

DJIBOUTI



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Total population (2009) ¹	818 159
% Under 15 (2009) ¹	35.2
Population distribution % rural (2009) ¹	9.66
Life expectancy at birth (2002) ²	49
Under-5 mortality rate per 1000 (2006) ³	94
Maternal mortality rate per 100 000 live births (2002) ⁴	546
Total expenditure on health as % of GDP (2009) ⁵	7
General government expenditure on health as % of general government expenditure (2009) ⁵	15
Human Development Index Rank, out of 177 countries (2007) ⁶	149
Gross National Income (GNI) per capita USD (200.)	N/A
Adult (15+) literacy rate (2006) ⁷	N/A
Adult male (15+) literacy rate (200.) ²	N/A
Adult female (15 - 24) literacy rate (2006) ²	47.5
% Population with access to improved drinking water source (2006) ²	93.5
% population with improved access to sanitation (2006) ²	67

Sources:

1. Direction de la Statistique et des Etudes Démographiques (DISED) 2009
2. EDIM 2002
3. EDIM 2006
4. PAPFAM 2002
5. Ministry of Finance 2009
6. Human Development Report, New York, UNDP, 2007/2008
7. Bilan DRSP

Djibouti is characterized by an arid climate, limited natural resources and high vulnerability to natural disasters, including drought and floods. Three quarters of the population are concentrated in the capital of Djibouti City. The flow of migrants from neighboring countries exerts significant pressure on the economy and health facilities; in fact, over one third of users of health care are nationals of neighboring countries. The economy's growth has improved over the last ten years. However, still some equitable distribution of that growth is not reflected at layers of the most vulnerable populations. To rectify this situation, the National Initiative for Social Development (INSD) was launched in 2007 by H.E. the President of the Republic of Djibouti for greater equity in access to basic social services and for a better distribution of the fruits of growth economy.

In this context, the authorities have adopted a political and economic framework for a better future. It has been agreed with the Bretton Woods, financial institutions (International Monetary Fund and World Bank), laws have been adopted to facilitate internal and external investment, the privatization process was launched for a number of public institutions. In addition, a number of major development projects have been completed. These measures aim to revive the country and foster economic growth.

HEALTH & DEVELOPMENT

Infant and maternal mortality rates are still among the highest in the world. The leading causes of death and hospitalization among children are diarrhea, acute respiratory infections (ARI), and nutritional problems. The government has adopted a national immunization strategy and the integrated management of childhood illnesses (IMCI) strategy and is supported by the international partners.

Poverty and malnutrition are serious barriers to health development. More than 74,4% of the population lives below the poverty line. 20,7% of children under-5 years of age are underweight and 40% of women are found to be anemic during their first antenatal visit.

The country is vulnerable to communicable diseases and epidemics. The major causes of morbidity and mortality are infectious diseases; diarrhea, tuberculosis and HIV/AIDS. Poor sanitary conditions, the lack of water add to the risk of epidemics.

The Government with WHO support has launched a vast programme to reform the health system in order to improve the health care delivery system which is has weak health structures, lack of equipment, inadequate maintenance and a shortage of trained and motivated personnel. The donors led by the World Bank provides the major part of the funds required.

The health care providers are the public sector (Ministry of Health, Ministry of Interior, Ministry of Labour, Ministry of Defense). There are facilities to support private sector workers. Furthermore, another hospital structure depends on the French Military Cooperation. There are also facilities of the Office of Social Protection (OPS) and the private sector. Creation of the Medical School of Djibouti (EMD) in 2007 and Higher Institute of Health Sciences (ISSS) in 2007.

Medicines availability and accessibility As part of the health reform of 2002, a new medicines policy and a new organization, the "Medicines and Pharmacy Directorate" have been set up to ensure the supply of public health facilities with generic medicines. The availability of affordable drugs is one of the main objectives of the Medicines Government Policy.

There is an urgent need to reform the health financing system as the public investment in the health sector has followed a downward trend in the last decade. An interior alternative financing to meet non predictability in external financing. This will be done by the mandatory and universal insurance scheme.

OPPORTUNITIES	CHALLENGES
<ul style="list-style-type: none"> • Strong wish by the Government to improve people health. • Existence of a clear national health policy and strategy. • Close involvement of donors and international Partners. • Djibouti is now a member of the International Health Partnership and related initiatives (IHP+) for a better coordination of aid. • Effective involvement of civil society and local cells representatives. 	<ul style="list-style-type: none"> • To rapidly reduce child and maternal mortality. • To adequately finance the health sector. • To quickly train and maintain health professional and managers. • To improve environmental health and nutritional status of people. • To expedite efforts towards achieving the national Millennium Development Goals (MDG)s • To quickly raise public awareness on health. • How to address the issue of khat utilization.

PARTNERS

International cooperation plays an important role in public health in Djibouti. WHO, UNICEF and UNFPA are important in health, supporting the Ministry of Health. These UN Agencies provide technical assistance and also cover exceptional needs of the country, especially in emergency situations. The bilateral donors include France (has a central position for historical reasons), Egyptian and Chinese Corporations. Widespread support is also provided by USAID and the Financial Institutions (World Bank, African Development Bank, Islamic Development Bank) with support from the Japanese Government. Similarly with AFD and Global Fund help with large quantities.

National Initiative for Social Development (INDS), which is the PRSP of the second generation.

The "Poverty Reduction Strategy Paper" is the reference document for the efforts related the MDGs achievement. There are two unit structures managements for health projects, namely the Project Management Unit and the Executive Secretariat to fight against the three diseases such as Malaria, Tuberculosis and HIV/AIDS. However, throughout the development process of cooperation projects, the Ministry of Foreign Affairs and International Cooperation and the Ministry of Economy, Finance and Planning, are intimately linked. The UN System uses the United Nations Development Assistance Framework (UNDAF) 2008-2012, as a reference.

OPPORTUNITIES	CHALLENGES
<ul style="list-style-type: none"> • Presence of international partners and supporters. • Large scale support from the USAID and the World Bank. 	<ul style="list-style-type: none"> • Improving the coordination among various partners. • How to pool the support of all partners to implement health sector reform. • How to effectively lobby for support to poverty reduction as a health concern • How to develop projects and secure external assistance for training of national health staff and future workforce • How to develop long term commitment with donors for providing the essential needs of the health sector.

WHO STRATEGIC AGENDA (2006-2011)

- Reform of the health sector and establishment of a primary health care system.
- Financing of the system, including international aid.
- Development of human resources, and capacity-building of personnel in health facilities.
- Implementation of a national policy for quality essential medicines and strengthening the rational use of medicines.
- Support for the development and implementation of priority national programmes and basic health services, including quality of care.



ADDITIONAL INFORMATION

WHO Country Page <http://www.who.int/countries/dji/en/>
 WHO country office website <http://www.emro.who.int/djibouti/>

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