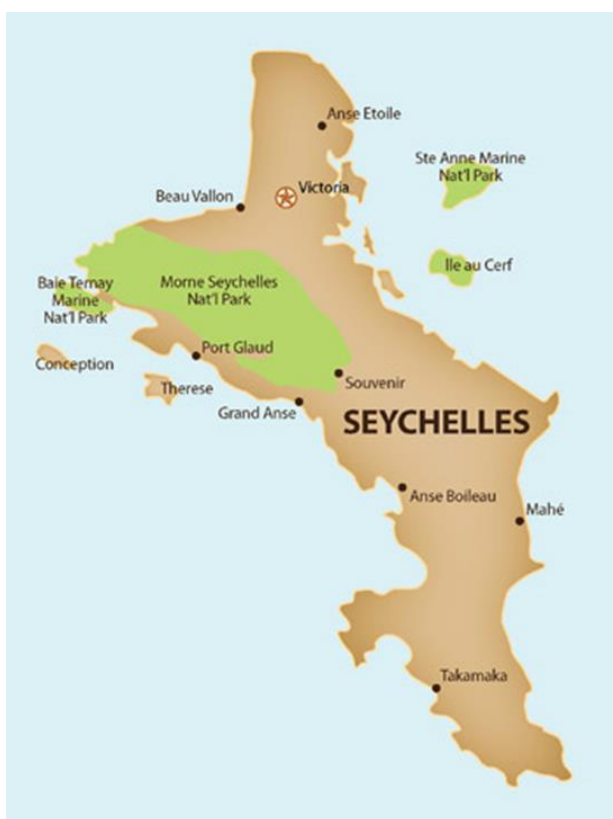




World Health
Organization

SEYCHELLES COUNTRY OFFICE



COUNTRY COOPERATION STRATEGY

2016-2021

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Abbreviations

ADB	African Development Bank	MNH	Mental Health and Substance Abuse Program
AIDS	Acquired Immunodeficiency Virus	MOH	Ministry of Health
AIDS	HIV/AIDS Program	MMR	Maternal Mortality Rate
AMS	Activity Management System	NAC	National AIDS Council
AU	Africa Union	NBS	National Bureau of Statistics
BADEA	Arab Bank for Economic Development in Africa	NCD	Non-Communicable Diseases
BCG	Bacille-Calmette-Guerin	NGO	Non-Governmental Organization
BPOA	Biennial Program of Work	NHA	National Health Accounts
CCS	Country Cooperation Strategy	NHP	National Health Policy
CDP	Chronic Diseases Program	NHSP	National Health Strategic Plan
CMT	Communication and Management Technologies Program	NIHSS	National Institute of Health and Social Studies
COMESA	Common Market for Eastern and Southern Africa	ODA	Official Development Assistance
CPC	Communicable Disease Prevention and Control Program	OECD	Organization for Economic Cooperation and Development
CRD	Communicable Disease Research Program	OPV	Oral Polio Vaccine
CSR	Epidemic Alert and Response Program	OSERs	Office Specific Expected Results
CVD	Cardiovascular Diseases	PCC	Person centred care
DAH	Development Assistance for Health	PHA	Public Health Authority
DaO	Delivering as One	PHC	Primary Health Care
DPT	Diphtheria-Pertussis-Tetanus	PHE	Health and Environment Program
EDM	Essential Medicines Program	PLWHA	People living with HIV or AIDS
EPI	Expanded Program for Immunization	PPE	Program Planning and Evaluation
FCTC	Framework Convention on Tobacco Control	PRM	Partnership and Resource Mobilization
GDP	Gross Domestic Product	PSS	Procurement and Supply Services
GNI	Gross National Income	RDO	Regional Director's Office/WR's Office
GPW	General Program of Work	SAMOA	SIDS Accelerated Modalities for Action
HCA	Health Care Agency	SARS	Severe Acute Respiratory Syndrome
HDR	Human Development Report	SDGs	Sustainable development goals
HFS	Health Financing and Social Protection Program	SIDS	Small Islands Developing States
HIV	Human Immunodeficiency Virus	SOs	WHO Strategic Objectives
HOON	Health of our Nation	SSDS	Seychelles Sustainable Development Strategy
HPR	Health Promotion Program	SSDSC	SSDS Steering Committee
HRH	Human Resources for Health Program	TB	Tuberculosis
HSD	Policy Making for Health in Development Program	TFR	Total Fertility Rate
HSP	Health Systems Policies and Services Delivery Program	TOB	Tobacco program
IDSR	Integrated Disease Surveillance and Response	UN	United Nations
IHR	International Health Regulations	UNAIDS	United Nations Program for AIDS
IMR	Infant Mortality rate	UNDP	United Nations Development Program
INJ	Violence, Injuries and Disabilities Program	UNFPA	United Nations Population Fund
IRS	Health Information and Research for Health Systems Program	VCT	Voluntary Counselling and Testing
IVD	Immunization and Vaccine Development Program	WHA	World Health Assembly
KAP	Knowledge Attitudes and Practices	WHO	World Health Organization
MERP	Macro-Economic Reform Program	WCO	WHO Country Office
MDG	Millennium Development Goals	WP	WHO Work plan

1 PREFACE

The WHO Third Generation Country Cooperation Strategy (CCS) crystallizes the major reform agenda adopted by the World Health Assembly with a view to strengthen WHO capacity and make its deliverables more responsive to country needs. It reflects the WHO Twelfth General Programme of Work at country level, and aims at achieving greater relevance of WHO's technical cooperation with Member States by focusing on identification of priorities and efficiency measures in the implementation of WHO Programme Budget. It takes into consideration the role of partners including non-state actors that support Governments and communities. The CCS is being formulated within the WHO Regional Office for Africa's Transformation Agenda that focuses on a smart focus, being result oriented, accountability and effective communication to internal and external partners.

