

# Seychelles



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Total population (2010) <sup>1</sup>	88,311	
% Under 15 (2010)¹	22.3%	
Population distribution % rural (Newer figures available)	Not applicable	
Life expectancy at birth (2011) <sup>2</sup>	73	
Under-5 mortality rate per 1000 (2010) <sup>3</sup>	13	
Maternal mortality rate per 100 000 live births (2010) <sup>3</sup>	0	
Total expenditure on health as % of GDP (2009) <sup>4</sup>	3.3	
General government expenditure on health as % of general government expenditure (2009) <sup>4</sup>	8.6%	
Human Development Index Rank, out of 177 countries (2007) <sup>5</sup>	50	
Gross National Income (GNI) per capita USD (2009) <sup>6</sup>	9,021	
Adult (15+) literacy rate (2007) <sup>7</sup>	96%	
Adult male (12+) literacy rate (2007) <sup>7</sup>	96%	
Adult female (12+) literacy rate s)-2007) <sup>7</sup>	96%	
% Population with access to improved drinking water source (2002) <sup>7</sup>	87	
% population with improved access to sanitation (2002) <sup>7</sup>	94	

## Source

- 1: National Bureau of Statistics Preliminary Report of 2010 Population Census
- 2. National Bureau of Statistics, March 2011
- 3.Seychelles MDG report 2010
- 4. Ministry Of Finance
- 5. MOH/NHA Preliminary Report 2010
- 6. UNDP NDR 2007
- 7 National Bureau of Statistics, 2002 Population census

# Cooperation Strategy

Seychelles has a total population of 88,311 within 24,142 households in 25 districts in 2010 (National Bureau of Statistics. Preliminary 2010 Population Census). A demographic transition of upward population shift from a younger to an older population is occurring since1971 leading to increasing ageing population ratio and with concomitant epidemiological transition to non-infectious diseases.

With its land area of 445 sq. km., the Republic of Seychelles consists of an archipelago of about 116 islands in the South-Western Indian Ocean at more than 1,500 km from the East Coast of Africa indicating its remoteness from the mainland continent. The country's economic zone, however, covers an area of 1.3 million sq. km. The main islands are Mahé, Praslin and La Digue and together they share the bulk of all economic activities. Victoria, the capital of Seychelles, is located on Mahé the largest of the three main islands. Whilst three main islands are permanently habited, the remaining islands are sparsely populated and residence is not permanent.

The Republic of Seychelles achieved its independence from Britain on 29th June 1976. The first multi-party presidential and national assembly (parliamentary) elections were held in 1993. The constitution, adopted in 1993 guarantees fundamental human rights, ensures equal opportunity and protection for men and women, and provides for the separation of powers of the three branches of government (the executive, the legislative and the judiciary). The National Assembly has 34 members, among whom, 25 are elected and 9 nominated on a proportional basis.

# **HEALTH & DEVELOPMENT**

Although Seychelles is categorized as a middle income country, with high Human Development Index, the economy is very vulnerable to external economic shocks.

The Government of Seychelles, inspired by the Constitution of the Republic of Seychelles and the Health Policy Declaration, underscoring the principles of basic human rights, equity provides free basic health service to the entire population. The government health expenditure is 8.6% of the general government expenditure in 2009. A three-tier health care system exists with the bulk of highly specialized treatment provided overseas and almost fully funded by government.

Seychelles has achieved impressive health care indicators and is on track for most of the Millennium Development Goals. As a result of very high coverage rates of above 95%, vaccine-preventable diseases have almost disappeared from the island leading to low under five mortality rate of 13/1000 live births in 2009. Life expectancy in 2010 stood at 73.1 years, 77.5for females and 69.1 for males (National Bureau of Statistics, Statistical Abstract 2011).

Further progress is needed especially in the control of non-communicable diseases (diabetes, cardiovascular diseases injuries, neoplasm and mental illnesses) which are currently the main burden of diseases due to unhealthy lifestyles, urbanization, aging population, tobacco and alcohol abuse and rising levels of domestic violence. Increases in sexually transmitted diseases including AIDS, emerging diseases such as chikungunya and dengue and potential threats from Human Influenza viruses call for continued robust surveillance using the IDSR and IHR strategies.

