

HEALTH SYSTEM IN JORDAN



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خلل النظام الصحي في الأردن .. هل الاطباء مذنبون؟

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الدولة > الهاشميون > المسيرة >

قطاع الصحة

الرئيسية / المسيرة / قطاع الصحة

تطور قطاع الصحة خلال مئة عام

شهد القطاع الصحي في الأردن تحت القيادة الهاشمية وعلى مدى مئة عام تطوراً ملحوظاً منذ تأسيس إمارة شرق وفيما يلي تسليط بعض الضوء على هذه التطورات والتي يمكن تصنيفها بثلاثة مراحل:

(التأسيس والنهضة ومرحلة التعزيز والتطور)، وفيما يلي استعراض لأهم سمات هذه المراحل الثلاثة

< التأسيس

1. العقد الاول للدولة الاردنية (1921-1930)

قبل مئة عام كانت منطقة شرق الأردن تفتقر إلى الرعاية الصحية الكافية، حيث اقتصرت حينها على تقديم الإسعاف

القلعة نيوز: بقلم عبدالله مسمار
ليست المشكلة الصحية في الأردن حديثة ولا هي وليدة جائحة كورونا، ولا احدى نتاجاتها، ولا تتمثل بنقص الخبرات الطبية او ضعف الكفاءات، ولم تكشفها قضية الطفلة لين او غيرها من وفيات التقصير والاختفاء الطبية، ولكن هل الاطباء مذنبون؟

الاطفال وقضاياهم عادة ما يثيرون الرأي العام، وتصبح حوادث وفياتهم محط أنظار الجميع، وبذلك تصبح وفاة طفلة في الخامسة من عمرها



الرئيسية > محليات > فلسطين > عربي دولي > اقتصاد > رياضة > هنا وهناك > الطقس > فيديو

الحواري لـ"رؤيا": النظام الصحي في الأردن غير متهاك ولكن بحاجة إلى تطوير..
فيديو



محليات نشر: 21:26 15-09-2021 آخر تحديث: 21:26 15-09-2021



SOURCE:

https://100jordan.io/AR/Pages/%D9%82%D8%B7%D8%A7%D8%B9_%D8%A7%D9%84%D8%B5%D8%AD%D8%A9

What is a health system?

A health system is the organization of **people**, **institutions**, and **resources** that deliver health care services to meet the health needs of target populations.

تقدم الرعاية الصحية للسكان

The six building blocks of a health system:



The six building blocks of a health system:

1. Health service Delivery

Effective, safe, quality personal and non-personal health interventions to those who need them, when and where needed, with minimum waste of resources.

2. Health Human resources

There are sufficient numbers and mix of staff, fairly distributed; they are competent, responsive and productive.

3. Health Information system

The production, analysis, dissemination and use of reliable and timely information on health determinants, health systems performance and health status.

4. Medical Products, and Technologies

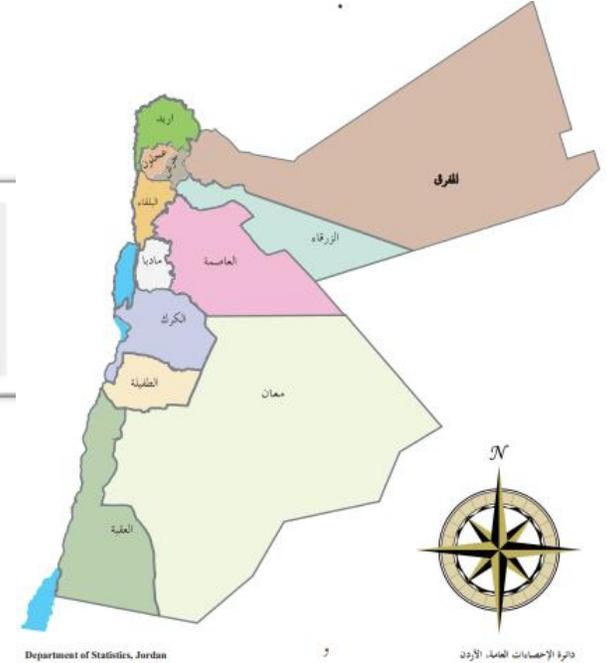
Equitable access to essential medical products, vaccines and technologies of assured quality, safety, efficacy and cost-effectiveness, and their scientifically sound and cost-effective use.

5. Health Financing

Adequate funds for health, in ways that ensure people can use needed services, and are protected from financial catastrophe or impoverishment associated with having to pay for them.

