

# Maldives

Population<sup>1</sup> (000s)

(2024)

528



Urban population<sup>2</sup> (%)

(2024)

42.4



GDP per capita<sup>3</sup>

(current US\$) (2023)

12 677.4



Life expectancy at birth<sup>4</sup>

(years) (2021)

75.4

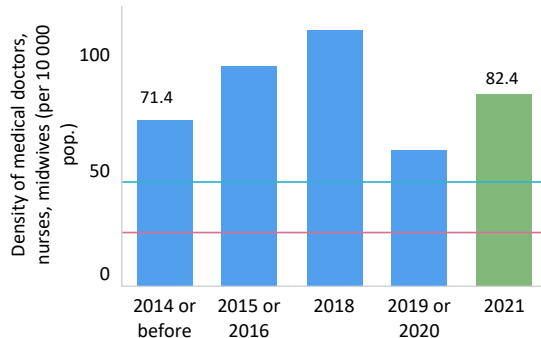


UHC SCI<sup>5</sup> (2021)

61

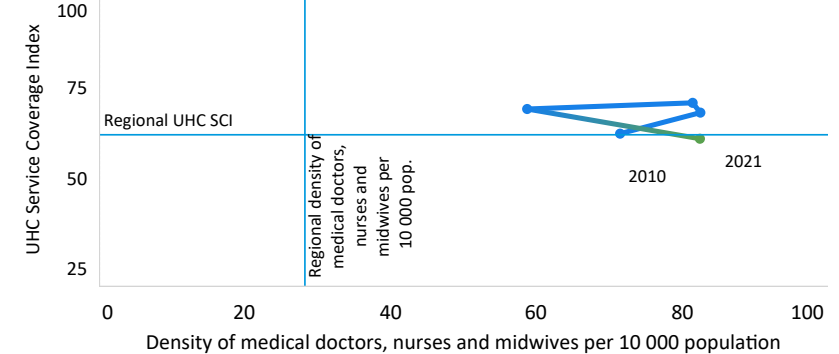


Trend in the density of medical doctors, nurses and midwives<sup>6</sup> (SDG indicator 3.c.1)

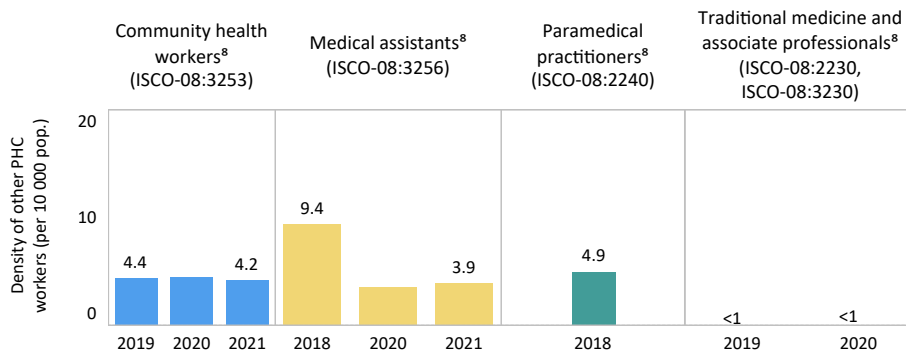


— 44.5 per 10 000 pop.: GSHRH:2030 (2016) — 22.8 per 10 000 pop.: World Health Report (2006)

Trends in UHC Service Coverage Index (SDG indicator 3.8.1) and the density of medical doctors, nurses and midwives (SDG indicator 3.c.1), 2010–2021<sup>7</sup>

