists	...
Health professions education institutions	
Medical	...
Nursing	...
Percentage of doctors working in rural settings	...

Health system: service provision

Infrastructure

Primary health care facilities per 10 000 population	...
Hospital beds per 10 000 population	...
Service delivery	
Access to local health services (%)	...
Contraceptive prevalence (%)	15
Antenatal care visits (4+ visits) (%)	6.3
Measles immunization coverage among 1-year-olds (%)	49
Smear-positive tuberculosis treatment success (%)	89
Number of tobacco (m)POWER measures implemented at the highest level of achievement	...

Health system: finance

National health accounts conducted (number of rounds; last reference year(s))	0
General government expenditure on health as % of GDP (2011)	...
Out-of-pocket expenditure as % of total health expenditure (2011)	...
General government expenditure on health as % of total government expenditure (2011)	...

Health system: technology

Existence and year of last update of published essential medicines list (EML)	Yes (2006)
Existence of a functional national regulatory authority (NRA)	No
Number of MRI/CT scanners (in public facilities) per million population	Not available

Health System Strengths, Weaknesses, Opportunities, Challenges, and Priorities

Strengths	Weaknesses
<ul style="list-style-type: none"> • Improved ownership by the health authorities • Health sector strategic plans for the three zones have been prepared with technical assistance from WHO in consultation with all development partners • Essential package of health services defined • Some financial support available for implementation of essential package of health services • Long-term capacity development plans are available in health governance, leadership and management • Training and deployment of 200 community health workers for the three zones is a step towards increasing access to primary health care services • Alignment of external assistance with the health sector strategic plans 	<ul style="list-style-type: none"> • Fragmented and under-funded health systems functions • Low access to health services • Somalia is among eight countries in the Region facing health workforce crisis • Limited institutional capacities (Ministry of Health) to provide leadership, develop policies, manage programmes and monitor performance • Inadequate evidence for policy and strategy formulation due to scarcity of data • Lack of legislation, weak regulatory function, outdated public health laws, lack of enforcement and lack of accreditation systems. Unregulated private sector • Lack of system accountability and limited transparency in decision-making • Insufficient partnership and collaboration among stakeholders and with the private sector • No formal health financing mechanisms in place • High level of dependency on external assistance
Opportunities	Challenges
<ul style="list-style-type: none"> • Ongoing political developments and increased stability • Increased external commitments for reconstruction and development • Potential role of the private sector in health care delivery • Advancing communication can facilitate health promotion • Return of public health professionals from the diaspora • Increasing civil society organizations' role in health care provision • New initiative on training and deployment of community health workers that will increase access to primary health care services • Support of major donors (GAVI Alliance, Global Fund to fight AIDS, Tuberculosis and Malaria, Joint Health and Nutrition Programme) to invest in health system strengthening • Agreement by health authorities in the three zones to develop one health policy for Somalia 	<ul style="list-style-type: none"> • Inadequate financial, human resources, essential medicine and equipment for the public health sector • Poor health service infrastructure mainly • Unpredictable external aid to health sector development • Loss of human capital; shortage of qualified professionals • Nomads and scattered population have poor access to health care delivery • Unregulated private sector • Major determinants of health such as unplanned urbanization and deteriorating environmental factors • Insecurity in many parts of the country

Priorities

- Strengthening leadership and governance with focus on evidence-based policies and strategies, better regulation and increased transparency leading towards the universal health coverage goal
- Improving access to essential package of health services
- Plan to expand training and deployment of community health workers in three zones
- Exploring workable options for health financing and scaling-up of health Millennium Development Goal interventions
- National policy for health workforce focusing on planning, production, licensing and management
- Implementation of integrated primary health care services systems supported by functioning hospitals and community-based infrastructure and establish effective facility capacities to respond to health emergencies
- Consolidating the national health information system with focus on civil registration and facility records
- Access to quality medicines and revival of national regulatory systems
- Strengthening intersectoral approach to address the broader social determinants of health and promoting health in all policies approach

Jointly developed by:

Department of Health Systems Development (HSD) and
Department of Information, Evidence and Research (IER)



World Health Organization

Regional Office for the Eastern Mediterranean