



Country Cooperation Strategy for WHO and Jordan 2014–2018

Health Challenges

Outline for presentation

- Introduction about CCS
- Health System Major Achievements
- Health Challenges:
 - Health System Challenges
 - Epidemiological ,Socio-economic Challenges
- Major Areas for Health Policy Interventions

What is a CCS?

WHO's CCS represents the organization's medium-term(4–6 years) vision for its collaboration with a given country and reflects the overarching values of the United Nations which underpin WHO's Constitution and its contributions to improving global population health. These include health-related human rights, equity and gender equality.

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The key principles guiding WHO CCS :

- ▶ Ownership of the development process by the country;
- ▶ Alignment with national priorities and strengthening national systems .
- ▶ Harmonization with the work of other UN agencies and other partners in the country.
- ▶ Collaboration as a two-way process that fosters Member States' contributions to the global health agenda.

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Strategic Priorities of WHO's Work for the Period 2014-2019

- (1) Health-related Millennium Development Goals: unfinished and future challenges.
- (2) Addressing the challenge of non-communicable diseases, trauma and mental health.
- (3) Advocating universal health coverage.
- (4) Increasing access to essential, high-quality, effective and affordable medicines and medical products.
- (5) Addressing the social, economic and environmental determinants of health.
- (6) Reforming management policies, systems, and practices.

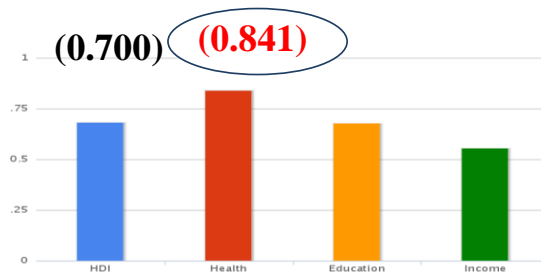
Source: World Health Organization Executive Board, 132nd session, January 2013. Document EB132-26 dated 21st December 2012.

Health Care System Achievements

- › Extensive network of PHC facilities ,high bed/population rates
- › Physician to population ratio is higher than most of MENA
- › Highly skilled HRH
- › Strong higher education system
- › 75 to 87 % of the population in Jordan is covered by formal health insurance
- › MOH provides health safety net for all
- › Government commitment
- › Improvement in health indicators
- › Modern health care infrastructures
- › Accreditation Program
- › Medical Tourism

Human Development Index, Jordan 2012

Health scored the highest



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Jordan Ranks 83/190 According to WHO Ranking of the World's Health Systems

1 France	11 Norway
2 Italy	12 Portugal
3 San Marino	13 Monaco
4 Andorra	14 Greece
5 Malta	15 Iceland
6 Singapore	16 Luxembourg
7 Spain	17 Netherlands
8 Oman	18 UK
9 Austria	19 Ireland
10 Japan	20 Switzerland

Health system goals

	Level	Distribution	Efficiency
Health	✓	✓	
Responsiveness	✓	✓	Equity
Fairness in financing		✓	
	Quality		

Source: <http://www.who.int/healthinfo/paper30.pdf>

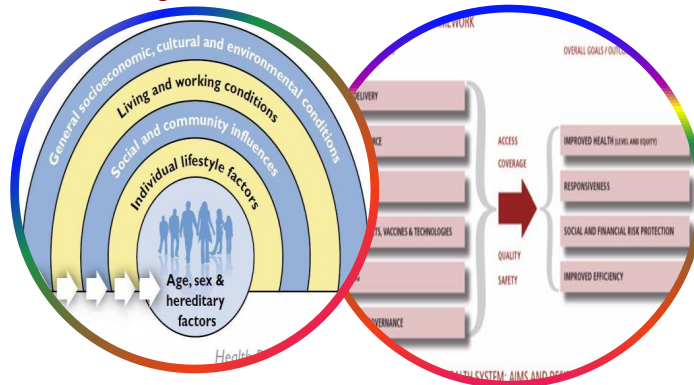
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Major Health Challenges

