



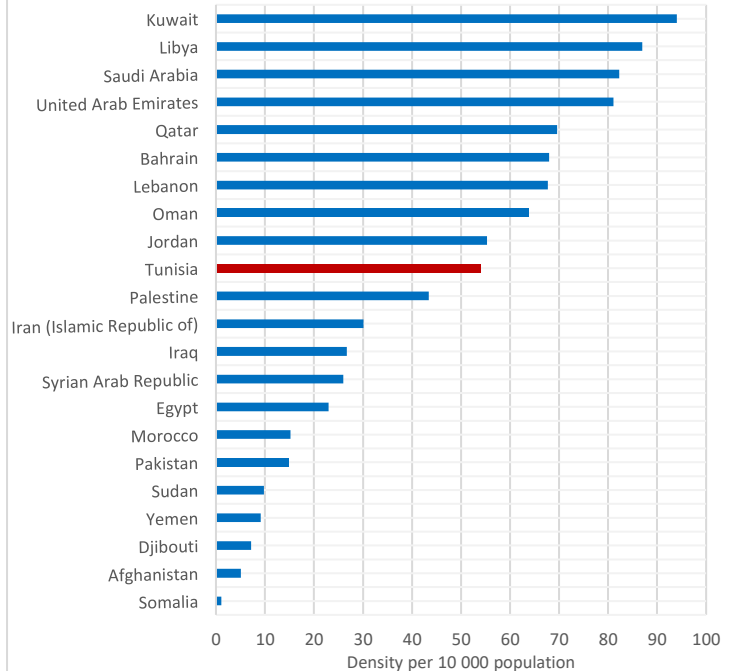
Health workforce snapshot

TUNISIA

TUNISIA AT A GLANCE¹

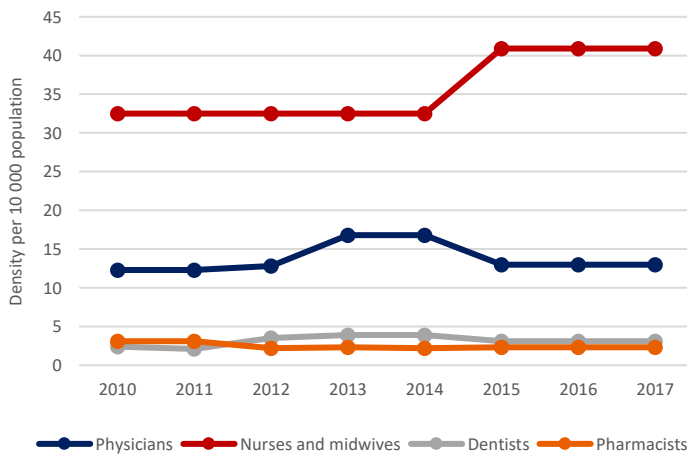
Total population (2017)	11 446 000
Gross national income per capita (US\$, 2018) ²	12 060
Unemployment (% of total labour force) (2018) ²	15.4
Per capita current health expenditure (US\$ 2017)	257
Government health expenditure as % of general government expenditure (2017)	13.7
Out-of-pocket expenditure as % of current health expenditure (2017)	39.9
Universal health coverage index (2015) ³	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

Density of physicians, nurses and midwives in countries of the Region (2017)



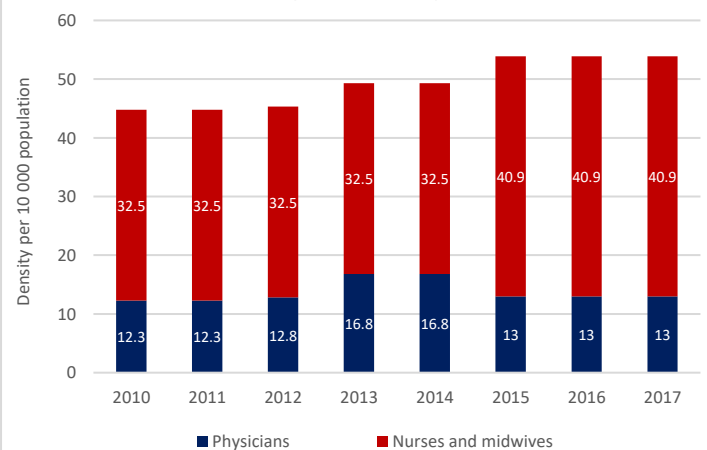
Source: Eastern Mediterranean Health Observatory.

Density of selected health professionals (2010–2017)



Source: Eastern Mediterranean Health Observatory.