6. Leadership and Governance

Guidance of the whole system, health sector policies; coordination; and regulation



Jordan is a Middle Income country (WB)

Total population of **11 Millions** (2022) ,(48.5% Females, 51.5% Males). **30% are not Jordanian.**

90.3 % Urban ^{مدني}, **9.7% rural** ^{قروي}.

The population is distributed among 12 governorates over three regions (North, Middle, and South).

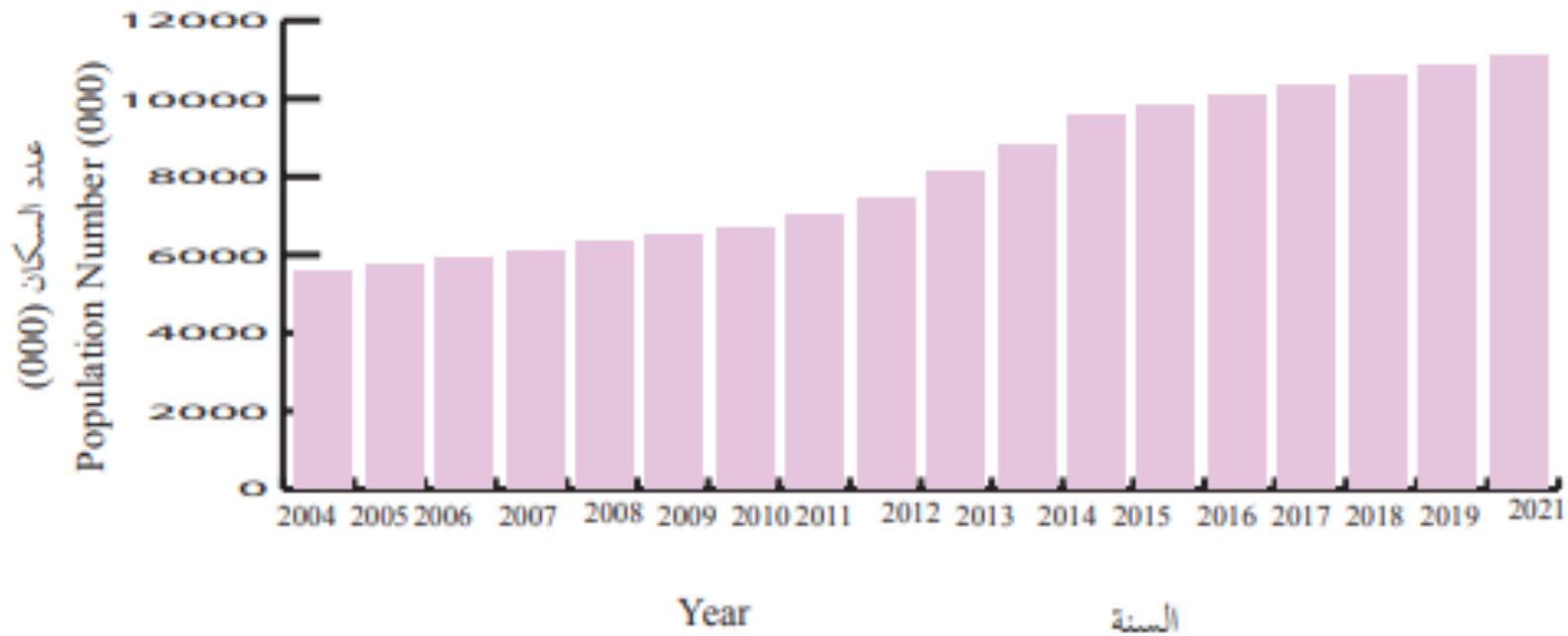
The Kingdom's population doubled more than ten times within 55 years, with an average annual population growth rate of 3.2 % (2021).

Population: **34.3%** < 14 years **62%** at the age 15-64 years and **3.7%** ≥ 65 years

<http://dosweb.dos.gov.jo/products/jordan-in-figure2021/>

Total Population

سكان المملكة (بالألف نسمة)، 2004-2021
The Kingdom Population (000), 2004-2021



Jordan: Current Health Status

- Health status in Jordan is among the best in the Middle East.
- Average life expectancy is **73.3** years, (**72.3 for males and 75.1 for females**) (2021).
- Infant mortality rate declined from 23 in 2009 to **17 per 1000 in 2021**.
- وفيات الأمهات Maternal mortality declined from 800 per 100,000 deliveries in 1969 to **19.1 in 2021**.
- معدل المواليد الخام The crude birth rate is 18/1000 population and the crude death rate is 6/1000 (2021).