Epidemiological, Socio-economic challenges

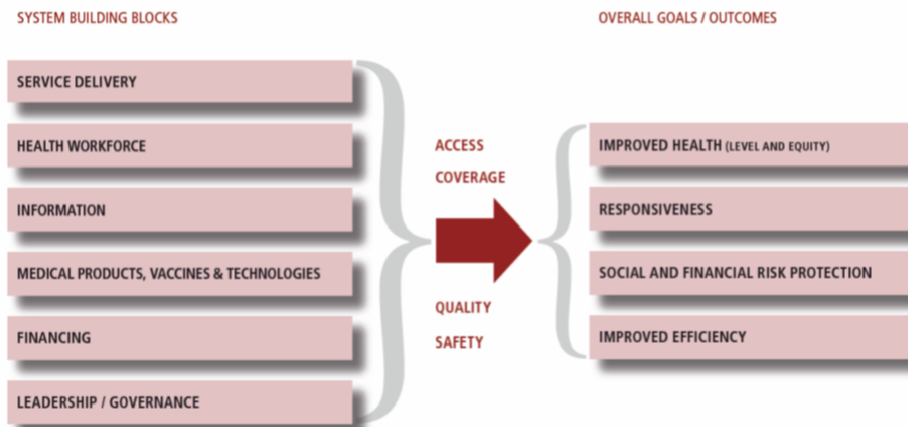
Health System Challenges



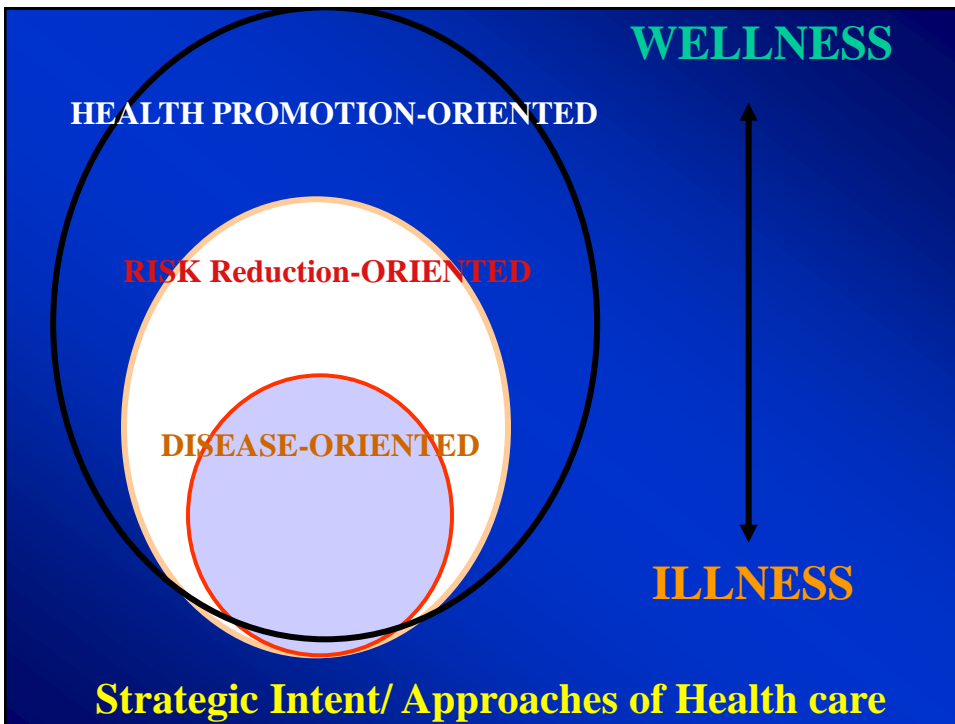
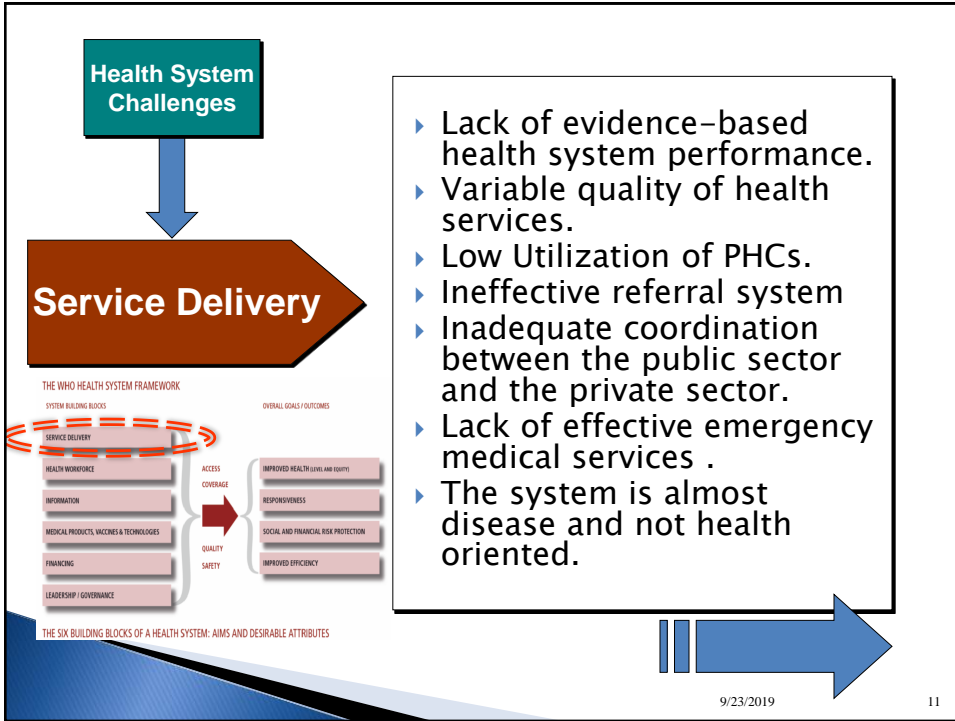
Dr Musa Ajlouni

