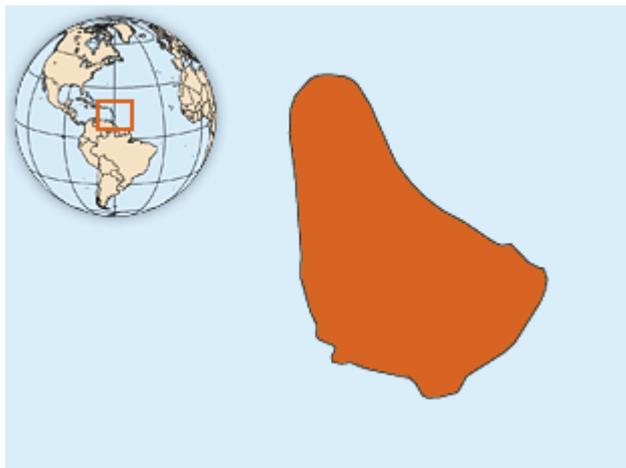


Barbados



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

WHO region	Americas
World Bank income group	High-income
Child health	
Infants exclusively breastfed for the first six months of life (%) (2012)	19.7
Diphtheria tetanus toxoid and pertussis (DTP3) immunization coverage among 1-year-olds (%) (2016)	97
Demographic and socioeconomic statistics	
Life expectancy at birth (years) (2015)	77.9 (Female) 73.1 (Male) 75.5 (Both sexes)
Population (in thousands) total (2015)	284.2
% Population under 15 (2015)	19.4
% Population over 60 (2015)	19.8
Poverty headcount ratio at \$1.25 a day (PPP) (% of population) ()	
Literacy rate among adults aged >= 15 years (%) ()	
Gender Inequality Index rank (2014)	69
Human Development Index rank (2014)	57
Health systems	
Total expenditure on health as a percentage of gross domestic product (2014)	7.47
Private expenditure on health as a percentage of total expenditure on health (2014)	36.48
General government expenditure on health as a percentage of total government expenditure (2014)	10.92
Physicians density (per 1000 population) ()	
Nursing and midwifery personnel density (per 1000 population) ()	
Mortality and global health estimates	
Neonatal mortality rate (per 1000 live births) (2016)	7.9 [5.9-10.3]
Under-five mortality rate (probability of dying by age 5 per 1000 live births) (2016)	12.3 [9.8-15.6]
Maternal mortality ratio (per 100 000 live births) (2015)	27 [19 - 37]
Births attended by skilled health personnel (%) (2013)	98.6
Public health and environment	
Population using safely managed sanitation services (%) ()	
Population using safely managed drinking water services (%) ()	

HEALTH SITUATION

Barbados is the easternmost of the Caribbean islands and is vulnerable to tropical storm systems. The population is aging with 12.9 % over 65 years old.

Eight of the top ten causes of death are from non-communicable diseases (NCDs) and approximately 5% of deaths from NCDs are in those less than 70 years old. One in four adults has at least one chronic disease. End stage renal failure is a growing public health problem, driven primarily by high levels of hypertension (50% of adults) and diabetes in the population.

New and re-emerging communicable diseases such as chikungunya, dengue and Zika virus present challenges. Dengue fever is endemic and from 2010–2015, there were 2,955 confirmed cases, and 12 deaths. Chikungunya virus was introduced in Barbados in 2014 resulting in 139 laboratory-confirmed cases and the Zika virus in 2015 resulting in one confirmed case of congenital syndrome.

With decreasing fiscal space to address rapidly increasing cost of health care, health care financing is a priority of the Government. The factors driving health care costs are complex, and include: high prevalence of NCDs; new and re-emerging communicable diseases; the public's expectations for services and ageing health infrastructure. Barbados formally assessed the status of the SDGs and is implementing initiatives to ensure achievement of the goals.

HEALTH POLICIES AND SYSTEMS

A draft National Strategic Plan for Health (NSPH) for the period 2017-2022 is currently awaiting finalization. The NSPH developed in collaboration with private and public sectors, civil society and community partners, will provide guidance and direction toward the shared vision. There are four main goals: Promotion and protection of the health of the population; provision of safe and quality centred services; improvement of the performance of the health system; and engagement and mobilization of partners in health. Strategic plans have been completed for NCDs, mental health and child obesity.