Jordan: Current health status

قل خطر الإصابة بأمراض معدية

- Dramatic decrease in the risk of infectious disease in recent years (**Jordan** has not recorded a case of **polio** since 1992).

شلل الأطفال

زيادة انتشار

- However, increasing prevalence of non-communicable diseases (NCDs).

امراض غير معدية

The leading causes of death in Jordan

- **The top 4 leading causes of death are:**

نظام الأمراض الدوراني

- 1- Circulatory system diseases (39.1%): caused mainly by hypertensive diseases followed by ischemic heart diseases and cerebrovascular diseases.

الضغط

نقص التروية

- 2- Neoplasm's (16.5%): ranked as follows cancer of lung, trachea and bronchus, cancer of small intestine, colon, rectum and anus and cancer of breast.

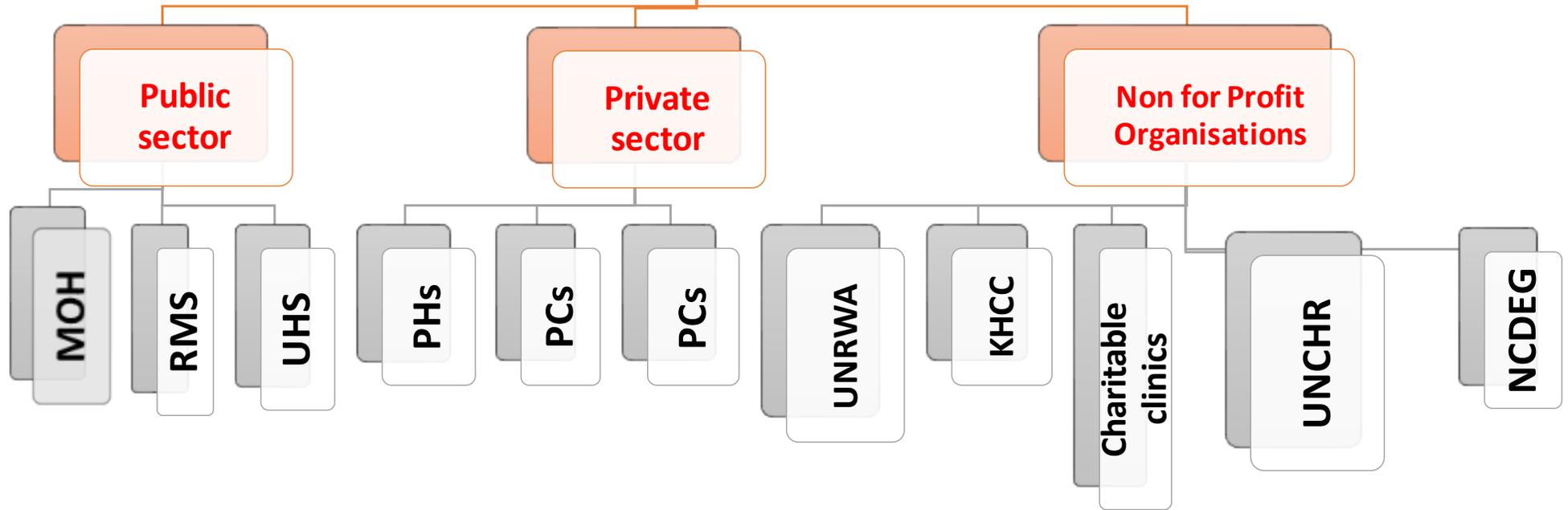
السرطان

- 3- External causes of mortality (8.2%) caused mainly by transport accidents.

- 4- Endocrine, nutritional and metabolic diseases (8.1%) caused mainly by diabetes mellitus.

Healthcare organisation in Jordan

Health services are provided through



Healthcare organisation in Jordan

وزارة الصحة

- **Public sector:**

- **1. The MOH** is the largest sub-sector in term of the size, operation and utilisation as compared to other sub-sectors. Provides primary, secondary and tertiary care.

المسؤولة عن إدارة برنامج التأمين المدني

- The MOH is responsible for managing the Civil Insurance Program (CIP) which covers:

- civil servants and their dependents, Individuals certified as poor, disabled (75% or greater), elderly people (>60) and children under 6 years (regardless of the nationality), residents of remote areas classified as the least fortunate and organ (valid for five years) and blood donors valid for six months after donation) are also formally covered under the CIP.