Health System Challenges

THE WHO HEALTH SYSTEM FRAMEWORK



THE SIX BUILDING BLOCKS OF A HEALTH SYSTEM: AIMS AND DESIRABLE ATTRIBUTES



Health System Challenges

Health Workforce

- ▶ Absence of long-range plan
- ▶ Centralization of decisions
- ▶ Imbalances (gender, geographical, level of care, output and market need).
- ▶ Low productivity
- ▶ Lack of relationship between health service provision and pre-service training institutions.
- ▶ High dropout rate
- ▶ Inequalities of health personnel wages and incentives among public sectors.

THE WHO HEALTH SYSTEM FRAMEWORK

SYSTEM BUILDING BLOCKS

SERVICE DELIVERY
HEALTH WORKFORCE
INFORMATION
MEDICAL PRODUCTS, VACCINES & TECHNOLOGIES
FINANCING
LEADERSHIP / GOVERNANCE

QUALITY
SAFETY

OVERALL GOALS / OUTCOMES

IMPROVED HEALTH LEVEL AND EQUITY
RESPONSIVENESS
SOCIAL AND FINANCIAL RISK PROTECTION
IMPROVED EFFICIENCY

THE SIX BUILDING BLOCKS OF A HEALTH SYSTEM: AIMS AND DESIRABLE ATTRIBUTES

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Health System Challenges

Information

- ▶ Inadequate and fragmented national HIS and research.
- ▶ Shortage of qualified personnel
- ▶ Lack of accurate data on health services and financing in the private sector.
- ▶ No standard forms exist for handling patient data at hospitals and primary care levels.
- ▶ The exchange of information between primary care facilities and hospitals is limited.
- ▶ Lack of information confidentiality and informed consent.
- ▶ Inadequate medical record system.
- ▶ E-Health not utilized.

THE WHO HEALTH SYSTEM FRAMEWORK

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THE SIX BUILDING BLOCKS OF A HEALTH SYSTEM: AIMS AND DESIRABLE ATTRIBUTES

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Health System Challenges

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Medical Technology

THE WHO HEALTH SYSTEM FRAMEWORK

SYSTEM BUILDING BLOCKS

- SERVICE DELIVERY
- HEALTH WORKFORCE
- INFORMATION
- MEDICAL PRODUCTS, VACCINES & TECHNOLOGIES**
- FINANCING
- LEADERSHIP / GOVERNANCE

ACCESS
COVERAGE

QUALITY
SAFETY

OVERALL GOALS / OUTCOMES

- IMPROVED HEALTH LEVEL AND EQUITY
- RESPONSIVENESS
- SOCIAL AND FINANCIAL RISK PROTECTION
- IMPROVED EFFICIENCY

THE SIX BUILDING BLOCKS OF A HEALTH SYSTEM: AIMS AND DESIRABLE ATTRIBUTES

- ▶ The rapid advances in technology and rising health care costs.
- ▶ Oversupply of expensive medical technology
- ▶ Overutilization, over prescribing
- ▶ Maintenance issue

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Health System Challenges

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Financing

THE WHO HEALTH SYSTEM FRAMEWORK

SYSTEM BUILDING BLOCKS

- SERVICE DELIVERY
- HEALTH WORKFORCE
- INFORMATION
- MEDICAL PRODUCTS, VACCINES & TECHNOLOGIES
- FINANCING**
- LEADERSHIP / GOVERNANCE

