

Mongolia



This map is an approximation of actual country borders.

Mongolia is located in the heart of Central Asia, sandwiched between the Peoples Republic of China and the Russian Federation. The total population in 2008 was estimated at 2.68 million, living sparsely over the territory of 1,566,500 sq. km making it the least densely populated country in the world with an overall population density of 1.7 per square kilometer. Sparsely distributed population makes it challenging to deliver health care services to rural and remote areas, especially to herders who lead a nomadic lifestyle. Mongolia is prone to natural disasters such as earthquake, flooding and dzud (extremely cold weather). Mongolia has severe climatic conditions with long, cold winters and short, hot summer. During the last 70 years, the average annual temperature has increased by 2.14°C and is projected to increase up to 5°C by end the 21st Century. Surface water inventory conducted in 2007 revealed that 852 rivers and streams out of a total of 5,128 have dried up. In addition, intensive warming would result in accelerated desertification. Currently, 78.2% of territory of Mongolia has been affected by middle and high rate of decertification.

HEALTH & DEVELOPMENT

Impediments to poverty reduction Despite the positive trends in economic growth, thousands of Mongolians lead highly insecure lives. There have been growing disparities between rural and urban areas (including discrepancy within urban areas). These disparities are reflected in many dimensions including poor access to basic social services in underserved sub-urban and rural areas, in urban housing and infrastructure, and in access to information. Effective public provisioning in rural areas have to face the challenges of long distances, scattered populations and nomadic lifestyles.

Burden of communicable diseases Overall communicable diseases have decreased over the years, though still account for high proportion of overall DALYs and are of significant socio-economic importance due to their potential for causing outbreaks and health emergencies.

Burden of noncommunicable diseases (NCD) Mongolia is experiencing an epidemiological and demographic transition with decline in morbidity and mortality from communicable diseases and an increase in burden due to chronic and noncommunicable diseases as reflected in the five leading causes of mortality.

Maternal and child health The Government of Mongolia has placed a high priority on achieving Millennium Development Goal 5. Some of the major achievements of implementing the above strategies are associated with high coverage of antenatal care (87.7%) and delivery by skilled birth attendance (99.8%). However, providing maternal services to mobile and migrant population is a challenge.

Health sector responsibilities A long-term policy framework, the Health Sector Strategic Master Plan (2006-2015), was approved in 2005. The overall outcomes to be achieved by 2015 include increased life expectancy, a reduction in the infant, child and maternal mortality rates, improved nutritional status, particularly micronutrient status among children and women, improved access to safe drinking water and basic sanitation, prevention of HIV/AIDS, sustainable population growth, reduced household health expenditure, especially among the poor, a more effective, efficient and decentralized health system, and an increase in the number of client-centred and user-friendly health facilities and institutions.

Total population (2008) ¹	2,683,500
% Under 15 (2008) ¹	28.1
Population distribution % rural (2008) ¹	38.6
Life expectancy at birth (2008) ¹	67.2
Under-5 mortality rate per 1000 (2008) ¹	19.6
Maternal mortality rate per 100 000 live births (2008) ¹	49.0
Total expenditure on health as % of GDP (2008) ¹	3.2
General government expenditure on health as % of general government expenditure (2008) ²	9.5
Human Development Index Rank, out of 177 countries (2007/08/) ³	0.727
Gross National Income (GNI) per capita USD (2008) ⁴	1 639
Adult (15+) literacy rate (2008) ⁵	97.3
Adult male (15+) literacy rate (2000-2008) ⁵	96.5
Adult female (15+) literacy rate (2008) ⁵	97.8
% Population with access to improved drinking water source (2009) ⁶	54.5
% population with improved access to sanitation (2009) ⁶	43.1

Sources:

1. Health indicators 2008
2. Ministry of Health, Mongolia 2008
3. Human Development Report, UNDP 2007/2008
4. World Bank Atlas
5. UNESCO Institute for Statistics -estimate (2008)
6. National Development and Innovation Committee, Mongolia. The Millennium Development Goals Implementation, Third National Report, 2009

OPPORTUNITIES	CHALLENGES
<ul style="list-style-type: none"> MDG targets (4 and 5) for maternal and child mortality reduction on track High immunization coverage Declining trend in communicable diseases According NCD and human resource development as priorities of MOH Increased resource mobilization for priority areas Health sector master plan in place 	<ul style="list-style-type: none"> Disparities in health and weakness in PHC Suboptimal quality and mal-distribution of human resources Inadequate investment for health sector High burden of NCDs and Injuries Sustaining achievement of the MDGs 4, 5 and 6 Inadequate health sector preparedness and response for health security. Persisting high prevalence of some communicable diseases e.g. STI, Viral hepatitis, TB, pneumonia Environmental degradation, poor coverage of potable water, sanitation Weakness in aid coordination mechanisms



