



# Sri Lanka–WHO

Country Cooperation Strategy | 2018–2023



**World Health  
Organization**

Sri Lanka



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Country Cooperation Strategy | 2018–2023



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# Contents

Message from the Minister of Health, Nutrition and Indigenous Medicine	iv
Message from the Regional Director	v
Preface	vii
Acknowledgement	viii
Abbreviations	ix
Executive summary	x
1. Introduction	I
2. Health and development situation	
2.1 Political, social and macroeconomic context	4
2.2 Health status and system challenges	5
2.3 Health system response	13
2.4 Cross-cutting issues	14
2.5 WHO's engagement with development partners in Sri Lanka	16
2.6 Sri Lanka's role in global health	17
3. The Sustainable Development Goals and their implications for Sri Lanka	18
4. Strategic priorities for the WHO–Sri Lanka Country Cooperation Strategy	21
Strategic priority 1. Policy support for service delivery	21
Strategic priority 2. Addressing NCDs and their determinants	23
Strategic priority 3. Resilience in the face of health threats	25
Strategic priority 4. Knowledge-based approach to health	26
5. Implementing the strategic agenda	34
5.1 Means of delivery	34
5.2 Implications for the WHO Secretariat	34
5.3 Performance management and evaluation	35

# Message from the Minister of Health, Nutrition and Indigenous Medicine



In a culture that considers “good health to be the supreme wealth”, Sri Lanka is rich with many health-related successes. Dating back some 2500 years, our historical manuscripts have documented how the great leaders of the past had invested in health of their people, through developing not only curative care but also aspects of preventive and promotive health care. All governments that came into power since Independence have continued to support the provision of free health care to the population.

Since the first Country Cooperation Strategy (CCS) was launched in 2002, the country’s health system has achieved significant milestones and improved its resilience in the face of health threats and emergencies. However, as the system evolved, other challenges emerged. Communicable diseases have been replaced by noncommunicable diseases as the leading cause of disease burden in the country. Improved access to and quality of health care has increased longevity with a resultant increase in the proportion of the elderly. Increased urbanization, climate change and technological advances, while easing some of the hardships, have also brought in a new set of issues such as sedentary lifestyles and unhealthy food habits, threatening the health gains.

The CCS 2018–2023 provides a framework for the partnership between the World Health Organization (WHO) and the Ministry of Health and other partners, to effectively work towards the goal of universal health coverage. The CCS strategic priorities are aligned with the Sustainable Development Goals, global and regional health priorities and, more importantly, complement the national policies and strategies.

His Excellency, the President and the Government of Sri Lanka firmly believe that investment in health is key to a productive nation and economic prosperity. It will be the driver for our vision of becoming a high-income country by 2030 and achieving the Sustainable Development Goals.

I acknowledge that the fourth CCS was the product of a series of consultations with multiple stakeholders in health, from the Ministry of Health and other related ministries, as well as other UN agencies, development partners, academia, the private sector and civil society. I am thankful to WHO officials at all levels, especially the Regional Director and WHO Country Representative and her team of dedicated professionals, for their unwavering commitment to supporting the health sector. Together, we can work towards a healthier and wealthier Sri Lanka.

A handwritten signature in black ink, appearing to read 'Rajitha Senarathne'. The signature is fluid and cursive, with a large initial 'R'.

**Dr Rajitha Senarathne**

Minister of Health, Nutrition and Indigenous Medicine

## Message from the Regional Director



The fourth Country Cooperation Strategy (2018-2023) between the Government of Sri Lanka and World Health Organization comes at a time of demographic and epidemiologic transition within the health sector in the country. Successive governments in the past decades have prioritized health and education paid for by the state. This has paid rich dividends exemplified by the health sector success in the country making it a regional leader in ensuring health and well-being for its citizens and at modest investment. The country has had universal health care much before the global discourse on UHC.

While the gains in controlling and eliminating communicable diseases and ensuring health and survival of mothers, newborn and children continue, the country now faces new and emerging challenges posed by non-communicable diseases that now account for almost three quarters of mortality and morbidity. The island nation is also equally, if not more vulnerable to the adverse health impacts of climate change and environmental degradation. As the economy grows, so does disparity. Despite 'free' healthcare, out of pocket spending is on the rise.

To address the emerging health challenges, the Primary Health Care is undergoing a review and reorganization to ensure universal health coverage and it is opportune to have the new CCS framework to guide WHO strategic support to ensure UHC.

The current CCS has been developed following extensive consultations with key stakeholders across sectors and has been informed by contextual analysis and evidence. It follows the evolution of the WHO-CCS and has prioritization and focus on deliverables and outcomes.

The four strategic priorities of the CCS underpin WHO comparative advantage and address national priorities. The strategic priorities compliment the national health sector plan. I am glad to note that the CCS is guided by the Sustainable Development Agenda, is aligned to the UN Sustainable Development Framework for Sri Lanka and builds on the priorities identified in the Thirteenth General Programme of Work. The strategic priorities and focus areas are linked to the WHO SEA Regional flagships. I am confident that the inclusive approach for the development will continue through implementation and facilitate multi-sectoral cooperation that is key to achieving the sustainable development goals on health.

WHO continues to have a mutually beneficial and fruitful partnership with the Government of Sri Lanka to ensure attainment of highest possible standards of health

and well-being for all people in the country. We are privileged to be part of the journey as the country endeavors to sustain its extraordinary achievements in public health and overcome the emerging challenges.



**Dr Poonam Khetrpal Singh**  
Regional Director  
WHO South-East Asia Region

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