ACCESS
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OVERALL GOALS / OUTCOMES

- IMPROVED HEALTH LEVEL AND EQUITY
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- IMPROVED EFFICIENCY

THE SIX BUILDING BLOCKS OF A HEALTH SYSTEM: AIMS AND DESIRABLE ATTRIBUTES

- ▶ High expenditure on health(HE) as a percentage of GDP.
- ▶ High percentage of total (HE) on pharmaceuticals.
- ▶ High (HE) on Curative care
- ▶ Lack of universal health insurance coverage.
- ▶ Individual facilities do not have independent budgets.
- ▶ Inefficiencies (Over and Under-utilization)
- ▶ Resources allocation is not usually prioritized according to needs assessment(Finance imbalances)
- ▶ Budget deficit and Shortage of finance

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Health System Challenges

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Leadership / Governance

THE WHO HEALTH SYSTEM FRAMEWORK

SYSTEM BUILDING BLOCKS

LEADERSHIP / GOVERNANCE

THE SIX BUILDING BLOCKS OF A HEALTH SYSTEM: AIMS AND DESIRABLE ATTRIBUTES

OVERALL GOALS / OUTCOMES

- ▶ Lack of effective systems for monitoring and auditing clinical practice.
- ▶ High centralization
- ▶ Concerns on **equity** of the health system.
- ▶ Uncontrolled private health sector
- ▶ Poor coordination among health sectors.
- ▶ Lack of proper systems, resources, and qualified staff in MOH to peruse governance functions.
- ▶ Weak implementation and follow up of health strategies and plans.

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Health System Challenges

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Inequalities

- ▶ Access to health services is uneven across Governorates
- ▶ High Out-of-Pocket Spending
- ▶ Public funds are subsidizing some wealthy households
- ▶ Significant portion of the population does not have any sort of insurance coverage

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Findings from the Jordan Healthcare Utilization and Expenditures Survey, 2006

Health System Challenges



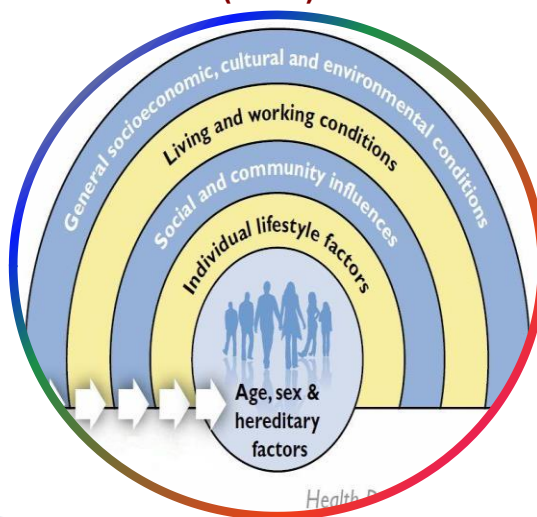
Inequalities

- ▶ 75 % of out of pocket expenditures on outpatient care are for pharmaceuticals. This represents a burden to the population as a whole and to at-risk groups in particular.
- ▶ The elderly, females and the poor spend more out of pocket on outpatient care than others do.
- ▶ Some demographic groups (the elderly and the illiterate) have average expenditures on outpatient care that exceed 10 percent of household income.
- ▶ Females pay out of pocket expenditures three times as much as males on Inpatient Care.