### **OPPORTUNITIES CHALLENGES** High political commitment of the Government Problems with Sustainability of Health towards health Financing; Major investment by government in health Increase of HIV/AIDS epidemic infrastructure and services; Natural disasters and pandemic diseases Vaccine Preventable diseases eliminated and High proportion of expatriate health specialists most infectious diseases under control leading problems of sustainability and varying Accessibility to health facilities the treatment cultures population Absence of monitoring and evaluation Good network of communication facilities mechanism to support program within the country; implementation assessment High level of human development. High turnover of programme managers and attrition of qualified staff; Health related MDGs are on track Lack of higher learning facilities for health care Free health care at the point of use workers

# **PARTNERS**

The Government of Seychelles has a number of key partners for the health sector, including the United Nations, bilateral partners, Financial Institutions such as African Development Bank (ADB), World Bank and International Monetary Fund, the Arab Bank for Economic Development in Africa (BADEA), and Non-Governmental Organizations, Regional Institutions such as the Indian Ocean Commission (IOC), SADC who contribute to the overall Health Development, as set out in the Seychelles Health Strategic Framework 2006-2016 and Vision 2017. The focus of Development assistance for the health sector includes infectious and non-communicable disease control, Health Systems Strengthening and infrastructure development. Having such a high Human Development Index and excellent Health indicators, the Official Development Assistance (ODA) provided to Seychelles has gradually declined by over 50% since year 2000. The World Health Organization is the only resident UN agency in Seychelles, and the government's major multilateral partner in health care with an average biennial budget of \$ 1.6 million.

The responsibility for coordinating grants and technical assistance is vested with the Ministry of Foreign Affairs. Whereas no formal coordination mechanisms exist, the Ministry of Foreign Affairs is committed to promoting sector-wide approaches in the coordination of grants and technical assistance in order to ensure performance. The Ministry of Health implement monitor and evaluate Development Assistance for Health.

	OPPPORTUNITIES		CHALLENGES
•	Availability of Health Sector Strategic Framework as entry point for development of plans.	•	Limited number of partners and funding opportunities for health due to Seychelles status as middle income developing country
•	The financial crises and financial reform in country has attracted the more Health Partners in Health to Seychelles	•	WHO as only resident UN organization in Seychelles  Lack of Formal mechanism for coordination of partners in Health in
•	Support from WHO for Health Systems Strengthening e.g. HRH reform and Policy development and Health Financing		Seychelles
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# WHO STRATEGIC AGENDA

- 1. Support the development and implementation of integrated Intersectoral approaches in order to prevent and reduce disease, disability and premature death from non-communicable conditions, mental disorders, violence and injuries
  - 1.1. Strengthen capacity for the development and implementation of policies, strategies and regulations for chronic non-communicable conditions, mental disorders, violence and injuries, including a Monitoring and Evaluation framework;
  - 1.2. Strengthen Intersectoral collaboration for prevention treatment, rehabilitation of non communicable diseases.
- 2. Reduce the health, social and economic burden of communicable diseases and Public Health Event of International Concern
  - 2.1. Strengthen national capacity for disease surveillance and response to major epidemic prone diseases, for globally targeted diseases, for new and emerging diseases, for pandemic-prone diseases and Public Health Event of International Concern in line with Integrated Disease Surveillance (IDS) strategy and International Health Regulations (IHR);
  - 2.2. Strengthen national capacity for the comprehensive and integrated management of STI, HIV/AIDS, TB and leprosy;
- Reduce the health consequence of emergent disasters crises and conflicts and minimize their social and economic impact
  - 3.1. Provide technical support in capacity building for national emergency preparedness and disasters response;
  - 3.2. Implement the Libreville Declaration on Health and environment
- 4. Enhance Health System Performance and Health Research
  - 4.1. Strengthen Human resource for Health strategies and policies in order to enhance the capacity of MOH for improved implementation of health interventions
  - 4.2. Develop MOH capacity for developing, implementing, monitoring and evaluating a comprehensive Health Financing System in Seychelles
  - 4.3. Strengthen the national health systems research for decision making.
  - 4.4. Assess, develop and implement plans to improve health information systems as well as establish a framework for the monitoring and evaluating national/global goals and targets;
  - 4.5. Provide support to develop national drug policy and plan.
  - 4.6. Strengthen national capacity for effective regulations to ensure quality and safe medical products and technologies including blood transfusion and administration of parenteral therapy;
  - 4.7. Provide technical support in strengthening the management structure for maintenance of medical and hospital equipment.
- 5. 5.0 Promote healthy lifestyles, healthy environment, multisectoral public policies and address the socioeconomic determinants of Health
  - 5.1. Improve country capacity for occupational and environmental health prevention, service delivery and surveillance Provide technical assistance to strengthen community development initiatives to address health determinants, meet local needs and promote community participations
  - 5.2. Strengthen health promotion capacity nationally and integrated across all relevant programmes
  - 5.3. Strengthen multi-sectoral collaboration in health related activities and advocate for health to be addressed as a key element for country's development

# **ADDITIONAL INFORMATION**

Website: http://www.who.int/countries/ WHO/CCO/11.05/Seychelles

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