PHC IN JORDAN & HEALTH EDUCATION

Current health status and health care in Jordan according to population and family health survey (JPFHS)

Health status has improved significantly during the past quarter century. Some important indexes to go with that are:

- Life expectancy at birth increased from 49 years in 1965 to 66 years in 1990 to 73 yrs (71.6 males and 74.4 females) in 2012, and 73.3 in 2023 (72.3 males and 75.1 females) according to HPC publications
- Ranging from 57 in developing countries to 78 years in developed countries).

Selected Indicators 2023

- Total Population 11,800,000 . (HPC,2025)
- 2.1% Population Growth Rate. (HPC ,2025)
- Population Doubling Time (years): 29
- 34.4% Population Less Than 15 Years of Age (HPC,2023)
- 3.7% Population Age 65+years
- 75.3 yrs. Life Expectancy at Birth (73.8 yrs. Male: 77 yrs. Female (HPC,2025)
- Jordanian women's median age at marriage is 22.4 years; males would marry 5 years later.
- Total fertility rate dropped to 2.6 in 2023
- Infant mortality rate dropped to 14 per 1000 live births in 2023(HPC)



Figure 1 Trends in fertility by residence

TFR for the 3 years before each survey

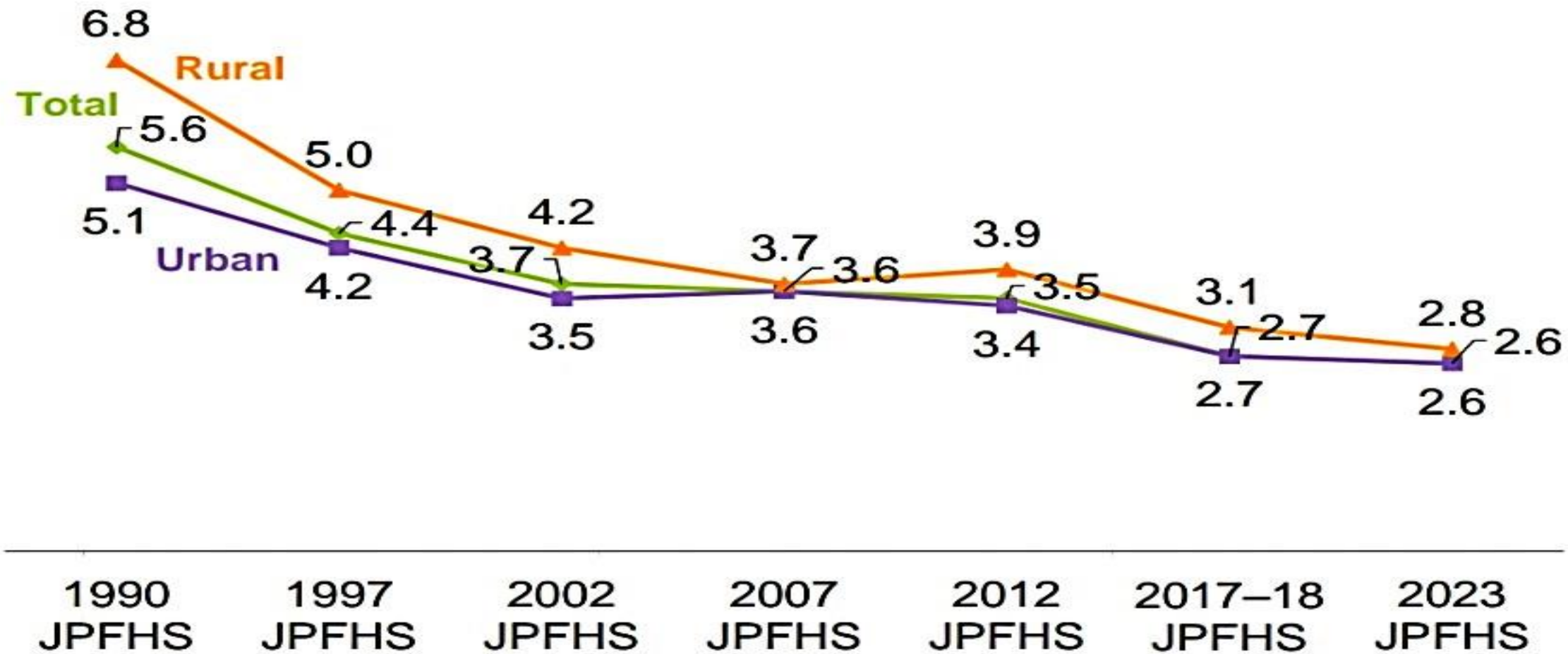
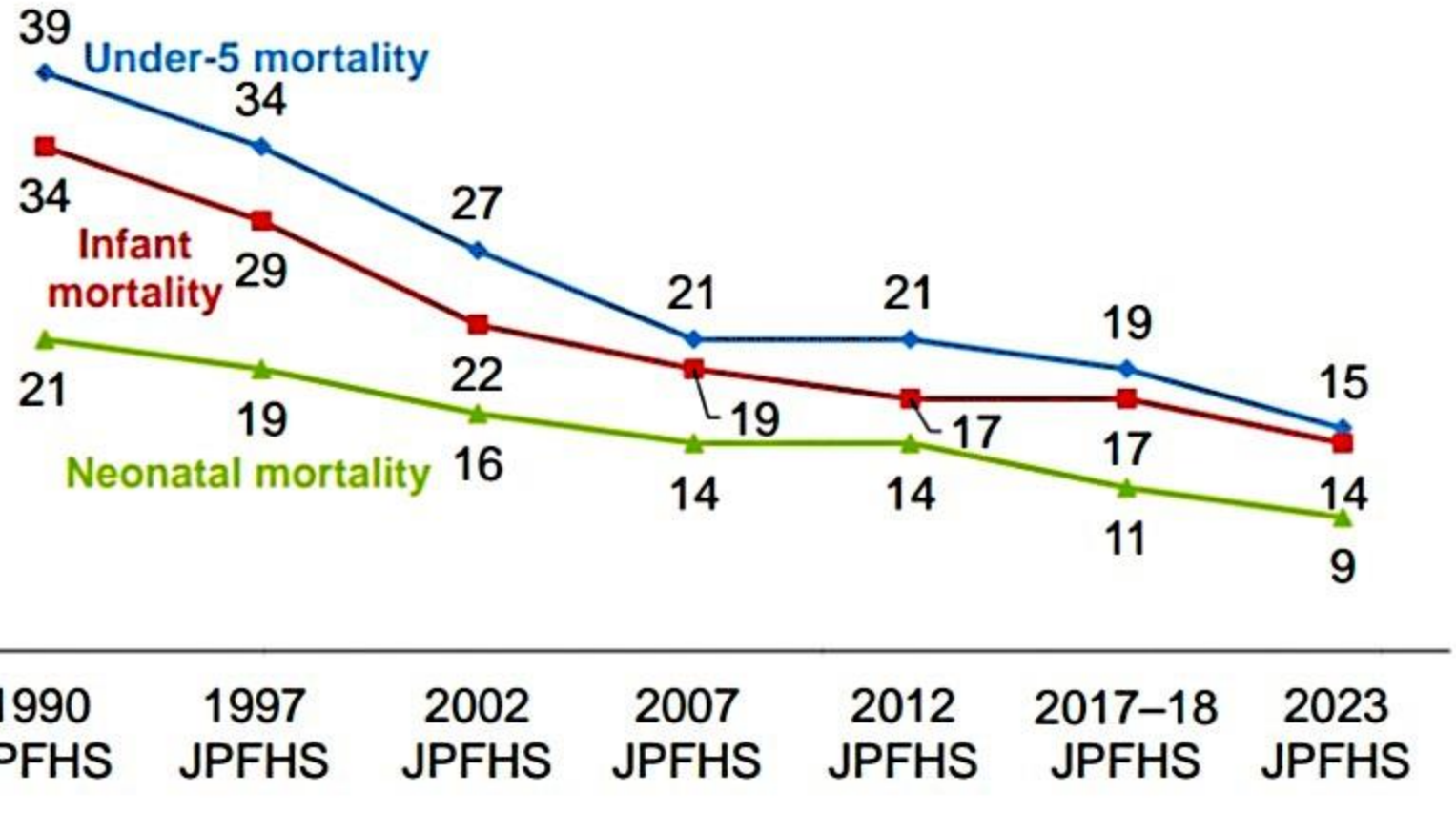


