First PHC in Jordan has established in 1986 while Alma-Ata was in 1978.

- * There are certain indicators that apply the health situation in Jordan like :
- 1- Mortality rate (infant mortality is the most sensitive).
- 2- Life expectancy (as the health situation in Jordan improved the life expectancy will be longer).
- 3- Services reached by the people . (for example: the percentage of women who reached the antenatal care, the percentage of family planning prevalence rate.) So as the health situation is improved the health services and the indicators are improved too.

(we are not supposed to memorize everything only take the concept and leave the other).

Current health status and health care in jordan

- i. health status has improved significantly during the past century .some important indexes to go with that are :
- a. Life expectancy in Jordan was: (49 year in 1965 "middle of sixty ", 66 year in 1990, 72 year in 2004), if we want to compare it with now there is still life expectancy in the world ranging from (57 in the least developing countries and 76 in the more developing countries).
- b. Infant mortality rate is another important indicator.only to compare:

in 1960 infant mortality rate in Jordan 130

1992 infant mortality rate in Jordan 35

2002 infant mortality rate in Jordan 22

** 2007 infant mortality rate in Jordan 19 (important).

(the dr. said what we need to memorize is the last # in 2007. The rest of the numbers for comparison only. How the health services gradually improved in Jordan.)

- There is demographic health survey in Jordan done each 5 years started in 1992 and the last study was in 2012 and it doesn't published yet so we refer ourselves to study of 2007.
- c . Total fertility rate another important indicator reflexes the health services, because as fertility rate in community increased the health status will be worse ,and as the fertility rate reduced as the services and antenatal care will be better ,mortality less, morbidity less,.. etc .
- So.. as fertility increased ⇒ mortality will increase ⇒ life span will be longer.

For this reason the number of population in developing world not going to increase more than the limit, and the # of population of developed world not going to decrease under the limit too .. so it is proportional $^{-}$

* In 1988 the total fertility rate in Jordan was 7.4 it use to be the one of the highest after India.

While in 2007 the total fertility rate in Jordan drops to 3.6 .. means it drops the to half.

d. Eradication of the diseases ,the more eradicated diseases the better health services and health status .

in jordan:

Small-pox was eradicated in 1979 means the last case has seen in 1969.

So... what do we mean by eradication of the disease?

- when the disease not appear in a community for 10 years.

For example. In US, Bilharzia was eradicated in 1970 before 50 years, but it still the cause of death in some developing countries.

In Jordan a lot of diseases are reduced but not eradicated yet.

II. Another important thing to see how the services are improving specially PHC in any community include Jordan .

We want to see the reasons that make the community members and clients

If the people going to visit PHC for "
PREVENTIVE&PROMOTIVE " reasons means that the services is more highclass © than if they come for "CURATIVE & ILLNESS "means the services are simple and primitive 🕾

For example : as you can see in health centers in some of developing world the most of the people come to PHC are patients 100% patients coming for cure not for vaccination or antenatal or well baby clinic . they are coming with fever, diarrhea, cough ..etc .

While in developed world where there is proper PHC setting you find more than 90% of the people come to PHC for preventive and promotive services.

This study has done when the PHC was recently introduced in Jordan in 1986 and see how many people come for preventive and curative reasons.

But this study was not repeated & if it repeated after 25 years from establishing first one we will have completely different results .

- * Three main /reasons for PHC visits are:
- a. 33% Respiratory diseases.
- b. 14% Infectious and parasitic diseases.
- c. 10% Digestive diseases.
- $^{\odot}$ We don't have to memorize all these numbers .only we have to know that at that time in 1986 more than 50% of people coming for curative services $^{\odot}$

Example: in 1986 the percentage of pregnant women who go to antenatal care was 20%...but now their percentage arise to 85%.

And also vaccination coverage now in Jordan around 95% in comparison to the previous years which was less than this . This reflect the health status in Jordan and any community .

III. Rising incidence of chronic and degenerative diseases and injuries together with less incidence of infectious diseases though communicable diseases are still taking a high roll in morbidity and mortality especially among infant and children under five years of age especially in rural areas.

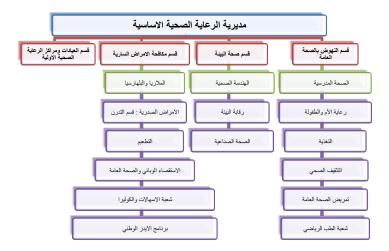
(means that the results of death is due to non- communicable diseases ,although in some developing countries still the infectious diseases cause death. NOW, in Jordan the main cause of death is non-communicable diseases like: hypertension, cancer, diabetes and heart diseases ...etc).

* The main health services providers are:

1. The public sector (MOH &RMS).

MOH: Ministry Of Health...RMS: Royal Medical Services.

- 2. Jordan University Hospital.
- 3. UNRWA .. Covers Palestinian camps .
- 4. Private section ... (very limited).
- it follows that for community like jordan were the population is small and highly urbanized (percentage of population in the cities is more than 80% and they are not distributed in rural area)
- Highly qualified medical personnel are abundant .(when you look for specialist pediatricians diabetologist etc...you will find them ,but if you look for specialist in general practice you will not find them).
- Intermediately qualified paramedical staff are scarce.
- Piped water and safe waste disposal are almost universal.



In every community when I want to put PHC services we have to know what the priorities are?

For example. If the mortality causes were due to cancer ,so I have to focus my services on cancer screening and if it was infectious disease i focus my services on vaccination and so on So we give our priorities according to reasons of death.

