

MALAYSIA–WHO Country Cooperation Strategy 2016–2020





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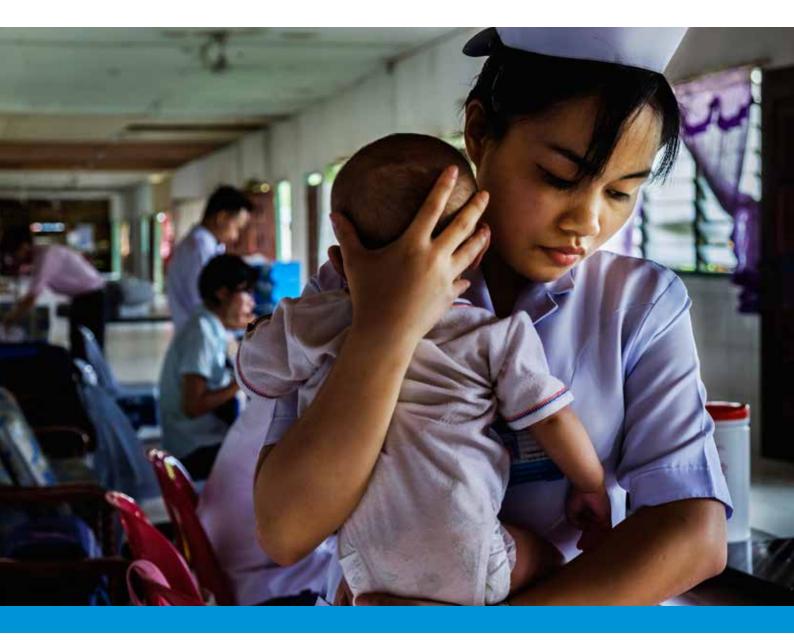
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FOREWORD

The Ministry of Health Malaysia and the World Health Organization (WHO) are pleased to present the *Malaysia–WHO Country Cooperation Strategy 2016–2020*. The strategy will guide collaboration on health for the next five years between Malaysia and WHO.

The 2016-2020 strategy builds on previous strategies, with WHO assistance now increasingly focused on more specialized areas. The priorities identified reflect Malaysia's level of development and the significant capacity and resources that Malaysia has devoted to many aspects of health, particularly communicable disease control and maternal and child health. This strategy is the result of discussions between the Ministry of Health and WHO and includes input from other key development partners working in health.

The strategic priorities identified are also in line with two recent global WHO reforms, which are reflected in the cooperation strategy. First, WHO Member States have signaled the strategic importance of WHO being more selective and prioritizing its support, and reflecting those priorities in funding for activities. Second, although Malaysia has fulfilled the core capacities under the International Health Regulations (2005), the Government appreciates the importance of all countries maintaining and strengthening these capacities. Core capacities allow countries to detect, analyse and manage a range of health risks, benefiting local communities and strengthening global health security.

On behalf of the Government of Malaysia and WHO, we express our gratitude to the many national counterparts, staff members and other partners that contributed to the development of this strategy. We look forward to working together to implement this strategy over the next five years to benefit the health and well-being of the people of Malaysia.

Dr S. Subramaniam Datuk Sø Minister of Health Malaysia

Dr'Shin Young-soo Regional Director for the Western Pacific World Health Organization

EXECUTIVE SUMMARY

Malaysia is an upper middle-income country with a health system and health status commensurate with its level of development. The *Eleventh Malaysia Plan 2016–2020* articulates the development goals of Malaysia over the five-year period, and health is identified as a key component of the plan's major thrust – Improving well-being for all.

The Malaysian health system delivers a comprehensive range of services through a combination of public and private providers. Total out-of-pocket expenditure for health is 39%, and yet Malaysia has one of the lowest incidence rates of catastrophic health expenditure in middle-income countries. Nevertheless, there is a need to examine the sustainability of the health system to ensure it performs well in the future and is affordable and accessible for all.

In some areas, such as child mortality, Malaysia's achievements are at the level of a high-income nation. The country also has demonstrated success in reducing the burden of many communicable diseases, such as malaria and HIV, and many childhood illnesses. Despite these successes, a few diseases, such as tuberculosis, have remained stubbornly persistent. Others have emerged to become an increasing threat, such as dengue. Further efforts are required to reduce diseases in marginalized and disadvantaged groups and to deal with changing epidemiological patterns.

The main disease burden has shifted in recent years to noncommunicable diseases (NCDs), now accounting for 73% of all deaths. For NCD risk factors in 2015, the prevalence for adults of hypertension was 30.3%, hypercholesterolaemia 47.7%, diabetes 17.5%, overweight and obesity 47.7%, tobacco use in men 43% and physical inactivity 33.5%. Mental health problems are also increasingly prevalent (29.2%). An increasingly wide range of complex environmental health issues is an ongoing challenge.

Malaysia now has significant internal technical capacity in many areas and receives minimal development aid. WHO primarily provides technical and policy advice, advocacy.

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