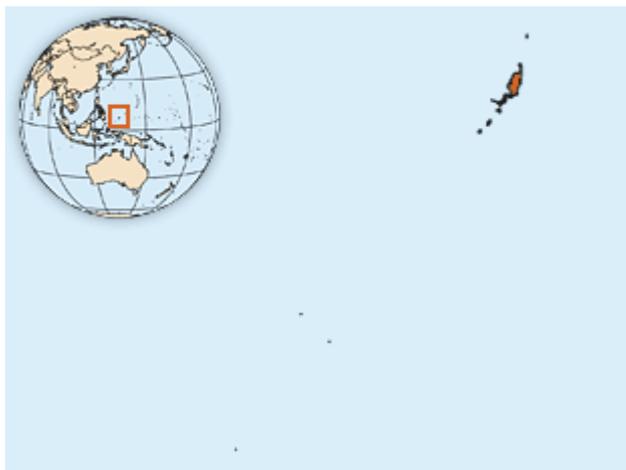


Palau



<http://www.who.int/countries/en/>

WHO region	Western Pacific
World Bank income group	Upper-middle-income
Child health	
Infants exclusively breastfed for the first six months of life (%) (1)	
Diphtheria tetanus toxoid and pertussis (DTP3) immunization coverage among 1-year-olds (%) (2016)	98
Demographic and socioeconomic statistics	
Life expectancy at birth (years) (1)	
Population (in thousands) total (2015)	21.3
% Population under 15 (2015)	29.6
% Population over 60 (2015)	9.7
Poverty headcount ratio at \$1.25 a day (PPP) (% of population) (1)	
Literacy rate among adults aged >= 15 years (%) (1)	
Gender Inequality Index rank (2014)	...
Human Development Index rank (2014)	60
Health systems	
Total expenditure on health as a percentage of gross domestic product (2014)	9.02
Private expenditure on health as a percentage of total expenditure on health (2014)	27.60
General government expenditure on health as a percentage of total government expenditure (2014)	18.11
Physicians density (per 1000 population) (2014)	1.185
Nursing and midwifery personnel density (per 1000 population) (2014)	5.261
Mortality and global health estimates	
Neonatal mortality rate (per 1000 live births) (2016)	8.4 [4.0-17.2]
Under-five mortality rate (probability of dying by age 5 per 1000 live births) (2016)	15.9 [8.5-30.5]
Maternal mortality ratio (per 100 000 live births) (1)	
Births attended by skilled health personnel (%) (2015)	100.0
Public health and environment	
Population using safely managed sanitation services (%) (2015)	20 (Total) 16 (Urban)
Population using safely managed drinking water services (%) (1)	

Sources of data:
Global Health Observatory May 2017
<http://apps.who.int/gho/data/node.cco>

HEALTH SITUATION

The population of Palau was estimated to be around 17, 770 in 2013 - of which approximately 69.9% are Palauan, 15.3% Filipino and 4.9% Chinese. In the coming years, there is expected to be an increase in foreign investment as well as the number of workers on the island. This will result in a number of environmental concerns, including water pollution due to the lack of sufficient land area for proper waste disposal, and the degradation of air and marine quality due to increased industrial activity.

Furthermore, the burden of diabetes, heart disease, obesity and kidney failure is increasing in Palau. Belau National Hospital is the main health facility in the country, with additional community centres and satellite dispensaries for more remote areas. However, as the need for quality health-care increases, cost evaluations are needed for off-island medical referrals, haemodialysis and intensive care services, and for the financial sustainability of a secondary health care facility.

HEALTH POLICIES AND SYSTEMS

The *Ministry of Health Strategic Plan 2014–2018* outlines the strategic priorities to: provide accessible and high-quality patient-centred hospital services; provide accessible and high-quality primary and preventive services; ensure effective partnerships are developed and maintained; value the people and support their growth and development; and ensure that the administrative and support services are accountable and sustainable.

According to the plan, the vision of the Ministry of Health is one of healthy communities with access to comprehensive health-care services. The Ministry focuses on strengthening health systems by providing holistic care, integrating services, and maintaining effective partnerships with staff, patients, the community and partners.

An annual operational plan for each of the bureaus under the Ministry is also in place to provide details on how each of the bureaus achieves its priorities.

COOPERATION FOR HEALTH

In implementing this strategy, WHO and the Ministry of Health will work with other government ministries, other sectors, academia, civil society, other United Nations agencies, bilateral development partners, regional and global health initiatives, philanthropic foundations and others in support of planned national health priorities.

WHO COUNTRY COOPERATION STRATEGIC AGENDA (2018–2022)

Strategic Priorities	Main Focus Areas for WHO Cooperation
<p>STRATEGIC PRIORITY 1:</p> <p>To provide accessible and quality people-centred preventive, primary and hospital services for noncommunicable diseases (NCDs) as a priority</p>	<ol style="list-style-type: none"> 1.1. Implement the WHO Framework Convention on Tobacco Control through several key aspects of tobacco control including graphic health warnings, tackling tobacco industry interference, reducing second-hand smoke and promoting cessation. 1.2. Establish partnerships between community and primary health care services for community-based rehabilitation. 1.3. Work on alcohol harm reduction through restrictions or bans on advertising, marketing and promotions. 1.4. Endorse further “sin taxes” on unhealthy food based on experiences in the tobacco and alcohol areas. 1.5. Conduct NCD surveillance activities. 1.6. Draft traffic accident prevention regulation by 2018.
<p>STRATEGIC PRIORITY 2:</p> <p>To effectively manage and support the health workforce through the existing fellowship and internship programmes for new graduates overseas</p>	<ol style="list-style-type: none"> 2.1. Increase the number of sponsored course students through Pacific Open Learning Health Network each year and strengthening continuing professional development. 2.2. Develop an internship programme and conducting a midterm evaluation by 2022.
<p>STRATEGIC PRIORITY 3:</p> <p>To strengthen the role of communities as partners in health</p>	<ol style="list-style-type: none"> 3.1. Profile the health situation of individuals and communities, linking people’s health needs to the health system. 3.2. Develop capacities of communities on health planning to ensure health needs and challenges are reflected in national policies strategies and plans.