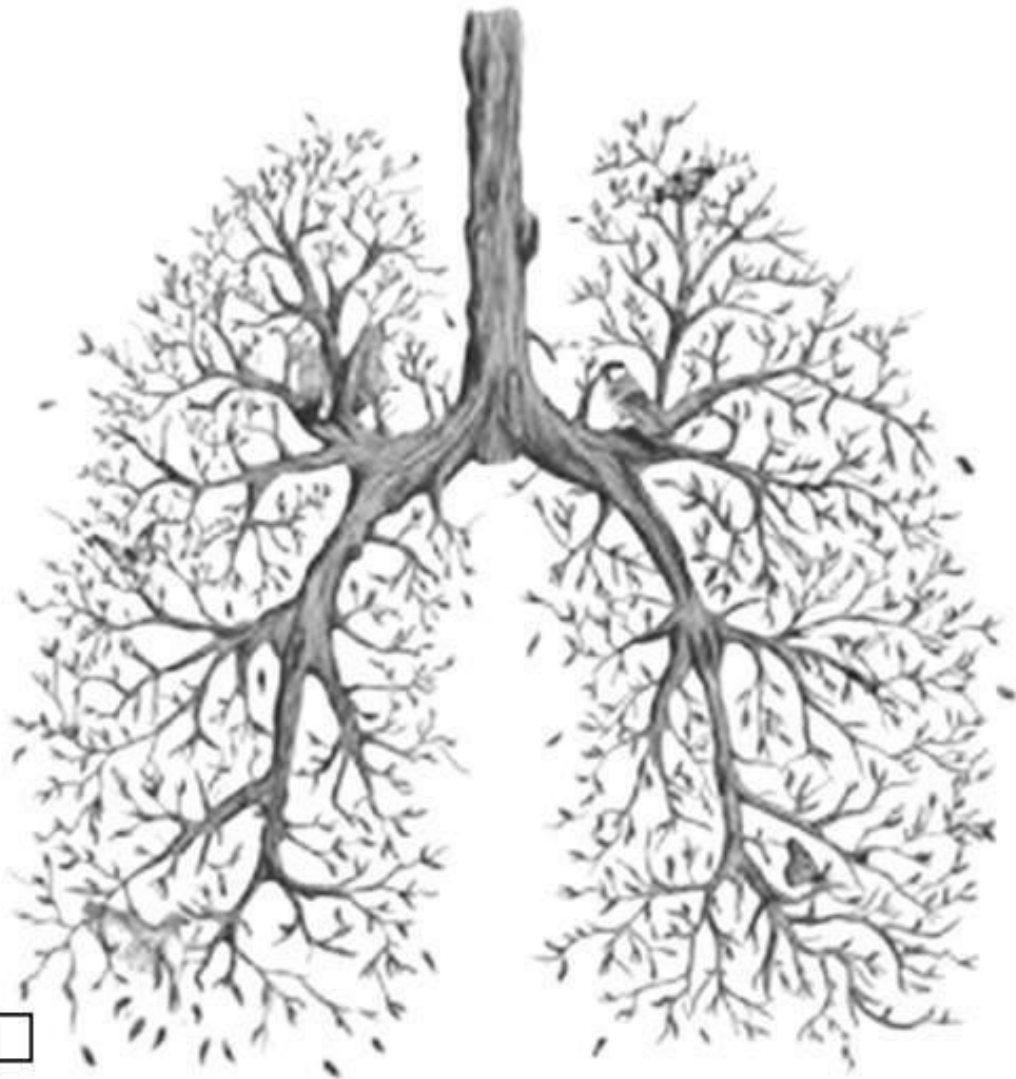


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Medical Committee  
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# Community Medicine



Slides

Sheet

Lecture # 2

Date:

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## ***Primary Health Care***

In the previous lecture we have talked about primary health care in general and the health dimensions and we mentioned that there are other dimensions rather than the physical dimension such as; emotional, spiritual, environmental and mental dimensions.