مدعومة

- The services provided by the MOH are highly subsidized by the government for Jordanians and partially for the Syrian refugees.



Public sector:

RMS: مدينة الحسين الطبية



2. The RMS mainly provides secondary and tertiary care services.

- RMS is responsible for providing health services and a comprehensive medical insurance to military and security personnel.
- RMS also acts as a referral center through providing high-quality care, including some advanced procedures and specialty treatment to Jordanians and non-Jordanian patients.
مركز إحالة بحولوا الحالات عليه
- It plays a major role politically through contributing in providing health services in disasters and conflict areas through medical teams and field hospitals.
المساهمة
سياسياً
كوارث نزاعات
المستشفيات الميدانية، قوات حفظ السلام
- There are also nine military health centers and clinics distributed all over the country , in addition to air medical evacuation services.
خدمات الإخلاء الطبي الجوي

المستشفيات
الجامعية

- 3. **The University Hospitals (UHs)** are two: the Jordan University hospital (JUH) and King Abdullah Hospital (KAH), they provide health insurance ^{تأمين} and services ^{خدمات} for university employees and their dependents ^{المعاليين}, as well as serving as referral centers for other health sectors and as teaching centers for medical students.



Healthcare organisation in Jordan

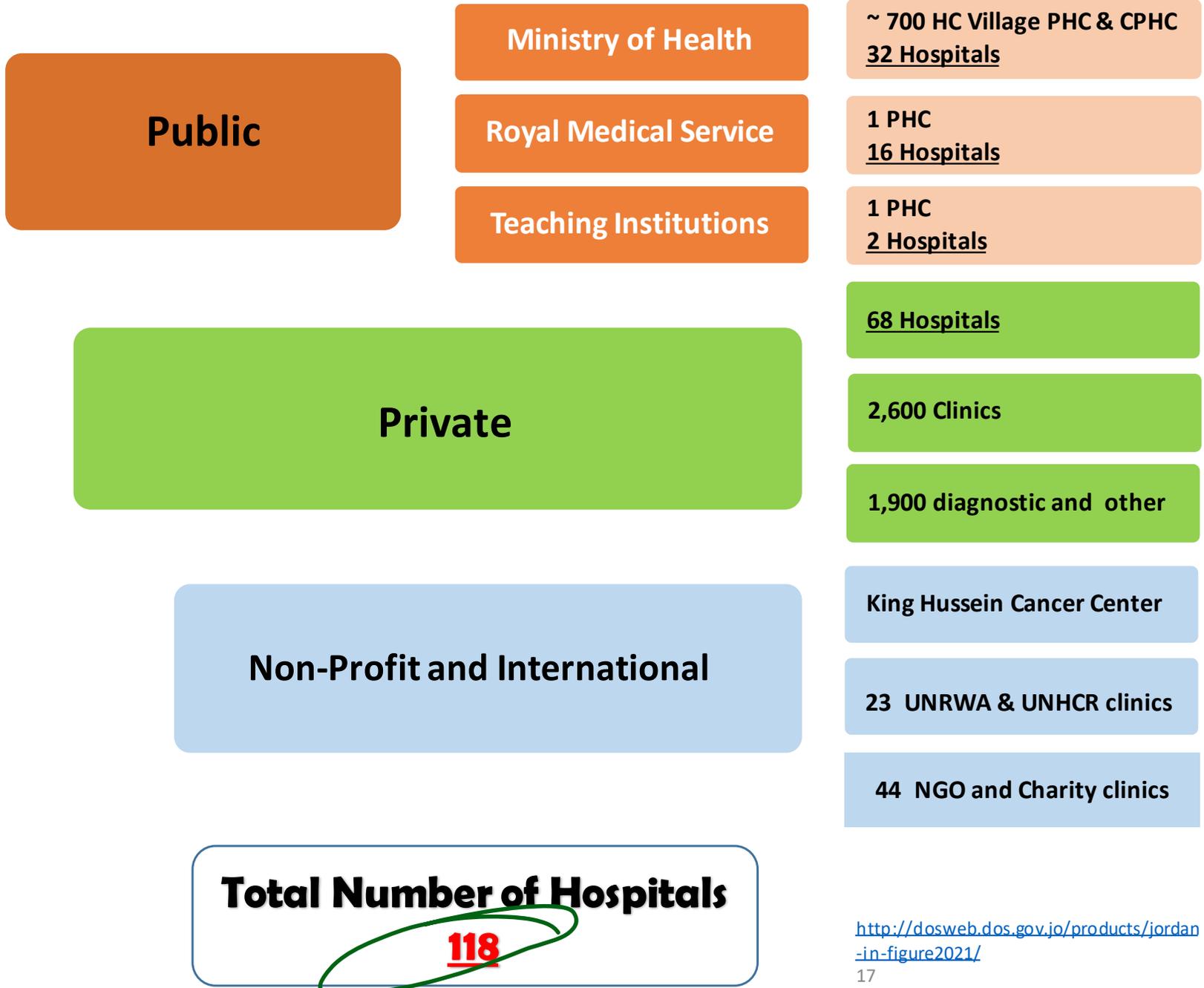
- **The private sector:**

- Provides primary, secondary, and tertiary services through a network of private clinics (PCs), private centres (PCs) and private hospitals (PHs).
- The majority of the hospitals, as well as private clinics, are in the capital of Jordan