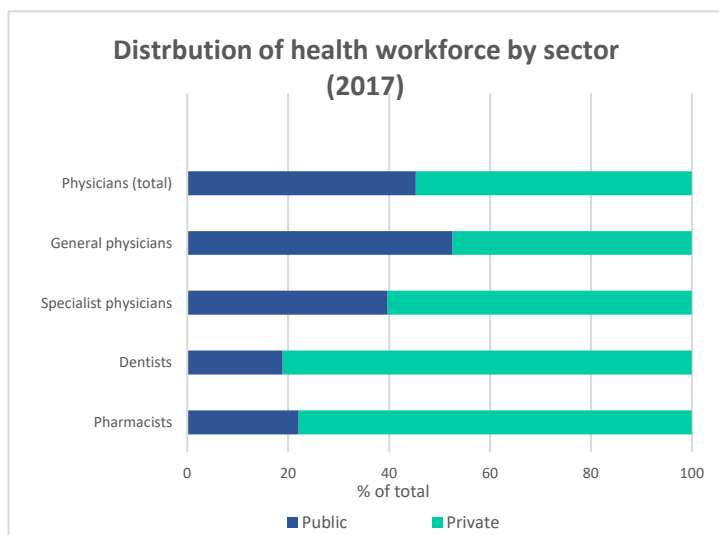
Density of physicians, nurses and midwives (2010–2017)



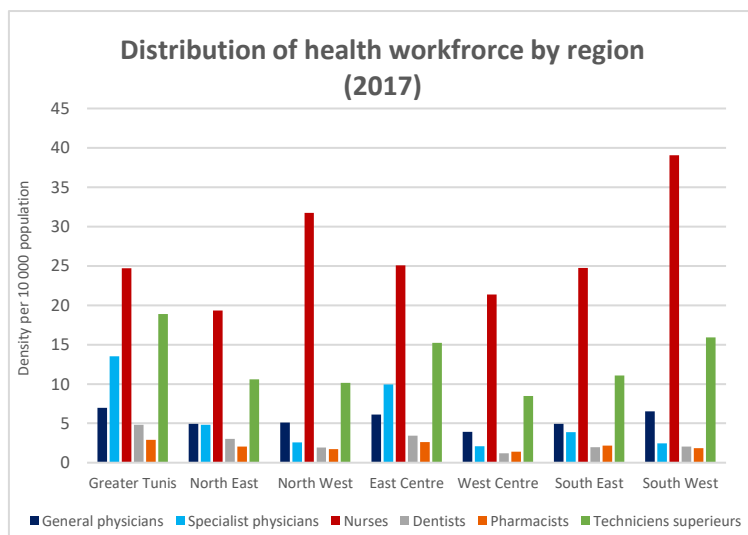
Source: Eastern Mediterranean Health Observatory.

KEY FACTS

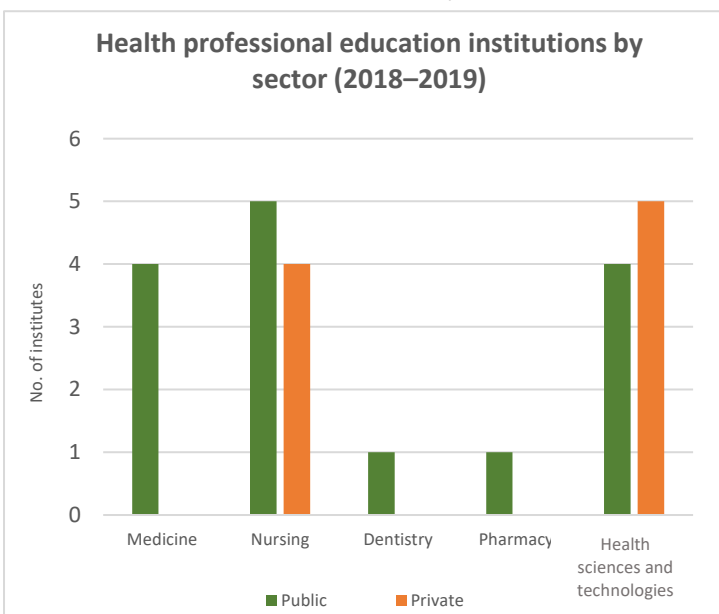
- The geographic distribution of health workforce is highly imbalanced in favour of coastal cities.
- There is a need to adapt health education to meet the new needs of the population resulting from ageing and increase in the burden of noncommunicable diseases.
- Motivation of health personnel is low 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.



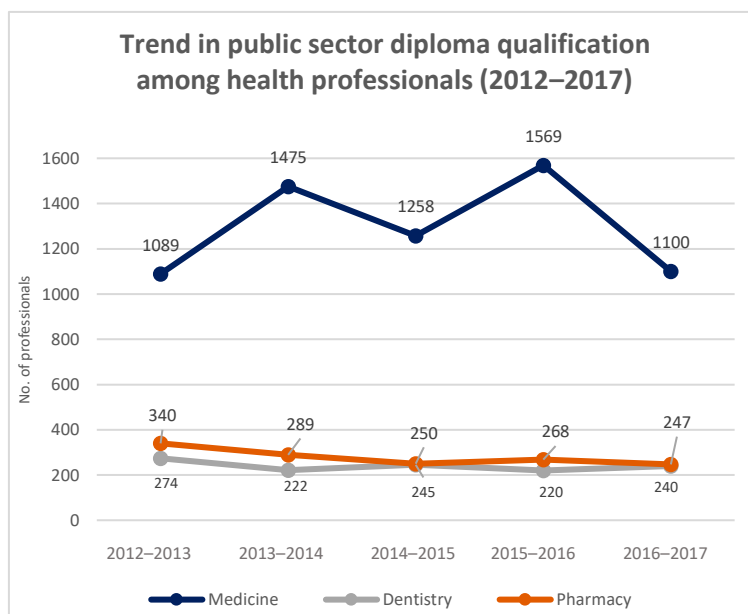
Source: National Health Workforce Accounts and Ministry of Public Health.