This Third Generation CCS draws on lessons from the implementation of the first and second generation CCS, the country focus strategy and the United Nations Sustainable Development Goal Partnership Framework. The CCS is also in line with the global health context and the move towards Universal Health Coverage, integrating the principles of country ownership, a focus on results, inclusive partnerships and transparency and mutual accountability, as formulated in the Global Partnership for Effective Development Cooperation and the principles underlying the "Harmonization for Health in Africa" (HHA), UHC 2030 alliance and the "International Health Partnership Plus" (IHP+) initiatives, reflecting the policy of decentralization and enhancing capacity of Governments to improve outcomes of public health programmes.

The document has been developed in a consultative manner with key health stakeholders in the country and highlights the expectations of the work of the WHO secretariat. In line with the renewed country focus strategy, the CCS is to be used to communicate involvement of the WHO in Seychelles; formulate the WHO Seychelles work plan; advocate, mobilize resources and coordinate with partners; and shape the health dimension of the United Nations Strategic Partnership Agreement and other health partnerships in the country.

I commend the efficient and effective leadership role played by the Government in the conduct of this important exercise of developing the CCS. I also request the entire WHO staff under the stewardship of the WHO Representative to facilitate cost-effective implementation of the programmatic orientations of this document for improved health outcomes which contribute to better health and development in Seychelles.

Dr. Matshidiso Moeti
WHO Regional Director for Africa

Executive Summary

Over the past four decades, Seychelles has made remarkable social and economic progress. Its population enjoys free primary health care, which is guaranteed under the country's Constitution and there is universal access to health care including anti-retroviral therapy, universal access to safe drinking water, good sanitation and housing provision. The country is in the high human development category and is classified as a high income country. Gender parity in terms of educational levels and women participation in decision making is high. The country has made remarkable progress in healthcare development through a comprehensive healthcare infrastructure. The average life expectancy at birth reached 73.2 years in 2015 and infant and maternal mortality is low.

Despite its success in addressing some key health issues, Seychelles faces a number of challenges. In terms of impact and health outcomes, the life expectancy falls short of what is expected of a high income country and the 10 year gap in life expectancy between men and women needs attention. Mortality is primarily driven by non-communicable conditions, particularly cardiovascular, respiratory diseases and cancer that account for 60-70% of all deaths.

In the area of health services, a broad range of interventions are available, to respond to the health needs. A comprehensive national health policy and national health strategy have been elaborated, which are mainstreamed into the Sustainable Development Strategy for Seychelles. These are informed by the need to consolidate the achievements made in the MDGs, and build towards attaining the Sustainable Development Agenda imperatives. A strong emphasis is being placed on interventions that address risk factors contributing to HIV, Hepatitis C, and non-communicable conditions.

The health system is being re-engineered to align with this SDG focus. Efforts at improving health workforce sustainability and productivity are prioritized, to improve on availability of specialized health workers and reduce dependence on imported workers. In addition, innovative, IT driven methods for health information system management are being introduced, to accelerate availability and use of information in decision making. Service delivery systems are being redesigned to focus more on person centredness of services, and strengthen community / household capacities and involvement in health actions. Better and more efficient health financing modalities are being explored, to improve on the efficiency of use of available resources.

This 3rd generation CCS therefore defines how WHO will support Seychelles in attaining its health agenda, in the context of the SDGs. It was developed through extensive consultation with health and health related stakeholders in government and non-government entities active in Seychelles. It is informed by the National Health Strategic Plan, and the UN Strategic Partnership Agreement which define the Governments, and the UN focus during this period respectively.

The CCS is built around five strategic priorities that were identified for WHO cooperation with the Government of Seychelles in the following areas: communicable and non-communicable diseases, service quality, organization and management, human resources for health and health for all at all ages.

The strategic agenda for WHO cooperation for the period 2016 to 2021 follows:

WHO Seychelles Strategic Agenda, 2016 - 2021

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
Focus area 1.1	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
Focus area 1.2	Improve access to interventions addressing substance use and abuse and rehabilitative services to address drug use and mental health challenges
Focus area 1.3	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
Focus area 2.1	Strengthen the national capacity to prevent, detect and respond to health security threats in line with the International Health Regulations (IHR)
Focus area 2.2	Consolidate immunization activities, with a focus on vaccination quality assurance, initiation of new immunization products & technologies, and accelerating polio end-game initiatives.
Focus area 2.3	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
Focus area 3.1	Establish innovations in client management that improve person centredness, targeting improvements in quality assurance, standards setting, accreditation, and technology adoption
Focus area 3.2	Improve health information systems design and effectiveness, targeting systems for research and knowledge management, patient management and vital statistics
Focus area 3.3	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
Focus area 4.1	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.
Focus area 4.2	Increase skills supply through pre-service medical education, continuous professional development, increased career development opportunities and targeted recruitment.
Focus area 4.3	Increase productivity of the health workforce through process reengineering, performance management, strategies for staff retention and 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
Focus area 5.1	Improve health services for women, children, adolescents and any underserved age cohorts

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