- It attracts significant numbers of foreign patients from nearby Arab nations (Medical tourism).



Health Service Delivery In Jordan

A Snapshot of service delivery sectors in Jordan (2021)



MOH operates

- (35% of all hospital beds)

The military's RMS runs

- (23% of all beds)

University Hospitals

- (8% of total beds)

عدد الأسرة مؤشر لقدرة الرعاية الصحية بالمرضى

HB: all hospital beds which are regularly maintained and staffed and immediately available for the care of admitted patients. Provides information on healthcare capacities (indicator)

The private sector runs

- (34% of all hospital beds)

Healthcare organisation in Jordan

Non for profit organisations: غير الربحية

The United Nation Relief and Works Agency (UNRWA) is responsible for providing a healthy living environment for 3.13 million Palestinian refugees since 1950s. It delivers primary health care services through 23 primary health care facilities. Although UNRWA mainly focuses on primary health care, it also helps refugees' access secondary and tertiary care services as a financier and provider of health care but not as insurer.

لاجئ
شركة تأمين

The King Hussein Cancer Centre (KHCC) is a specialized centre for cancer care in Jordan since 1997. KHCC is a free-standing, independent, non-governmental, established by a Royal Decree to combat cancer in Jordan and the Middle East region.

محاربة

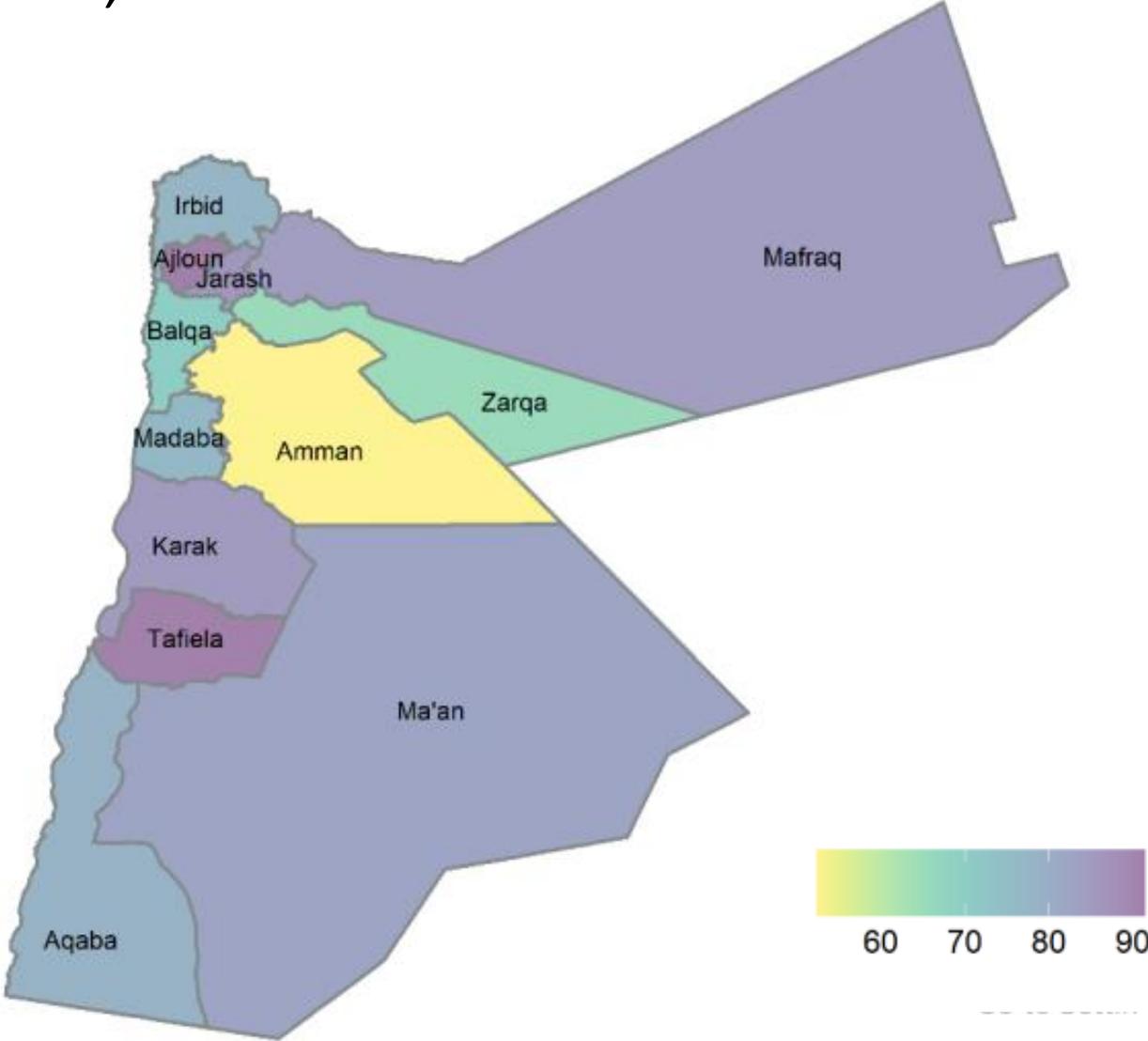
The National Center for Diabetes, Endocrinology and Genetics (NCDEG) is an independent non for-profit Organization established in 1996. The main goal of NCDEG is to provide high quality care, education and training in the fields of diabetes, endocrinology and genetics.