Barbados was accepted as a member of the International Atomic Energy Agency (IAEA) and this will support capacity building to respond to radiological emergencies and fulfill one of the two core capacities yet to be achieved. Membership will also ensure continued access to radiological materials for medical diagnostics. Activities are in progress for fulfilling core capacity for chemical events. The framework convention on tobacco control was ratified and the legislation to prohibit smoking in public places and buildings has been passed and implemented.

The Health System comprises of the public and private sectors and Non-Governmental Organizations. The Government is the main provider of health services through one (1) main acute care hospital, a psychiatric hospital, nine (9) polyclinics, four (4) District Hospitals and a rehabilitative centre for children.

COOPERATION FOR HEALTH

Fostering partnerships among community, civil society, the private sector, international agencies to achieve the goals of the NSHP and sustainable development are major priorities of the government. The Ministry of Health continues to collaborate with PAHO/WHO through the Biennial Work Programme and other specially funded projects. Barbados participated in the United Nations pilot project "Piloting Climate Change: Adaptation to Protect Human Health" which had as its objective "to increase the adaptive capacity of the national health system institutions, including field practitioners, to respond to and manage long-term and climate-sensitive health risks".

With support from HIV/AIDS World Bank project and PAHO/WHO, a phased implementation was done of a Health Information System (HIS), as part of an eHealth strategy in order to address the inefficiencies in clinical and support functions. Other important cooperation includes USA President's Emergency Plan for AIDS Relief (PEPFAR), USAID, UNFPA and UNICEF.

The Barbados National Registry (BNR) for NCDs, a population based registry established in 2009, has joint collaboration between the University of the West Indies and the MOH. The BNR has published five annual reports which show that on average, there is one stroke in Barbados per day and two heart attacks every three days.

Barbados has membership with regional health institutions including Caribbean Public Health Agency and Pan Caribbean Partnership against HIV/AIDS (PANCAP).



WHO COUNTRY COOPERATION STRATEGIC AGENDA (2018–2024)	
Strategic Priorities	Main Focus Areas for WHO Cooperation
<p>STRATEGIC PRIORITY 1: Strengthening health system with universal access and coverage through improved governance and sustainable financing</p>	<p>1.1 Develop and implement an Improved and sustainable governance and health financing mechanism (National health insurance development)</p> <p>1.2 Strengthen universal health coverage/ access to essential health services and products</p> <p>1.3 Improve Primary Health Care (PHC) with definition of service packages, aligning human resources accordingly</p>
<p>STRATEGIC PRIORITY 2: Reducing communicable diseases by eliminating HIV/STIs, tuberculosis, hepatitis B, and maintaining polio, measles, and rubella elimination</p>	<p>2.1 Implement strategies to advance the elimination of HIV/STIs, tuberculosis, hepatitis B and maintain elimination of poliomyelitis, measles, and rubella</p> <p>2.2 Develop and or strengthen antimicrobial resistance surveillance</p> <p>2.3 Strengthen capacity for integrated management of vector borne diseases including source reduction</p>
<p>STRATEGIC PRIORITY 3: Reducing risk factors and improving quality of care of NCDs including mental health and substance abuse</p>	<p>3.1 Integrate mental health and substance abuse in PHC including a focus on the child and adolescent and reducing risk factors and reinforcing protective factors</p> <p>3.2 Improve management and reduction of risk factors for NCDs</p> <p>3.3 Promote nutrition and link with NCDs, Baby Friendly Hospital initiative (BFHI) and food security</p> <p>3.4 Prevent disability and strengthen program for rehabilitation</p>
<p>STRATEGIC PRIORITY 4: Achieving optimum Family Health throughout the Life Course</p>	<p>4.1 Reduce preventable maternal, and child morbidity and mortality</p> <p>4.2 Improve access to comprehensive quality centred intervention for adolescent health and health of older persons</p> <p>4.3 Develop and or strengthen approaches to and programmes for men</p>
<p>STRATEGIC PRIORITY 5: Strengthening health emergencies and disaster management and reducing environmental threats and risks</p>	<p>5.1 Strengthen capacity to address Climate change and health impacts</p> <p>5.2 Strengthen capacity to address health emergencies and environmental threats and risks</p> <p>5.3 Strengthen capacity to address disaster management and risks</p>

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