Figure 3 Trends in early childhood mortality rates

Deaths per 1,000 live births in the 5-year period preceding the survey

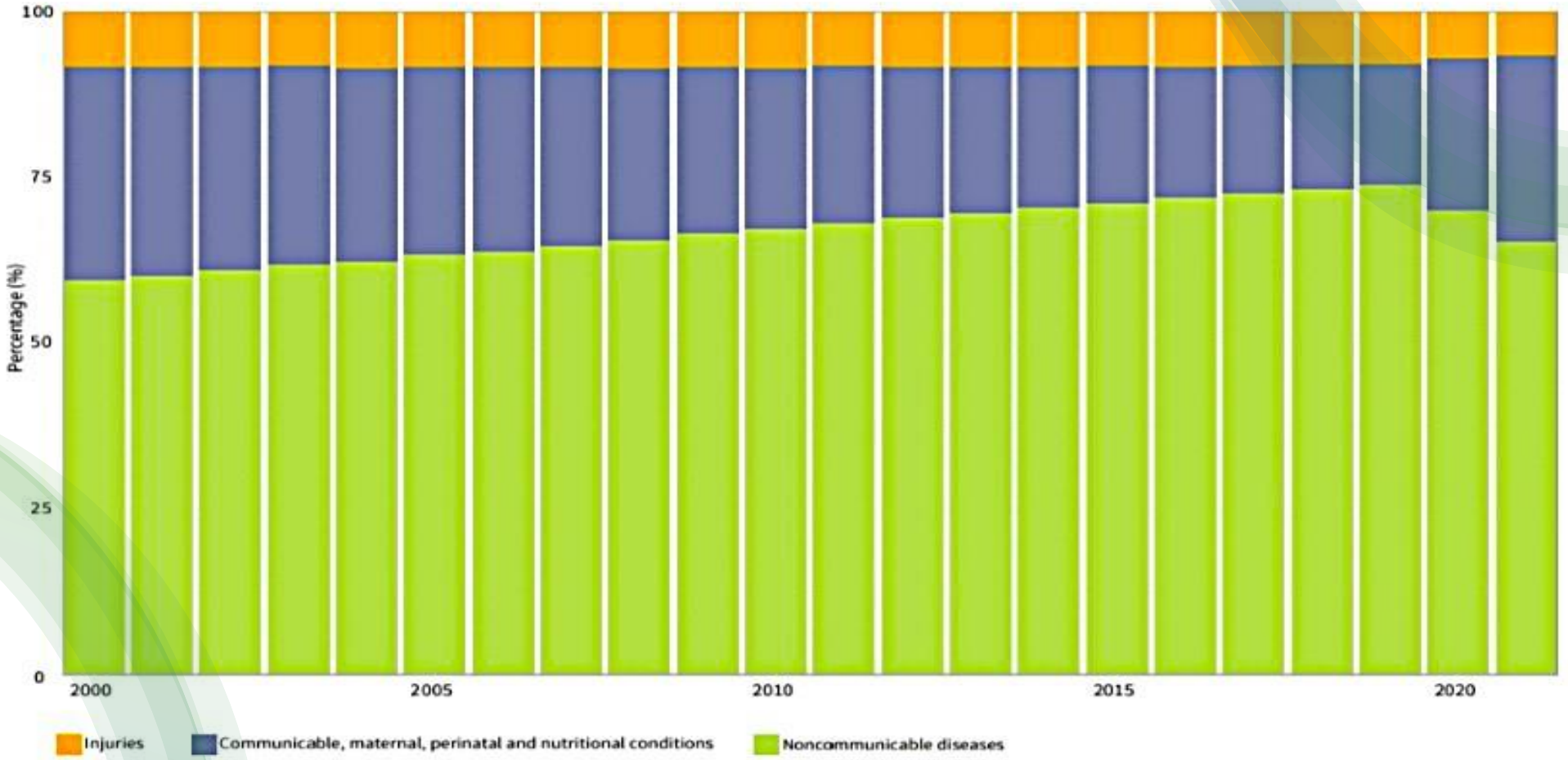


Challenges

While low infant mortality rates and high life expectancy - are among the best in the region, the population growth rate continues to be a major development constraint - especially when analyzed considering the quantity and quality of services to be provided to accommodate this rapid increase in population.

