HEALTH SITUATION

Seychelles is the only African country now declared a high-income country having made remarkable political, social and economic progress in the recent past. Instituting a firm social growth mechanism embedded in its constitution, Seychelles provides universal health coverage for a comprehensive health package at all levels including anti-retroviral therapy and non-communicable diseases, universal access to education at all levels and safe drinking water, good sanitation and housing. High political commitment for social services including health enabled the country to achieve most of the MDGs.

Notwithstanding the country’s impressive health achievements, emerging and re-emerging issues remain a challenge. Whilst responding to health, climate change, environmental and other threats faced by other small island developing states, Seychelles is additionally burdened by increasing non-communicable diseases due to prevailing risk factors such as poor diet, physical inactivity, substance abuse and increasing alcohol consumption. As a result, the country’s health expenditure continuous to balloon raising doubts concerning sustainability of the tax-based health financing in the medium term.

HEALTH POLICIES AND SYSTEMS

Comprehensive national health policy and national health strategy have been elaborated within the context of Sustainable Development Strategy. Seychelles is resolutely committed towards attainment of health SDGs through consolidation of MDGs gains, enhanced focus on patient-centred quality health services, preventive and promotive services for NCDs, innovative interventions to address HIV/AIDS and Hepatitis C, whilst strengthening health security using an all hazard approach.

In order to achieve the aforementioned, Seychelles recognises the need to improve health workforce productivity and sustainability including availability of specialised health workers. An identified high priority is improvement of the health information system for evidence-based policy decision-making and incremental shift to a results-based management approach. Redesigned service delivery system focuses on person centeredness with an emphasis on community involvement in health actions through the “my health, my responsibility” campaign. Better and more efficient health financing modalities are being explored to improve efficiency of use of available resources and to introduce innovation for sustainability.

COORDINATION FOR HEALTH

Due to the high-income status, very negligible development partners work in Seychelles health sector. WHO remains the main partner to Government in health due to its unique mandate providing much needed policy advice and technical support to address the MDG unmet needs as the country committedly advances towards SDG attainment.

Seychelles has been in the forefront of sustainable development within the Indian Ocean Countries network as well as the AFRO Small Island Developing States (SIDS) platform using these avenues to learn and share experiences.

Seychelles became a Delivering as One (DaO) country in 2013, bringing greater harmonization and alignment of cooperation programs in the UN. The work of UN agencies locally is coordinated through the Strategic Partnership Agreement 2016-2020 (SPA), the overarching agreement between the UN System and the Government of Seychelles. The SPA is built around three results groups: Blue and Green economy; Health, HIV/AIDS and substance abuse and Rule of Law.

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<th>Strategic Priorities</th>
<th>Main Focus Areas for WHO Cooperation</th>
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| **STRATEGIC PRIORITY 1:** Halt, and reversal of the rising burden of NCDs through a multi-sectoral approach to address the 4 diseases and 4 risk factors most responsible for current & future NCDs in Seychelles | o Strengthen the capacity of the health system to implement the NCD strategic plan with specific focus on alcohol and tobacco control, plus promoting healthy nutrition and lifestyles  
o Improve access to interventions addressing substance use and abuse and rehabilitative services to address drug use and mental health challenges  
o Improved capacity for evidence generation on the magnitude, root causes and consequences of violence and injuries and the development of prevention strategies. |
| **STRATEGIC PRIORITY 2:** Introduction of new and ensuring sustained delivery of existing interventions targeting emerging or re-emerging conditions to eradicate, control and/or eliminate targeted communicable diseases | o Strengthen the national capacity to prevent, detect and respond to health security threats in line with the International Health Regulations (IHR)  
o Consolidate immunization activities, with a focus on vaccination quality assurance, initiation of new immunization products & technologies, and accelerating polio end-game initiatives.  
o Support equitable access to innovative approaches and evidence based interventions for prevention, treatment and care of HIV/AIDS, STIs and Hepatitis. |
| **STRATEGIC PRIORITY 3:** Putting in place innovations in quality, effectiveness & responsiveness in provision of essential services focusing on person centeredness, client management & service organization | o Establish innovations in client management that improve person centeredness, targeting improvements in quality assurance, standards setting, accreditation, and technology adoption  
o Improve health information systems design and effectiveness, targeting systems for research and knowledge management, patient management and vital statistics  
o Modernized health service delivery system, with prioritization of norms, standards and protocols for effective service delivery, innovative financing approaches, and reoriented organization of services |
| **STRATEGIC PRIORITY 4:** Attaining a fit for purpose and motivated health workforce through improvements in regulation, production and management of the health workforce | o Establish a system and a comprehensive long-term plan for the production and management of human resources for health based on the national health policy and strategic plan.  
o Increase skills supply through pre-service medical education, continuous professional development, increased career development opportunities and targeted recruitment.  
o Increase productivity of the health workforce through process reengineering, performance management, strategies for staff retention, motivation and optimal use of public and private sector skills. |
| **STRATEGIC PRIORITY 5:** Achieving health for all at all ages through the promotion of health through the life course | o Improve health services for women, children, adolescents and any underserved age cohorts  
o Enhance the capacity for provision of health services for the elderly including palliation.  
o Increase scope of services for vulnerable target groups with special needs across the life course |