World Health Organization

Health Action in Crises

# Djibouti


## The Present Context

Ranked 150th out of 177 on the UNDP Human Development Index, Djibouti is classified as both a least developed and a low-income, food-deficit country. The economy is largely service-based and agriculture accounts for only 3% of the GDP. It is dependant on imports for the majority of its food requirements. According to national statistics approximately 60% of the population live under the national poverty line. Extreme poverty increased from 9.6% in 1996 to 42.2% In 2002. The country continues to recover from the 1990-1994 civil war that led to large displacements of people and the destruction of schools and clinics.

Djibouti's infant and under-five mortality rates are among the highest in Sub-Saharan Africa. The poor health status of children is primarily a result of widespread malnutrition. Suffering from the regional instability in the Horn of Africa, it is home to approximately 27 000 refugees. There are pockets of severe food, water and health insecurity in the interior of the country.

Included in: ☒ CAP for the Horn of Africa 2006 Crisis involving: Part of the Population

**Millennium Development Goals in Djibouti**

| Eradicate extreme poverty & hunger | Achieve universal primary education | Promote gender equality | Reduce child mortality | Improve maternal health | Combat HIV/AIDS, malaria etc. | Ensure environmental sustainability | Global partnership for development |
|---|---|---|---|---|---|---|---|
| … | Far behind/ Slipping back | Far behind/ On track | Far behind | … | … | On track | … |

Note: Information is based on one to two specific targets for each major goal. The selection of goals and targets in the table is based principally on data availability.

Source: UNDP, Human Development Report. 2002

## Main Public Health Issues and Concerns

### Health Status

- Infant and under-five mortality are 97 and 138 per 1000 live births respectively. Acute respiratory infections, diarrhoea and malnutrition are the main causes of morbidity and mortality among children under five.
- Life expectancy at birth is estimated at 52.8 years.
- Tuberculosis, diarrhoeal diseases, malaria and measles are among the main causes of morbidity and mortality.
- More than 30% of children under five suffer from malnutrition, accounting for a third of all deaths in that age group.
- Maternal mortality is estimated at 730 per 100 000 live births.
- The current AIDS prevalence rate is about 3%.
- The incidence of TB is 734 per 100 000 and rising. The percentage of multidrug resistant cases is 1.6%.

**Health System**

- The health system is mostly curative-oriented; investment in preventive medicine is scarce.
- The system is characterized by weak infrastructure, lack of equipment and poor maintenance.
- There is a lack of trained and motivated personnel. Staff is insufficient in terms of quantity and quality, as well as in terms of geographical distribution. According to the MoH, the General Hospital Peltier, located in the capital, absorbs 70% of the country's public health workforce.
- Vaccination coverage is low; this is due to the poor utilization rate of services, the unavailability of immunization services in health facilities and poor geographical access to services in some regions.
- The MoH has set up a consultative committee on the prevention and management of outbreaks. A surveillance system for communicable diseases has been put in place, including immediate notification as well as weekly and monthly reporting.
- There are an estimated 1.6 physicians, 8 nurses and midwives, 9.6 health workers and 16 hospital beds per 10 000 people.
- Total expenditure on health is approximately 5.8% of the GDP. Public expenditure on health is 67.3% of the total health expenditure and private expenditure is 32.7%. Per capita total expenditure on health is US$ 78.
- There are three categories of health providers: the public sector includes all the facilities related to the Ministry of Health (MoH), the Ministry of Interior and the Ministry of Defence (as well as the French military cooperation hospital); a semi-public sector depending on the Social Services and the private sector (the French military hospital provides also private health care).

## Main Sector Priorities

The main health sector priorities include:

- Supporting national priority health programmes and basic services, including surveillance and outbreak control, mother and child health, immunization, mental health, education, etc.
- Supporting the health sector reform and the implementation of a primary health care system;
- Reviewing the health financing system;
- Developing human resources as well as capacity building for health staff;
- Developing a national policy on the supply and use of essential medicines;

With the regards to the ongoing food crisis, the main humanitarian priorities include:

- Rapid assessments of the relief requirements;
- Emergency measles and meningitis immunization;
- Nutritional monitoring through the establishment of a surveillance system;
- Provision of essential drugs against diarrhoeal diseases, malaria and acute respiratory infections,
- Expansion of basic health service coverage in rural districts;
- Provision of clean drinking water and appropriate human resources for technical support.