Causes of Death (Mortality)

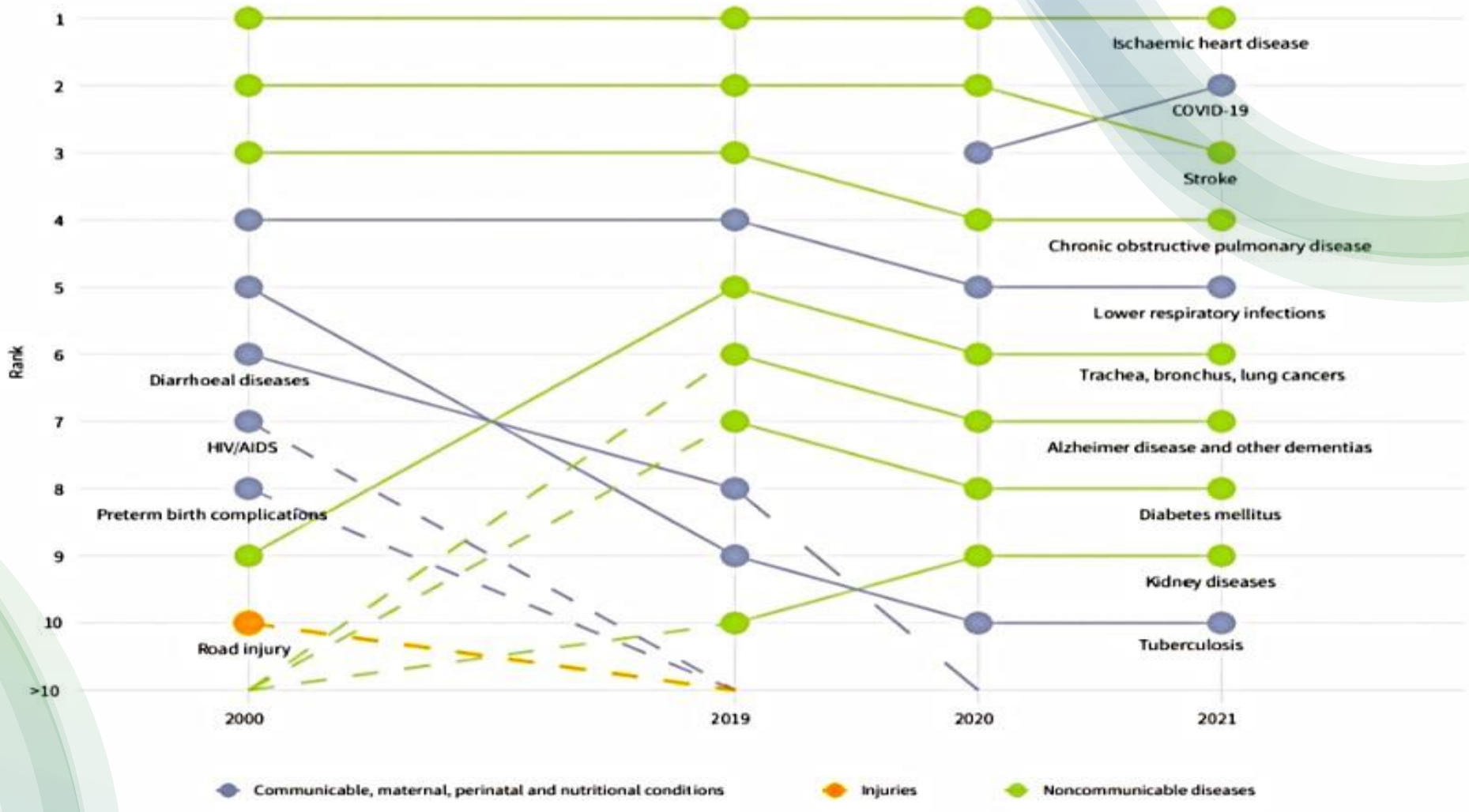
Figure 1.4 Composition of causes of death, global, 2000–2021



Note: In countries that have low-quality vital registration, WHO's current estimates include a cause of death category, "other pandemic-related mortality (OPRM)", which could include underlying causes of deaths from any of the three groups. The graph only shows the relative composition of the three groups; OPRM is not included.

Source: WHO *(1)*.

