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**Attention: International Affairs Reporter
Chief of Staff**

Meeting the daunting health challenge in Timor-Leste

The big killers in Timor-Leste are post-natal illness and disease, and the many infectious diseases related to poverty, and malaria, tuberculosis, intestinal parasites, disease related to malnutrition and poor water and sanitation. This health profile, characteristic of very poor countries, has started to shift as the incidence of degenerative diseases of the heart and kidneys starts to increase.

“We had our last epidemic of diarrhoea in 2002, and an epidemic of dengue fever in 2005,” said Health Minister Dr Rui Maria de Araújo. “Our highest priority in preventive health is to reduce the death and illness rate in mothers and new-born children. Our surveys indicate that only 40% of women giving birth are attended by a midwife, but some surveys indicate it could be as low as 25%. Even 40% is a very poor figure and we have a major program to provide more midwives, a reproductive healthcare program for a woman's entire child-bearing years, ante-natal and post-natal care, and breastfeeding programs, more family planning counselling, immunisation, and integrated management of child illnesses,” said the Minister.

HIV/Aids is a serious and growing problem in East Timor, and is being addressed by a national program developed under UNTAET in 2002. This program focuses on education about the nature of this disease and measures to prevent its spread, and this is strongly supported by the church. “The risk factors for Aids exist in Timor-Leste,” said Minister Araújo. “There are 30 identified cases of Aids, and already some people have died from Aids-related diseases”.

Anti-retroviral drugs are supplied free, like all medicines in the public sector, and Timor-Leste receives these drugs through a support program from Brazil and from USAID. Most of the HIV/Aids cases are treated by Dr Dan Murphy's clinic in Baire Pite, Dili, which is integrated into the public sector.

The public sector provides 80% of health services in Timor-Leste, and the Catholic Church and the Clinic Café Timor program provide most of the other 20%. The Ministry of Health provides medicines and consumables to the church clinics, and in return these clinics integrate with the District Health Management Teams and account for the medicines they distribute.

Clinic Cafe Timor is a health program of the coffee cooperatives which operate in Ermera, Aileu, Same and Ainaro. These cooperatives receive support from USAID. As well there are some private General Practice doctors in Dili and Baucau, as well as some private pharmacies. While there have been some proposals for private hospitals, so far none have been established.

The current National Health Policy Framework concludes in 2007, and work is now underway to develop a new National Strategic Health Plan for 2007-11. This includes sectoral strategic plans and associated human resources plans. “Right now there is one doctor for every 4,000 people in Timor-Leste, and we want to achieve one doctor for every 1,000 people by 2015,” said Minister Araújo. “You do the calculations”. The current population is 986,000 and with a population growth rate at 3.5% per year, Timor-Leste will need 1,352 doctors in the year 2015 to meet the target. Today Timor-Leste has 275 doctors.

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