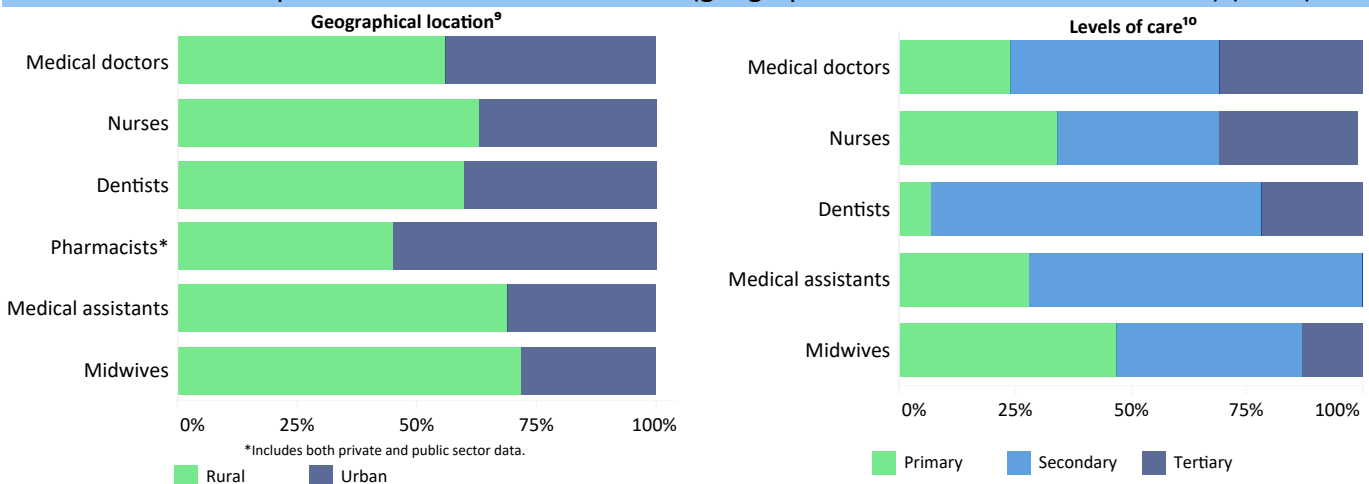


## Density of other key primary health care (PHC) workers

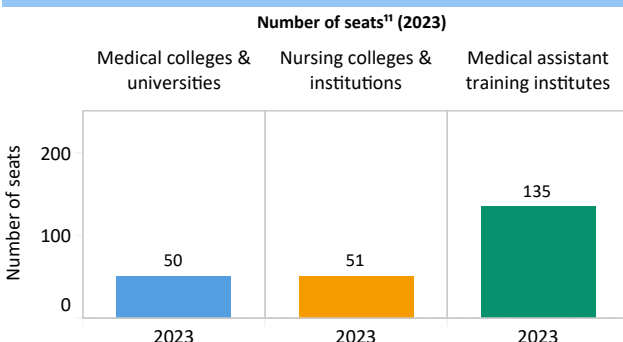


Countries in the SE Asia Region benefit from a range of key occupations close to communities. These health workers, central to the effective functioning of primary health care and district health systems, are often the first point of contact for those most vulnerable and for emergency response.

## Distribution of public-sector health workforce (geographical location and levels of care) (2021)



## Production of select health workers



To strengthen sustainability of the health workforce, Maldives established the School of Medicine under the Maldives National University in 2018. The first batch of 22 students graduated in 2024.

The increasing production of health workers across countries of the SE Asia Region speaks of a further increase in the availability of health workers in the near future. It is crucial to align this growth with evolving population and health system needs.