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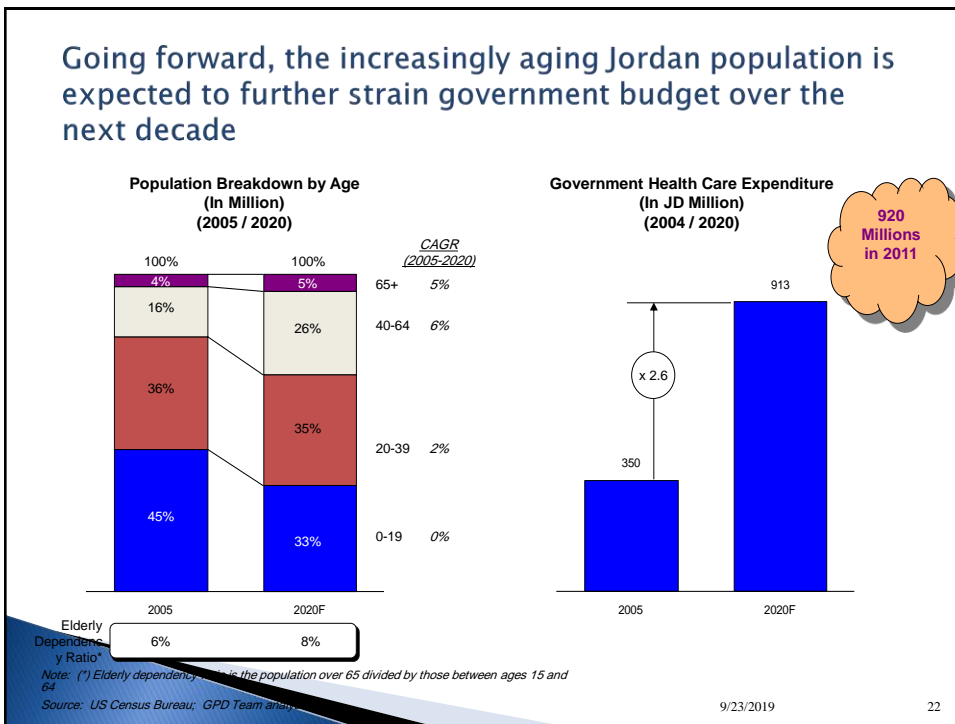
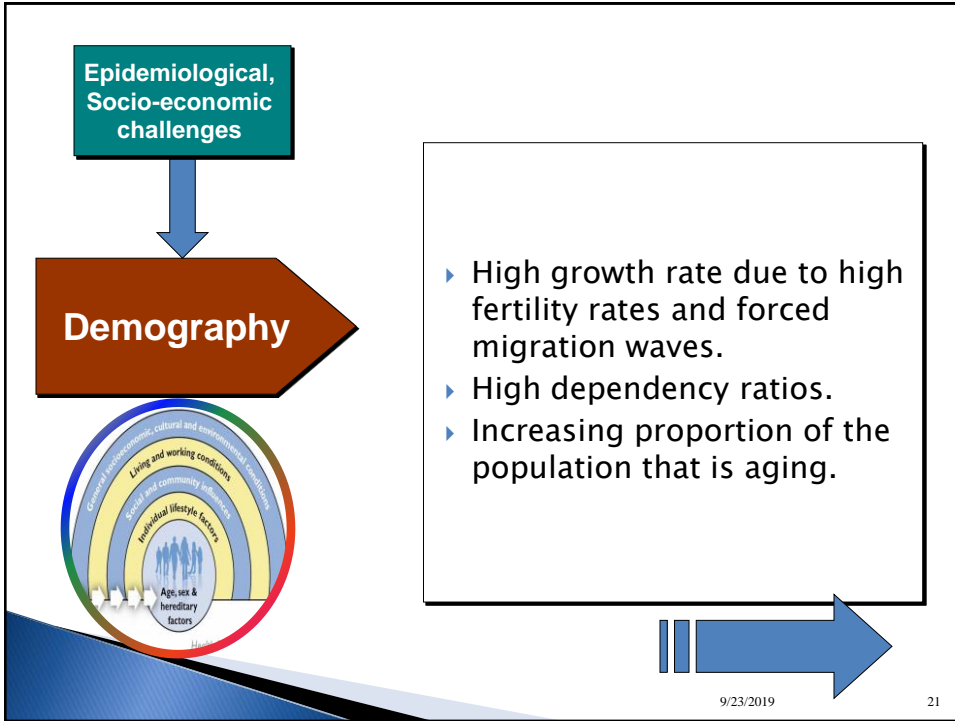
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Epidemiological, Socio-economic challenges (SDH)



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Epidemiological, Socio-economic challenges

Epidemiology

General socioeconomic, cultural and environmental determinants
 Living and working conditions
 Social and community influences
 Individual lifestyle factors
 Age, sex & hereditary factors

- ▶ Increase prevalence rates of NCDs and injuries.
- ▶ Lack of systematic burden of disease assessment and surveillance.
- ▶ Unhealthy behaviors and life style.
- ▶ Pandemic diseases.
- ▶ Threats of chemical weapons.
- ▶ Environmental Health Challenges

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Epidemiological, Socio-economic challenges