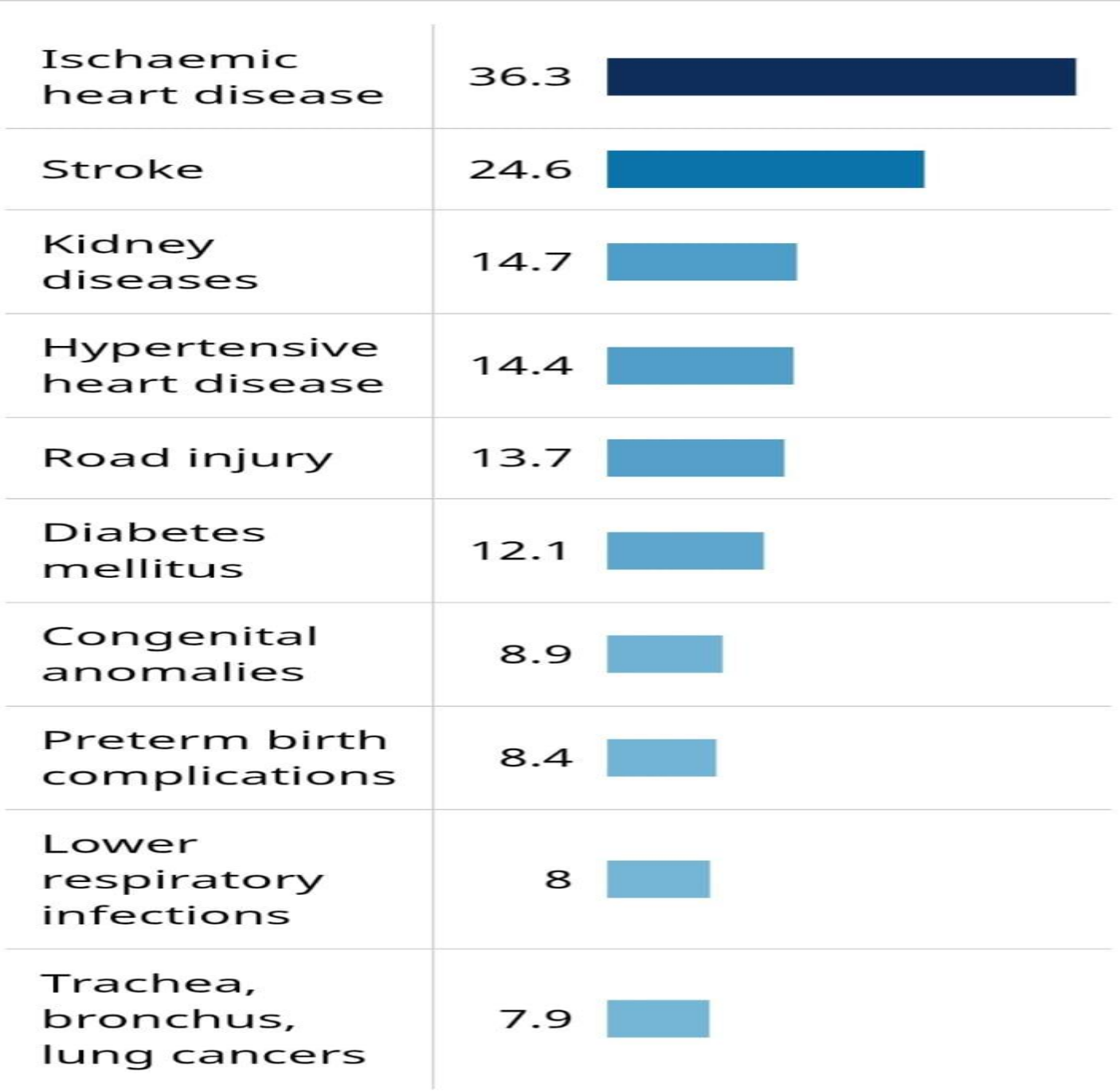
Figure 1.7 Top 10 causes of death globally in 2000, 2019, 2020 and 2021



Note: Solid lines represent movement within the top 10 causes of death. Dashed lines represent movement in or out of the top 10 causes of death.
Source: WHO *(1)*.