غير ربحي
وجدد/قائم

Health Insurance coverage

- **70%** of the population have health insurance, ^{تأمين} with the lowest levels of insurance coverage appearing in Amman, at 54.9%.
- **MoH is the main insurer (44%) of the population.**
- RMS insures 27% of the population, while the university hospitals insurance covers 1.3% of the population, and the private health insurance covers 5% of the population.

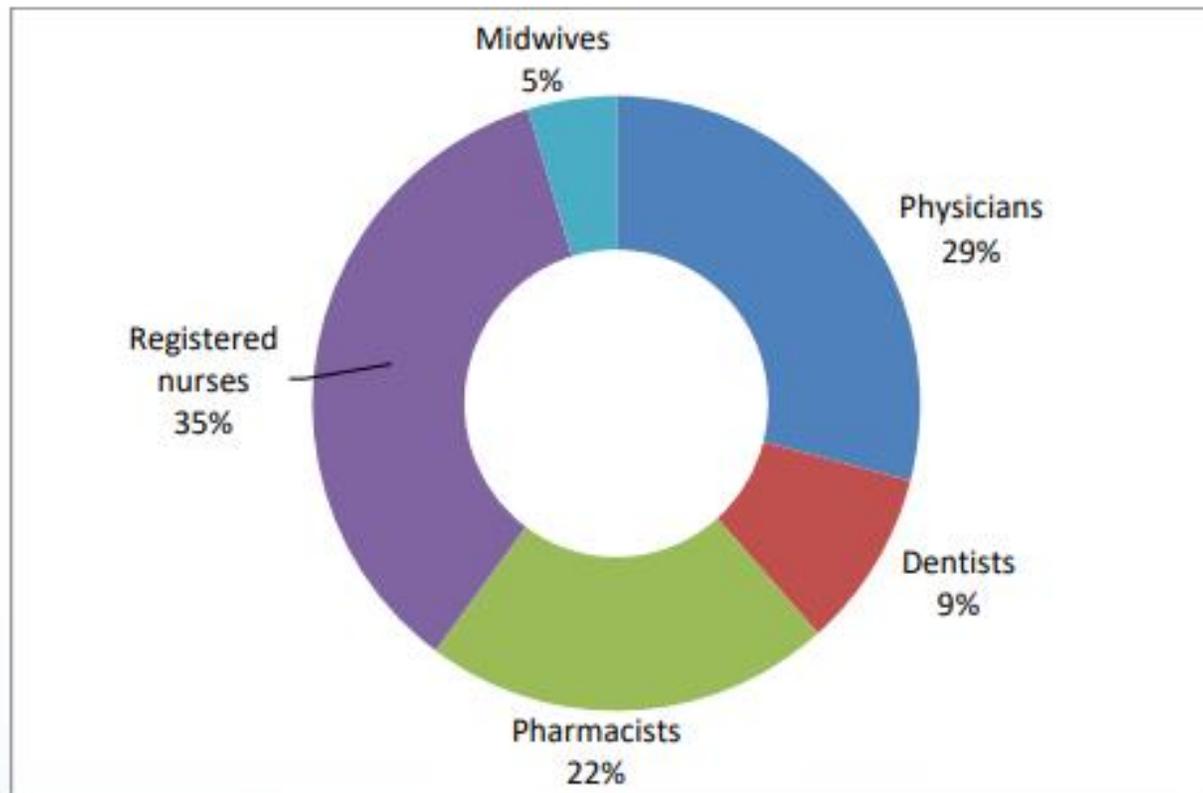
Percent of individuals who have health insurance, Jordan 2017