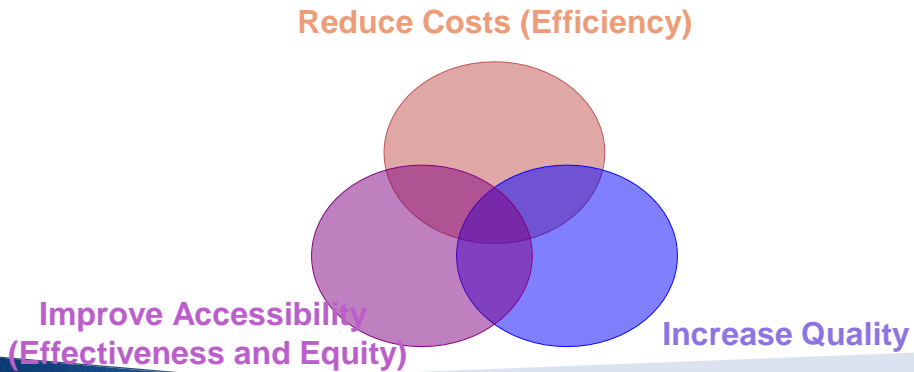
Socio-economic

General socioeconomic, cultural and environmental determinants
 Living and working conditions
 Social and community influences
 Individual lifestyle factors
 Age, sex & hereditary factors

- ▶ Low economic growth ,high debit rates
- ▶ Scarcity of water resources and Limited natural resources and arable land.
- ▶ Unplanned urbanization (about 50% of population lives in Greater Amman Area).
- ▶ High rates of poverty and unemployment
- ▶ Unfinished MDGs agenda(beyond 2015)
- ▶ The increasing demands and expectations of the public.

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Three Main Pillars are Proposed for WHO/Jordan CCS 2014–2018



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Proposed Strategic Priorities of WHO's Work in Jordan for the Period 2014–2018

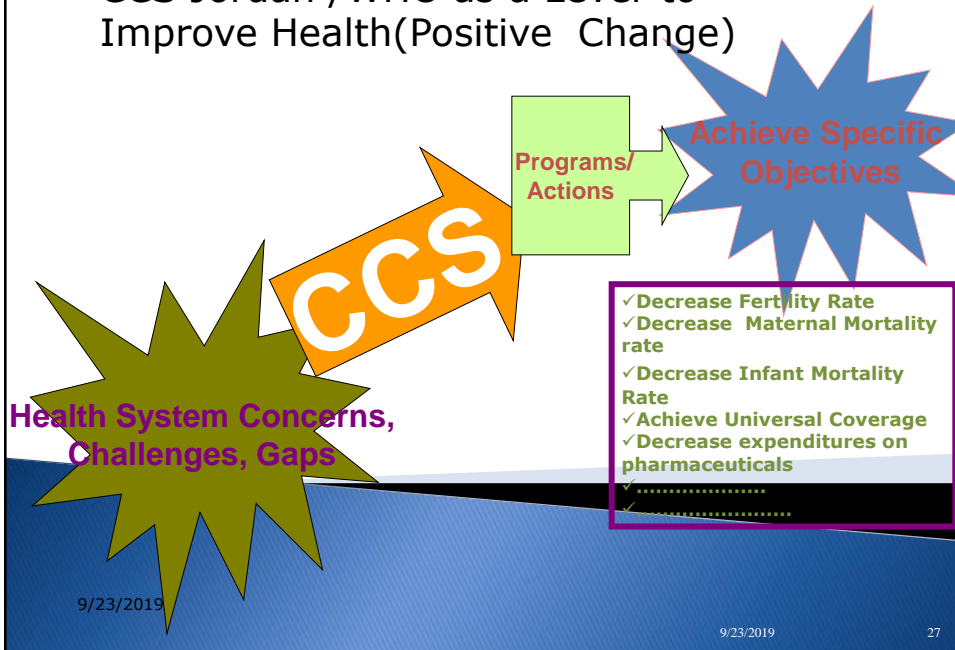
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2. Addressing the challenge of non-communicable diseases, trauma and mental health.
3. Advocating universal health coverage.
4. Addressing the social, economic and environmental determinants of health.
5. Reforming governance /management policies, systems, and practices.
6. Strengthening an integrated national health information and research system
7. Strengthening national HRH development, planning, production ,utilization and retention

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CCS Jordan /WHO as a Lever to Improve Health(Positive Change)



الأردن
JORDAN

Ministry of Health

World Health Organization

Thank you.