Top causes of death

(Deaths per 100 thousandth population, Jordan, 2023)



Source: WHO Data

Share of deaths by broad cause

Jordan, 2023

Cause of Death	%
Noncommunicable diseases	79.7
Communicable, maternal, perinatal and nutritional conditions	11.4
Injuries	8.9

Primary Health Care in Jordan

It follows that for a community like JORDAN were:

- The population is small and highly urbanized.
- Highly qualified medical personnel are abundant.
- Intermediately qualified paramedical staff are scarce .
- Piped water and safe waste disposal are almost universal

مديرية الرعاية الصحية الاساسية

قسم النهوض بالصحة العامة	قسم صحة البيئة	قسم مكافحة الامراض السارية	قسم العيادات ومراكز الرعاية الصحية الاولية
الصحة المدرسية	الهندسة الصحية	الملاريا والبلهارسيا	
رعاية الامومة والطفولة	رقابة البيئة	الامراض الصدرية	قسم التدرن
التغذية	الصحة الصناعية	التطعيم	
التثقيف الصحي		الاستقصاء الوبائي والصحة العامة	
تمريض الصحة العامة		شعبة الاسهالات والكوليرا	
شعبة الطب الرياضي		برنامج الايدز الوطني	

Health promotion

Health promotion encompasses a variety of activities aiming at improving the health status of the individual and the community .

And if successful, it will affect the lives of people, so health promoters should be equipped with practical skills, and should understand the values and ethics implicit in their work.

Health Education (HE) in Jordan

In Jordan, health education (HE) is an important pillar of the work of the Ministry of health.

Recently the HE division was promoted to a full directorate, where qualified experts develop their HE plans, based on priorities, community needs, and information collected from different reports, surveys and studies. Their work also includes training of health workers and preparation of different HE media

Unfortunately , the traditional health education approach used in Jordan , and many other countries, was aimed solely at changing people to fit the environment, and did little to make the environment a healthier place to live in.

Health Education (HE)

IMPORTANCE OF HE:

- First line of Prevention
- Skeleton of primary health care services.
- Essential for Health Promotion and Preventive Services.
- Helping people to understand their behavior and how it may affect their health.

Main goal of health education is:

To improve the quality of life individual and Community in all aspects: health, social, economic and political, taking in consideration that health is a state of complete physical, psychological and social well being and not the mere absence of diseases.

Who is the health educator?

- Specialist : person who is especially trained to do health education work.
- Any health worker who is concerned with helping people to improve their health knowledge and skills.
- Any person in the Community can participate in health education process, like teacher, mothers… etc.

Target groups for health education programs

1. **women** have the role of raising children and teaching them practices and concepts as the personal hygiene and nutrition. also, women must be aware of the basics of preventive of health services.
2. **Children**: any concept learned in childhood will affect behavior in adult life major subjects in health education for children are sanitation, nutrition, personal hygiene and environment.
3. **Elderly**.

Approaches of HE

Specialists identify ***five*** approaches that can be used individually or in combination to achieve the desired goal:

1- **The medical approach** involves medical intervention to prevent ill health using a persuasive method and expects patients to comply with the recommended intervention.

2. **The educational approach** provides information and helps people to explore their values and make their own decisions.

3. **The change in behavior approach** involves changing people's attitudes so that they adopt healthy lifestyles as defined by the health promoters. This approach can be applied using locally available methods and media such as leaflets and posters.

4.The individual -centered approach considered the individual to have a right to control his own health, so he should be helped to identify his concerns, and gain the knowledge he needs to make changes happen.

5. The change in society approach aims at changing the society rather than the individual by putting health on the political agenda at all levels, and by shaping the environment so that it becomes conductive to health.

Conclusions

- ✓ Primary health care is the first point of contact between a community and its country's health system.
- ✓ The World Bank estimates that 90% of all health needs can be met at the primary health care level.
- ✓ Investment in primary health care is a cost-effective investment – it helps reduce the need for more costly, complex care by preventing illness and promoting general health

- ✓ Health education is the translation of health knowledge into desirable individual and Community behavioral patterns by means of educational process.
- ✓ Health education is the skeleton of PHC system –since no other activity can be performed without health education.
- ✓ The needs and interests of individuals, families, groups, organizations and communities are at the heart of health education program.
- ✓ Health education is the responsibility of every person in the Community.

THANK YOU