Health Human Resources (2017)

Graph (2) illustrates that most of the health professionals working in Jordan are registered nurses (35%) followed by physicians (29%), then pharmacists (22%), dentists (9%) while the least are midwives (5%).

Graph (2): Distribution of National Health Workforce by category in Jordan, 2017



Workforce

Table (3) shows that physicians working at the MOH for the year 2017 are mainly males (82%). The table also reveals that more than half of the dentists at MOH are males, while around three-quarters of the pharmacists and nearly two-thirds of the registered nurses are females (75%, 63% respectively).

Table (3): Health workforce at MOH by category and gender, 2017

| Cadre | Gender | | | | Total |
|-------------------|--------|-----|------|------|-------|
| | M | % | F | % | |
| Physicians | 4055 | 82% | 869 | 18% | 4924 |
| Dentists | 380 | 51% | 372 | 49% | 752 |
| Pharmacists | 180 | 25% | 554 | 75% | 734 |
| Registered nurses | 2009 | 37% | 3352 | 63% | 5361 |
| Midwives | 0 | 0% | 1467 | 100% | 1467 |

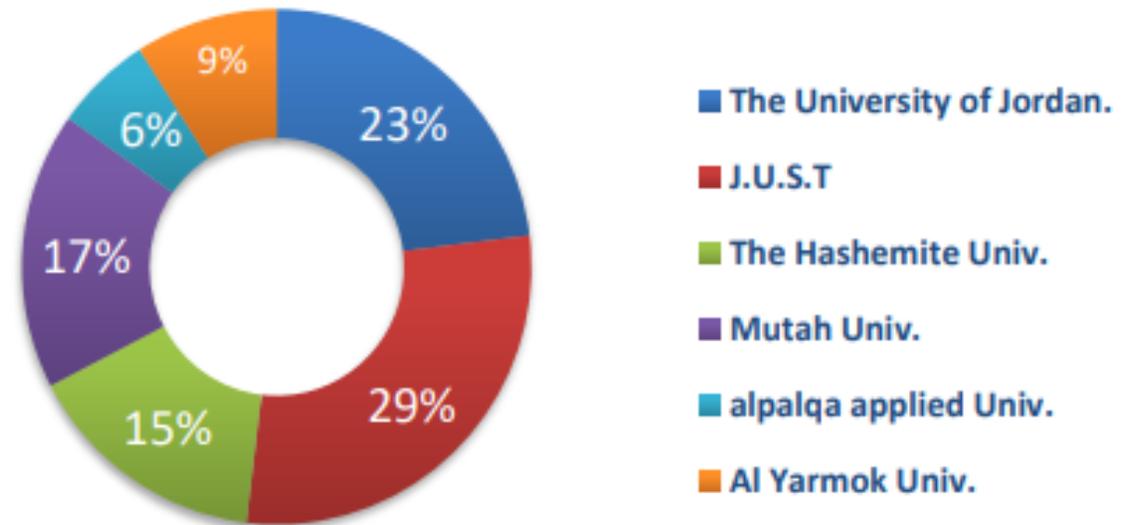
Table (4) shows the distribution of different health workforce categories at both the central level (MOH main directorates) and the peripheral level (Governorates) for the year 2017. Less than 4% in all categories work at the central level except for Pharmacists (13%).

المسجلون في كلية الطب لعام ٢٠١٦/٢٠١٧

Enrolees from Medicine Faculties for the year 2016/2017 .

- Jordan currently has six Medical Faculties (the University of Jordan, the Jordan University of Science and Technology, the Hashemite University, Mut'ah University, in addition to Al- Yarmouk University and AL-Balqa Applied University.