### **Spectrum of health:**

Positive health  $\implies$  Better health  $\implies$  Freedom from disease  $\implies$   
Unrecognized disease  $\implies$  Mild disease  $\implies$  Severe disease  $\implies$  Death

### **Determinants of health (Health Wellbeing):**

- 1) Education, Agriculture, Water/Sanitation, and Housing.
- 2) Socioeconomic development; economics of a country is very important in the health services and systems because the better the economic or financial status of a country, the more the services provided to community and the less the economic or financial status of a country the less services will provide to community and then we will depend on making priorities.
- 3) Resources, Organization and management (how to set a proper health care system), Delivery and accessibility (delivery is part of maternal health, for example, delivery in Jordan is mostly in hospitals 99%, some countries in the developing world have 50% deliver at home. Delivery at home or at a hospital gives different mortality rates because of the Quality.
- 4) Age and Gender (for some diseases, as the age is increasing, the prevalence of getting that disease also increases. Also, children under 5 years, they have less immunity (their immunity is still developing) so they have more health hazards than those above 5 years old.)
- 5) Genetics (way of inheritance of diseases whether it is dominant, excessive, sex linked ....etc).
- 6) Life-style which is very important ,for example, exercise, type of food whether it was a fatty food or healthy food or has high content of fibers ...etc.

7) Work, Environment and Employment.

8) Social organizational networks, Living conditions and Family size.

## ***Primary Health Care***

- Some people think that primary health care is the first aid but it's not!
- Primary health care deals with prevention meaning it deals with healthy clients not patients. 90% of primary health care services deal with healthy clients for prevention and promotion but not curative purposes.

Primary health care as defined by ***Alma-Ata 1978*** by **WHO**:

As an essential health care made universally accessible (health services should be universal and should not be only limited for the developed, otherwise it will not be primary health care (Primary health care where low social classes have the right to live a healthy life same as those of high social classes. Primary health care system should care about both developed and developing world equally.) So PHC should be universally acceptable to individuals and families in the community by means acceptable to them (acceptable means that some services are not accepted in the community), like:

1-family planning services although some of the developing world now are starting to accept this, but before it was not acceptable, also, in USA or UK family planning services are provided for youth (at age of 15) at school, community,..etc while in developing world family planning services are provided at the marriage age. In country like Jordan, average age of marriage is 24 which reflects the development of society; the higher age of marriage the more developed the society is but for sure that doesn't mean to reach 35, what's meant here is that the age of marriage to be at about mid 20s where is the apex physiology of pregnancy (best age for pregnancy and delivery that reduces the complications of pregnancy is 25) so when we are around that age we will have better outcome of pregnancy (baby).

2-counseling (in developed world everyone can have councilors (psychological councilor, social councilor, etc) while here in Jordan, we still suffer from the idea of counseling, if we want to do any counseling we do it secretly without telling anyone. Social believes are important when it comes to providing services.) through their full participation and at a cost that the community and country can afford to maintain at every stage of their development in the spirit of self-determination.

**Functions of primary health care:** (understand the following concepts but don't memorize them)

- 1) To provide continuous and comprehensive care (In developed world like USA or UK, each family has a specific family doctor (primary health provider) who is in-charge to follow up with them. While here in Jordan, families go directly to a specialist without going to a family doctor first. Primary health care provider should not be specialized to a certain specialist like internal medicine or gynecology; he/she should treat the patient/client as a whole. Family doctors can deal with 90% of the case and 10% cases will be referred to a specialist by a family doctor). Keep in mind that health care physician is the same as family doctor.
- 2) To refer to specialists and/or hospital services.
- 3) To co-ordinate health services for the patient.
- 4) To guide the patient within the network of social welfare and public health services.
- 5) To provide the best possible health and social services in the light of economic consideration.

**Levels of care:**

- 1) Primary health care.
- 2) Secondary health care.
- 3) Tertiary health care.

**1) Primary health care (PHC):**

- The first level of contact between individual (or client) and the health system.
- Essential health care (PHC) is provided.
- A majority of prevailing health problems can be satisfactorily managed. (If we have a proper PHC system then 90% is covered by that system but if we had throwbacks in that system then 50% is covered by PHC system and if we have more throwbacks then less percentage is covered by PHC system. The more developed the system is the less percentage dealt with curative cases and the less developed the system is the more curative cases are dealt by PHC system. Remember PHC system mainly for prevention and promotion.)

- The closest to the people (PHC is a team that has councilors, nurses, pharmacists, family doctor, dentists).

\*PHC services are provided by primary health centers.

## **2) Secondary Health Care:**

- More complex problems are dealt with.
- Comprise curative services.
- Provided by the district hospitals.
- The 1st referral level.