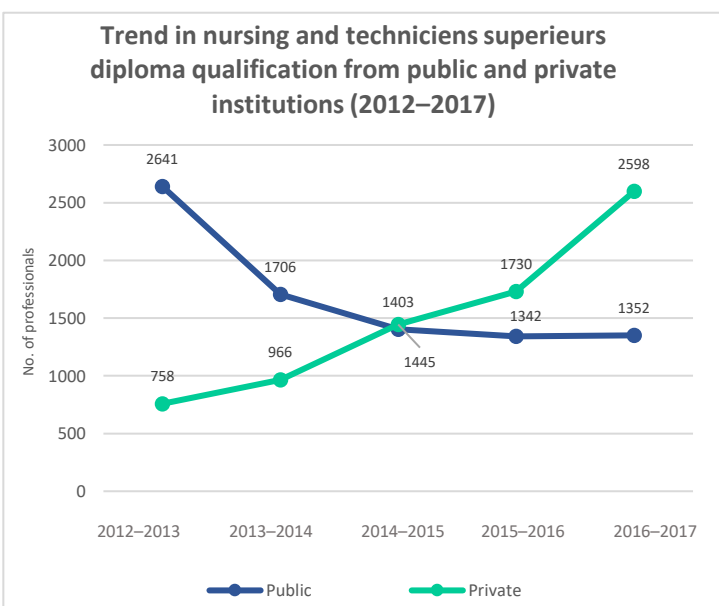
Source: Santé Tunisie en chiffres 2017



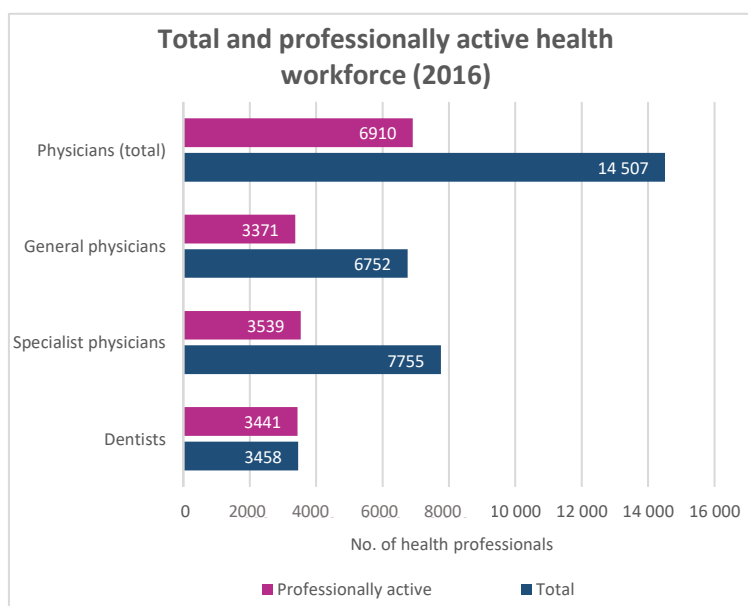
Source: Ministry of Higher Education and Scientific Research, 2018–2019.



Source: Ministry of Public Health, 2019.



Source: Ministry of Public Health, 2019.



Source: National Health Workforce Accounts.

1. Eastern Mediterranean Health Observatory [online data repository]. Cairo: WHO Regional Office for the Eastern Mediterranean (<https://rho.emro.who.int/data-r>, accessed 5 November 2019).
2. The World Bank, 2018 data [online]. Washington (DC): The World Bank; 2018 (<https://data.worldbank.org/indicator/NY.GNP.PCAP.PP.CD?locations=OM>, accessed 5 November 2019).
3. Tracking universal health coverage: 2017 global monitoring report. Geneva and Washington (DC): World Health Organization and International Bank for Reconstruction and Development/The World Bank; 2017 (<https://apps.who.int/iris/bitstream/handle/10665/259817/9789241513555-eng.pdf?sequence=1>, accessed 5 November 2019).
4. Santé Tunisie en chiffres 2017. Tunis: Studies and Planning Department, Ministry of Public Health, Republic of Tunisia; 2019 (<http://www.santetunisie.rns.tn/images/docs/anis/cartesanitaire/Sante-Tunisie-en-chiffres-offre-de-soins-2017.pdf>, accessed 10 February 2020).
5. Private higher education establishments for the 2018–2019 academic year [online]. Tunis: Ministry of Higher Education and Scientific Research, Republic of Tunisia (www.mes.tn/, accessed 12 February 2020).