Enrollees at Medical Faculties



مصروفات

Health Expenditure

مصروفات الإنفاق

- This total health expenditure represented **8%** of Jordan's GDP (2017).
النتاج المحلي الإجمالي
- –US 18% of GDP, UK 9.6% of GDP, 6.4% Saudi, Egypt 4.9%..

Public Sector Expenditure By Function

JOD

| Function | 2017 |
|-----------------------|---------------|
| Curative | 73.7% |
| Primary | 19.6% |
| Administration | 5.7% |
| Training | 0.8% |
| Other | 0.3% |
| Total | 100.0% |
| | |

Achievements:

- Health sector in Jordan excelled in providing tertiary health care services, such as:
- 1. **Organ Transplantation:** Jordan is one of the first countries in the region to conduct organ transplantation in its hospitals. **The first kidney transplantation was performed in 1972.** Jordan also was one of the leading countries that have developed ^{تشريع} legislation to regulate organ donation, transfer and transplant and that was in 1977.
- 2. **Sophisticated Surgery:** e.g. Open heart operations ^{جراحة متطورة} catheterization, kidney transplantation operations, liver and bone marrow transplantation mainly at the Royal Medical Services and the private sector, and at a limited scale at MoH hospitals and university hospitals.
- 3. **Dialysis:** most Jordanian hospitals provide services to patients with kidney failure by providing dialysis sessions that require constant maintenance of equipment to ensure its durability and avoid break down.
- 4. **Treatment of Infertility** (**First born IVF baby was in 1987**)

| | |
|---|------|
| First open heart surgery | 1970 |
| The first kidney transplant | 1972 |
| The first heart transplant | 1985 |
| The first stem cell transplant | 1985 |
| First IVF baby | 1987 |
| The first bone marrow transplant | 1995 |
| The first cochlear implant surgery | 1998 |
| The first liver transplant | 2004 |
| First transcatheter aortic valve implantation | 2009 |
| The first operation to separate Siamese twins | 2021 |



Health Policy in Jordan

- The general health policy in Jordan is being formulated by the High Health Council (HHC).
- HHC set The National Strategy for Health Sector in Jordan(NSHS) for the years 2015-2019 in which it endorses four main strategic objectives:
 1. Good governance and policy environment that enhances the performance of health system
 2. Provision of integrated citizen- centered health services that are responsive to the growing needs
 3. Provision of health, financial and social protection for all citizens based on fair grounds
 4. Strengthen the national economy in the health sector

توفير

متجاوب

توفير خدمات صحية وحماية مالية

واجتماعية بعدل

تعزير

Challenges:

1. Demographic

1. The high population growth rate (Fertility/mortality, forced migration^{هجرة قسرية})
2. High proportion of young people with the increasing rise in the proportion of elderly people
3. The large and unplanned population growth in the urban areas and the imbalance in population distribution between the governorates of the Kingdom

توزيع غير متساوي للناس

Challenges:

2. Epidemiological

1. The epidemiologic transition

- Increased rates of chronic disease and the difficulty of controlling the causes and risk factors

جوائح

نشوء امراض

- Increased risk of Pandemics & Emerging diseases

قضايا الصحة البيئية الناشئة

2. The emerging environmental health issues

Climate change and its impact on health

Challenges:

3. Economic

1. The rising cost of health care, **Inefficiencies** observed in the **provision and financing of health services.**
ارتفاع سعر تقديم الدعم المادي
2. High debt, slow economic growth and high poverty and unemployment rates
ديون فقر بطالة
3. Scarcity of financial resources allocated to health care, including the current expenditures in the public sector
ندرة الموارد المالية المخصصة نفقات جارية
4. Migration of health competencies
هجرة الكفاءات
5. High direct-of-pocket health spending, particularly on drugs
ارتفاع الإنفاق الصحي المباشر على الجيب
6. The growing expectations of people (effective and accessible care).
زيادة معدل البشر

Challenges:

4. Administrative

ادارة

1. ^{عدم كفاية} Inadequate ^{التنسيق} coordination between the public sector and the increasingly significant private sector
2. Quick changes in senior positions ^{مناصب عليا} (leading to a change in the order of national priorities) ^{تغيير ترتيب الأولويات الوطنية}
3. The absence of the role of the Higher Health Council in the ^{تشكيل} formulation of health education policy
4. Slow enactment ^{سن} of the legislations ^{التشريعات}
5. Acceleration in technological development in general and in medical technology in particular