

## United Arab Emirates



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Total population (2005) <sup>1</sup>	4 210 000
% population under 15 (2005) <sup>1</sup>	25.5
Population distribution: % rural (2005) <sup>1</sup>	21.0
Life expectancy at birth in years (2002) <sup>1</sup>	73
Under 5 mortality rate per 1000 live births (2002) <sup>1</sup>	10.2
Maternal mortality ratio per 100 000 live births (2005) <sup>1</sup>	1.0
Total expenditure on health as % of GDP (2003) <sup>1</sup>	3.3
General government expenditure on health as % of general government expenditure (2003) <sup>1</sup>	8.0
Human Development Index Rank, out of 177 countries (2004) <sup>2</sup>	49
Adult male (15+) literacy rate (%) (2002) <sup>1</sup>	84
Adult female (15+) literacy rate (%) (2002) <sup>1</sup>	91

### References:

<sup>1</sup> *The Work of WHO in the Eastern Mediterranean Region – Annual Report of the Regional Director*, Cairo, EMRO, 2006

<sup>2</sup> *Human Development Report*, New York, UNDP, 2006.

The United Arab Emirates (UAE) is a small, high-income country with rich natural resources. The country enjoys peace, stability and actively seeks and facilitates investment from all over the world. The UAE is the world's fourth largest oil producer and the richest state per head of population. It is the new commercial hub of the Middle East. Few nations have achieved such radical development, only 50 years ago; there was no electricity, no plumbing, not a single public hospital or modern school, no bridges and only a handful of cars. The gross national income increased from 4.7 billion AED in 1972 to 229 billion AED in 2002, with an annual growth rate of 13.8%. The gross domestic product per capita reached 69 000 AED in 2002, the gross domestic product increased from 6.5 billion AED in 1972 to 260 billion AED in 2002, with an annual growth rate of 13%. Non-oil sectors contributed 188 billion AED in 2002 compared to 2.4 billion AED in 1972, investment in all its forms increased from 1.7 billion AED in 1972 to 60 billion AED in 2002 in an annual growth rate of 12.6%. The Government allocated all necessary funds to ensure good education for all citizens. The number of students increased from 481 000 in 1995 to 564 100 in 2000.

## HEALTH & DEVELOPMENT

- Organization of health service and decentralization:** Health delivery is provided by six different federated authorities and nine regionalized medical districts. The primary health care services are decentralized to the regions, with some powers and autonomy. 26 hospitals and 106 primary health care centres provide a comprehensive health care to all people. The decentralization has improved the quality of care.
- Maternal and child health:** The low maternal mortality rate is due to excellent maternal health services, where 98% of deliveries are done by trained health personnel. UAE is polio-free and is closing in on elimination of measles. The good immunization coverage has resulted in sharp reduction and very low incidence of the other vaccine preventable childhood diseases.
- Communicable diseases** have had a sharp decline in recent years, yet they still pose a problem. Viral hepatitis, tuberculosis and meningococcal meningitis are still a concern. A HIV/AIDS control programme has been initiated since the late 1980s and has helped in maintaining very low levels of infected cases. The country is free of malaria transmission but has sporadic typhoid fever and imported leprosy cases.
- Noncommunicable diseases** such as cardiovascular diseases, cancers, congenital anomalies, and diabetes mellitus are the leading causes of mortality. The Ministry of Health is working towards a well defined prevention and control plan for cardiovascular diseases. In spite of an active anti-smoking programme, tobacco consumption still poses a problem, especially among young people.
- Accidents** are a major health problem. They have been ranked as the second leading cause of death in the country. The predominant cause of death was road traffic accidents, which accounted for 70.5% (620 cases) of all accidental deaths. Males accounted for 88.5% of these deaths.
- Environmental health:** The rapid growth and urbanization have caused air quality deterioration in the large cities increasing the incidence of respiratory diseases. Healthy Cities and Healthy Environment for Children can assist to improve the environment

OPPORTUNITIES	CHALLENGES
<ul style="list-style-type: none"> <li>Availability of funds and full government commitment for investment in health.</li> <li>Firm conviction among national health decision makers and professionals for health sector reform, health financing reform and quality assurance.</li> <li>Since the country is a federal state regionalization and decentralization are facilitated.</li> </ul>	<ul style="list-style-type: none"> <li>Strengthening the organization of health services for planning, coordination, monitoring and evaluation, hospital management and management in general.</li> <li>How to reform the family care strengthening referral system, and improve quality of care and accreditation.</li> <li>How to upgrade laws and procedures, develop health financing options to arrive at fare financing health plan to run curative and preventive health services.</li> <li>How to find innovative ways and means to increase the number of national health professionals and streamline rigid procedures to facilitate their recruitments.</li> <li>How to consolidate ongoing scattered health educations activities and develop a well coordinated national health education campaign and build infrastructure to use internet and deploy e-health solutions in health care institutions.</li> <li>How to develop a well coordinated digitally formatted health information system to support the country cooperation strategy implementation and monitoring.</li> </ul>

## PARTNERS

Being a high income country UAE finances its ambitious and accelerating development activities and there are no external donors. In health the government has an extensive collaboration with WHO, especially in the areas of coordination, joint planning, transparency, information sharing and some other logistic and administrative measures. In addition, there is collaboration between Ministry of Health, UNDP and UNICEF. The functions of these United Nations agencies are primarily an exchange of ideas and technical assistance for areas such as social and economic development, services, education, health and management. UNDP assists the country in promoting the role of women in development, institutional and human resources development; international trade and management and regeneration of natural resources and the environment. There are many funding and benevolent and charity agencies in the country. The major governmental organizations are the Red Crescent, Women's Organization, Marriage Fund, Zayed and Makhtoum Charities. Each Emirate has various charity organizations. The funds for all of these organizations come from governmental sources, charity or special funds of the rulers.

OPPORTUNITIES	CHALLENGES
<ul style="list-style-type: none"> <li>There are no formalized coordination of efforts by various nongovernmental organizations (NGOs) and charities involved in health.</li> </ul>	

## WHO STRATEGIC AGENDA

- **Strengthening institutional capabilities of the Ministry of Health and health system** covering; policy development, planning, management, norms, regulation, quality assurance, financing of health care through expansion of social health insurance, particularly in the private sector, improving regionalization of service delivery, strengthening decentralization, and referral system.
- **Improving human resources development:** Strengthening of human resources development functions covering; assessment, planning, training, production, human resources management, career development and partnership between health care providers, professional associations, universities and other training institutions.
- **Reduction of burden of diseases, especially noncommunicable diseases:** Strengthening and supporting; disease surveillance system, development of multisectoral strategies for prevention, control and management of non-communicable diseases, and improving trend assessment and information.
- **Improving intersectoral collaboration and community involvement:** Strengthening healthy settings approaches, including healthy cities, health-promoting schools, healthy workplaces, and health-promoting hospitals.
- **Enhancing health research:** Promotion of culture of research, capacity-building in research and development and improving the linkage between research and policies based on evidence.



## ADDITIONAL INFORMATION

WHO country page <http://www.who.int/countries/are/en/>

EMRO country profile page <http://www.emro.who.int/emrinfo/index.asp?Ctry=uae>

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