PARTNERS

Mongolia was among the most aid-dependent countries in the world with 2.5 billion USD of foreign aid received during 1991-2002. However, due to strong economic performance in last 5 years and nearly doubling of GDP, driven primarily by mining gains, Mongolia is not as aid-dependent as before. UNDP is contributing to achievement of the national MDGs through capacity-building, knowledge-sharing, forging partnerships, and policy dialogue. UNICEF mainly focuses on health, nutrition, child survival and growth, maternal health and newborn care, water and sanitation, behavior change communication, and HIV/AIDS. UNFPA's country programme has the Reproductive Health (RH) component. UNAIDS Regional Support Team, Asia and the Pacific has been supporting the areas of capacity development, implementation and monitoring of the national HIV/AIDS strategy, including to strengthen human rights-based and gender-responsive policies and approaches to reduce stigma and discrimination.

The Asian Development Bank has supported to improve infrastructure and service delivery in Mongolia. The World Bank, which is mainly focusing on poverty reduction programme, has not provided direct support to the health sector until very recently. The bank is currently supporting "avian influenza and human pandemic influenza preparedness and response project" and a water supply project which targets to the urban poor. Global Fund to fight AIDS, TB and Malaria (GFATM) has approved 6 grants for HIV/AIDS, TB and health sector strengthening focusing public health laboratories.

Bilateral support: Japan's Country Assistance Program for Mongolia in health sector has been mainly in the area of support to the National Immunization programme and procurement of medical equipments. German Technical Cooperation (GTZ) supported to reduce infectious diseases, morbidity and mortality from STI/HIV, and maternal and child health. Millennium Challenge Account for Mongolia, a US Government grant, supports the noncommunicable diseases (NCD) programmes. The World Vision, an international NGO, has been implementing various health related projects since 1995 in Mongolia with a view to improve maternal and child health, nutrition, TB, HIV/STIs prevention, health education, drinking water supply and food security in selected project sites. There are other NGOs, including faith based organizations such as Norwegian Lutheran Mission (NLM), International Red Cross Society, Mongolian Red Cross Society, Medicines Du Monde, Action De Faim and ADRA also support specific health projects/programmes.

OPPORTUNITIES	CHALLENGES
<ul style="list-style-type: none"> The United Nations System has been operating within the United Nations Development Assistance Framework (UNDAF) - and focusing specifically on Millennium Development Goals. The UNDAF (2007 - 2011) is seen as a joint UN response to support national development priorities of Mongolia. The UN system agencies coordinate their work within the UN Resident coordinator system through various theme groups and task forces. WHO is currently chairing the HIV/AIDS thematic group and is an active member on the Maternal and Reproductive Health Taskforce, Water and Sanitation, MDG Monitoring and Evaluation and Gender thematic working groups. The role of WHO as the specialized agency in health is well recognized within the UN country team. Agencies with health related programmes, particularly UNICEF and UNFPA work closely with WHO, especially for technical advice and actively engage in partnerships on health related programmes. 	<ul style="list-style-type: none"> Although envisaged as cross cutting, health is not prominent enough in the current UNDAF and is included within UNDAF outcome 1 "Pro-poor good quality socioeconomic services available to vulnerable population in disadvantaged regions and areas". While the HSSMS has the strategic objective to establish an effective sector wide management system based on sector-wide approaches, including enhancing coordination with partners and stakeholders, this has not been fully realized thus far. Health development partners expressed the need for an effective and efficient use of external resources. One of the critical areas is an importance of ensuring better aid coordination and more effective aid alignment for the attainment of the country-specific MDGs. Improvement of aid effectiveness is therefore one of the most challenging issues in Mongolia.

WHO STRATEGIC AGENDA (2010- 2015)

The strategic agenda has been developed for the next six years (2010 -2015) in line with the priorities identified in the Health Sector Master Plan of the Government of Mongolia and keeping in view:

- Key health and development challenges confronting the country as analyzed by WHO in full consultation with the government, national stakeholders and partners at country level;
- Contributions to health development by other development partners and identified challenges and gaps in health sector cooperation recognizing the potential adverse effects of the 2008/2009 severe global financial crisis;
- Lessons from the review of WHO's cooperation over the last CCS cycle and beyond;
- WHO's comparative advantage; and WHO's General Programme of Work, the strategic objectives in the Medium Term Strategic Plan and other regional and global orientations and priorities.

Five strategic priorities for WHO cooperation have been identified for the next six years:

- Health system strengthening through primary health care approach
- Scaling up prevention and control of NCDs, injuries, violence and their determinants
- Sustaining and accelerating the achievement of health related MDG targets
- Strengthening health security including control of communicable and vaccine preventable diseases
- Strengthen environmental health management

ADDITIONAL INFORMATION

WHO Country Page

Western Pacific Country Health Information Profile Page

Mongolian Ministry of Health website

<http://www.un-mongolia.mn/who>

<http://www.wpro.who.int/countries/2009/mog/>

<http://english.moh.mn/>

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