(The main causes of death in Jordan in all ages in 1979.)

| النسبة المئوية % | المـــرض | |
|------------------|-----------------------------|--|
| 23 | امراض القلب والدورة الدموية | |
| 20 | امراض الجهاز التنفسي | |
| 16 | الاسهالات | |
| 9 | الحوادث | |
| 6 | تعقيدات الحمل والولادة | |
| 5 | السرطان | |
| 3 | سوء التغذية | |
| 19 | اخرى | |
| 100 | المجموع | |

- ** In the schedule above you can notice that what is the causes of death and how they change with development of health services we don't have to memorize Number.
- Diseases of circulatory system were and still #1 cause of death but the percentage is different and it is around 23%, cancer around 5% and it is #6 cause of death ,maternal mortalities was 6% which is very high .But now we measure it in 100.000 it is 30 in 100.000 WHEN we want to measure it in % it will be = 0.0003%.

** another study has done in 1990 **

| النسبة% | اسباب الوفاة | |
|-----------------------|---------------------------------|--|
| 39 | امراض القلب والشرابين وضغط الدم | |
| 8.9 | الحوادث بأنواعها | |
| Check at in the slide | الاورام الخبيثة | |
| 4.6 | الالتهابات الرئوية | |
| 2.4 | امراض الكلي | |
| 1.5 | امراض الكبد | |
| 0.3 | امراض سارية | |
| 9.6 | اسباب غير محددة | |

- We notice that the coronary diseases and hypertension is still #1 cause of death and its percentage arise from 23% to 39% so the infectious disease is now reduced ,also cancer was #5 cause of death and now it is #3. Traffic accident was #4 cause and now it is #2 cause of death .
- ^ the purpose is to memorize how the arrangement of the causes of death with developing of health care ^.
- ** The researches of causing of death done every 10 to 15 years in Jordan but in developing countries with good inward for research they do it every five year Or every year .

** LAST STUDY HAS DONE IN 2005 **

| Cause of death Disease of circulatory system | Percent |
|---|---------|
| Disease of circulatory system | 41.97 |
| Neoplasm | 13 |
| Adverse effect | 10.5 |
| Conditions originated in the perinatal period | 7.39 |

- ** Last study done in 2005, the circulatory system is still #1 cause of death but with higher percent 42%. Neoplasm now is #2 with 13% thee increase incidence of cancer not only due to environmental factors and pollutions it is due to increase the diagnosis. (diagnosis now is more sensitive and specific).
- ** conditions due to prenatal period: 2 weeks before or after birth

When we say that the risk for the baby to die at the first day or at the first year...sure at first day The risk for the baby to die at the first hour or first day....sure first hour

So higher risk period for baby to die is the prenatal period.

- ** diseases of respiratory system 6.24~% and # 5 cause, although in some developing countries it is #1 cause of death as we are going to see.
- ** digestive after it was #3 now it is at the end of the table and also pregnancy it was #5 now it is the last cause with 0.11%.

(We have to memorize these numbers or to know the arrangement of causes).

** Death across the globe **

Across the world what are the causes of death.

when we want to compare it to Jordan, we find that Jordan located in the best developing world (in the middle between developed &developing world).

What reflect this that the demographic health survey in 2007 which is done every 5 years.

** 44.7% of global-death occur in low-income countries .

lower respiratory infection.(#1 cause of death).

coronary heart diseases (#2 cause of death).

-refer to slides to see the rest of causes -

So, from this study we find that more than 50% of death due to infectious diseases.(if we compare it to Jordan the cause of death is non-communicable diseases).

**41.5% of death occur in middle-income countries.

The #1 cause of death was stroke with 59%,#2 coronary heart diseases with 58%, infectious disease is #4 cause of death.

**13.8% of death occur in high-income countries.

The #1 cause of death was coronary heart disease ,#2 stroke cerebrovascular disease,#3 lung cancer ..

(Jordan similar to it in causes but not in the percentage despite it's not hight-income country)

** The Dr. ask a question : global death in high-income countries :

A. 20%

B. 14%

C. 5%

D. 50%

the correct answer is (B).

The population # is doubled 20 times and it is expected to increase more through the coming 20 years in 2029.

Between two censuses in 1979 and 1994, the population grew from 2.1 to 5.1 million people, an average increase 2.7 percent annually .At this rate the population of Jordan will double in 25 years .This will place tremendous strain on Jordan's natural resource base.

Jordan's focus has been on developing its human potential ,essentially by advancing the well-being of its citizens. While overall health condition in Jordan –low infant mortality rates and high life expectancy – are among the best in region ,the population growth rate continues to be a major development constraint – especially when analyzed in light of quantity and quality of services to be provided to accommodate this rapid increase in population.

USAID is working to improve important health indicators such as: life expectancy ,infant mortality and morbidity –we focus on infant as we mentioned that the $1^{\rm st}$ days , $1^{\rm st}$ month and $1^{\rm st}$ year is the most dangerous – because infant mortality is more sensitive indicator and to be more precise we say neonatal mortality which is the first month and the more precise than it is perinatal mortality which is 2 weeks before and after birth. But we depend in infant mortality which is the first year .

- ** As we said fertility declined in Jordan from 7.4 to 3.6, around the half.
- ** Urban population increased by 14 percent btwn 1980 and 1994, increasing from 70 to 79 percent . it is another burden on health services. It is supposed that the all populations are distributed in the Jordan and not focusing only in the cities.
- ** Age structure of population has changed considerably since 1979-the result in changes in the fertility ,mortality and migration dynamics.
- ** The proportion of population under 15 years of age declined from 51% in 1979 to 39% by 2002, while the proportion of those are 65 and over has been rising.

^{**} in Jordan the demographic figures are changed dramatically at the last century.