# Progress over the decade

<b>Strategic direction &amp; governance</b>	<p>National Health Master Plan 2016–2025 prioritizes development of a skilled and motivated health workforce</p> <p>Healthcare Professionals Act 2015 and Health Service Act 2015 serve as the main regulatory framework with associated establishment of the Maldives Medical and Dental Council, Nursing Midwifery Council and Allied Health Councils, and appointment of Quality Assurance Commissioner to ensure adherence to standards and investigate complaints</p> <p>The National Human Resources for Health Strategic Plan has been developed, with priority to address skill gaps and forecast future demand</p>
<b>Transformative education</b>	<p>Government academic institutions for medicine, nursing and allied health professionals established to increase domestic health workforce production and sustainability</p> <p>Free first-degree government initiative providing students free education within government institutions and subsidized fees in private institutions</p> <p>Maldives Qualification Authority oversees the Maldives National Qualifications Framework, as utilized for recognition of qualifications of domestic and international health-care personnel</p>
<b>Rural retention</b>	<p>National policy to have a health facility and pharmacy in each inhabited island, with assured minimum team of a doctor, nurse and community health worker, irrespective of population size</p> <p>Amendment to public service pay framework and job matrices, including job classifications, public service ranks, licenses and professional training requirements, educational qualifications and experience requirements, and pay increment structures, with implementation in health sector in 2023</p>
<b>Key innovations for strengthening the PHC workforce</b>	<p>Strong role of community health workers and family health workers in PHC teams; former with training of two-and-a-half years in primary care</p> <p>Special scheme for accelerated recruitment to facilitate the return of former health-care workers, including contract-based employment for those who have retired and flexible work arrangements</p> <p>Piloted the Faafu Atoll Demonstration Site (FADS) and ongoing expansion, with approach to build capacities and revise job descriptions of the primary health care teams to deliver a comprehensive range of services</p>
<b>International migration</b>	<p>Immigration: significant but declining reliance on expatriate health workers. For 2021, expatriate doctors, nurses and allied health professionals, respectively, constituted 59%, 38% and 33% of total stock</p> <p>Successful migration agreements to address domestic health workforce needs; opportunity to continue to strengthen regional collaboration</p>
<b>Identified achievements, challenges and future priorities</b>	<p><b>Achievements:</b> increased health worker density with increasing domestic production, local development of HR management information system</p> <p><b>Challenges:</b> limited postgraduate training, continued reliance on expatriate health professionals, need for strong orientation programme and standard guidelines given significant expatriate workforce, capacity gaps in both clinical and non-clinical staff, sustainable financing</p> <p><b>Priorities:</b> strengthen in-service training of clinical and non-clinical staff, including for health facility management, strengthen use of digital technologies, including e-learning systems, PHC-oriented health labour market analysis, renewal of National Health Master Plan (HRH central)</p>

## References

1. United Nations Department of Economic and Social Affairs. *World Population Prospects 2024: Revision*. United Nations, 2024, <https://population.un.org/wpp/>.
2. United Nations Department of Economic and Social Affairs. *World Urbanization Prospects: The 2023 Revision*. <https://population.un.org/wup/Download/>. Accessed 29 July 2024.
3. World Development Indicators database, World Bank (<https://data.worldbank.org/indicators> accessed 03 July 2024).
4. World Health Organization. *World Health Statistics 2024*. World Health Organization, 2024, <https://www.who.int/data/gho/publications/world-health-statistics>.
5. *UHC Global Monitoring Report 2023*. World Health Organization, 2023, <https://www.who.int/publications/i/item/9789240066060>.
6. Latest data obtained from Maldives Health Statistics, Ministry of Health obtained via the WHO Country Office (July 2024). United Nations World Population Prospects 2024 was used to calculate latest health workforce densities. For prior years' and for consistency, previous progress report-identified health workforce densities are presented.
7. See for UHC SCI: WHO Global Health Observatory (GHO), accessed on 17 July 2024; See for density of medical doctors, nurses and midwives: data obtained from Maldives Health Statistics, Ministry of Health obtained via the WHO Country Office (July 2024). United Nations World Population Prospects 2024 was used to calculate latest health workforce densities. For prior years' and for consistency, previous progress report-identified health workforce densities are presented.
8. National Health Workforce Account as on 10 September 2024 and data reported from Maldives Health Statistics, Ministry of Health obtained via the WHO Country Office (July 2024). United Nations World Population Prospects 2024 was used to calculate density.
9. Maldives Health Statistics, Maldives Food and Drug Authority, Ministry of Health: data reported via the WHO Country Office (July 2024)
10. Maldives Health Statistics, Maldives Food and Drug Authority, Ministry of Health: data reported via the WHO Country Office (July 2024)
11. Situational Analysis of Human Resources for Health in Maldives (2024).