## **3) Tertiary Health Care:** (complicated cases; a disease and its complications):

- Offers super-specialist care.
- Provided by regional/central level institution.
- Provide training programs.

(When talking about tertiary health care, we are not talking about a disease only for an example like diabetes; we are talking about the complications caused by that certain disease for an example retinopathy or complications on nerves,...etc.)

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So again, primary health care is a health care that deals with all family members from neonates till grandparents.

Primary Health Care is essential health care that is a socially appropriate, universally accessible, scientifically sound first level care provided by a suitably trained workforce supported by integrated referral systems and in a way that gives priority to those most in need, maximizes community and individual self-reliance and participation and involved collaboration with other sectors.

## **Primary Health Care deals with the following:**

- Health promotion.
- Illness prevention.
- Care of the sick (we have to deal with the sickness before we deal with its complications, for example, a women came to check at her pregnancy and at the same time we find that she has gestational diabetes so we have to deal with it first- sickness or diseases have the major propriety in comparing with its complication).
- Advocacy.
- Community development.

So in brief, Primary health care is essential health care based on practical, scientifically sound and socially acceptable methods and technology made universally accessible to individuals and families in the community through their full participation at a cost that community and the country can afford (Alma-Ata, 1978)

- (You are supposed to understand the concept of primary health care. All definitions deal with the same concept. You are not expected to memorize the definitions.)
- As you can see, the first definition of Primary health care started at Alma-Ata 1978 by WHO. (Important)

## **Principles for PHC:**

- Social Equity (deals with all social classes equally, provides services to poor and rich people equally).
- Nation-wide coverage
- Self-reliance
- Inter-sectoral coordination (Not only health sector, but also, it should deal with agricultural sector, educational sector, etc).
- People's involvement in the planning and implementation of health programs.

Again, the 1978 Declaration of Alma-Ata proposed set of **principles for primary health care**:

- Reflect and evolved from the economic conditions and socio-cultural and political characteristics of the country.
- Address the main health problems in the community (to set up a family health care is not easy because it differs from one community to another depending on social economics, the needs of the society and environmental factors), providing promotive, prevention, curative and rehabilitative (after treating for an example CVA (cerebrovascular accidents) we shouldn't leave the patient, we should provide him with rehabilitation services which is part of PHC).
- Involve, in addition to the health sector, all related sectors and aspects of national and community development, in particular agriculture, animal husbandry (diseases that are transmitted from animals to humans), food, industry, education, housing and public works.
- Promote maximum community and individual self-reliance and participation in planning, organization, operation and control of primary health care.
- Be sustained (continuously following up with clients) by integrated, functional and mutually supportive referral systems.
- Rely, at local and referral levels, on health workers, including physicians, nurses, midwives, auxiliaries and community workers as applicable, as well as traditional practitioners as needed. (Team of family health care system).

### **Core activities of PHC:**

There's a set of core activities, which were normally defined nationally or locally. According to the 1978 Declaration of Alma-Ata proposed that these activities should include:

- Health education (in the Top of the list because if you educate the community it will be easier for them to live a healthy life style, accordingly they will do great job in preventive medicine (50% working on preventive medicine).
- Identifying and controlling prevailing health problems.
- Food supply and proper nutrition

- Provision of safe water and basic sanitation (under environmental health).
- Maternal and child health care, including family planning. (Very important especially in the fast growing population where children below the age of 15 resemble around 2/3 of the community such as Jordan).
- Immunizations (to fight against diseases that are infectious and prevalent).
- Prevention and control of endemic disease.
- Appropriate treatment of common diseases and injuries.
- Promotion of mental health.(includes also Psychiatry)
- Provision of essential drugs. (Certain drugs should be always available and covered by the government like diabetic drugs, blood pressure drugs,etc since some people cannot afford continuous drugs)
- Training of health guides, health workers and health assistants.
- Referral services (differs from a society to another).

\*\* A good PHC should not exceed 10% of referral cases to specialists.

### **PHC systems include within its umbrella:**

- Mental Health.
- Physical handicaps (they need continuous treatment).
- Health and social care of the elderly.

\*\*In developed world where the economic allow them to cover all society aspects, elder group have big portion of primary health care services but in the developing world elderly people are not.

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Believer in yourself, have faith, fasten your seat built and let the hard work begin.

Best of luck my dearest colleagues, I hope I have covered everything said in the lecture and please don't forget me from your Dua'a.

Your colleague: Sura Mubarak