TUNISIA AT A GLANCE

- Total population (2017): 11,446,000
- Gross national income per capita (US$, 2018): 12,060
- Unemployment (% of total labour force) (2018): 15.4
- Per capita current health expenditure (US$ 2017): 257
- Government health expenditure as % of general government expenditure (2017): 13.7
- Out-of-pocket expenditure as % of current health expenditure (2017): 39.9
- Universal health coverage index (2015): 65
- Number of refugees (2016): 636
- Number of internally displaced persons (2016): 0
- Maternal mortality per 100,000 live births (2017): 62
- Under-5 mortality per 1000 live births (2017): 13
- Births attended by skilled health personnel (%)(2017): 98.6
- Raised blood glucose (% 18+ years)(2017): 12.5
- Raised blood pressure (% 18+ years) (2017): 23.2
- Hepatitis B incidence rate per 100,000 (2017): 800

Source: Eastern Mediterranean Health Observatory.

KEY FACTS

- The geographic distribution of health workforce is highly imbalanced in favour of coastal cities.
- There is a need to adapt health education to meet the new needs of the population resulting from ageing and increase in the burden of noncommunicable diseases.
- Motivation of health personnel is low due to difficult working conditions and poor career prospects. As a consequence, public services compete with private structures to attract and retain personnel. There is also emigration to higher-income countries that offer much higher salaries.
- Public services recruited many non-clinical health workers after the 2011 revolution. However, there has been very limited recruitment since 2017 due to wider public sector restructuring. There is significant unemployment of so-called “paramedical personnel”, in particular of care assistants.
- There are high rates of absenteeism and many days are lost to strikes.
- The Ministry of Public Health, with the support of WHO, has launched a planning process to address health workforce deficiencies.