

# Jordan : Health Systems Profile

## Key health system indicators

### Health status

Life expectancy at birth in years	<b>total</b>	<b>73</b>
Adult mortality rate (probability of dying between 15 and 60 years) per 1000 population	<b>males</b>	<b>146</b>
	<b>females</b>	<b>99</b>
	<b>total</b>	<b>123</b>

### Communicable diseases

Tuberculosis notification rate per 100 000	<b>5</b>
Incidence rate of malaria per 1000 population	...
Estimated number of people living with HIV	...

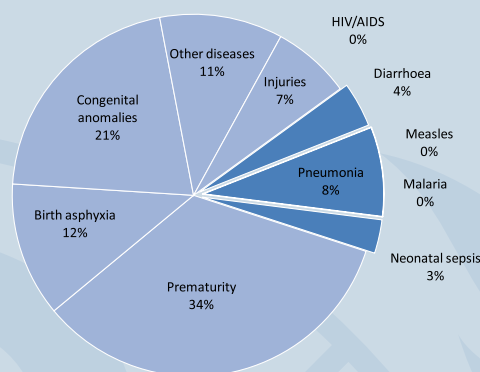
### Behavioural risk factors

2008 estimated prevalence (%)	males	females	total
Current daily tobacco smoking	<b>47</b>	<b>6</b>	<b>26</b>
Physical inactivity	...	...	...

### Metabolic risk factors

2008 estimated prevalence (%)	males	females	total
Raised blood pressure	<b>26.0 [18.8-34.2]</b>	<b>20.3 [14.5-27.0]</b>	<b>23.2 [18.5-28.4]</b>
Raised blood glucose	<b>17.2 [11.6-23.6]</b>	<b>18.1 [12.7-24.5]</b>	<b>17.7 [13.7-22.0]</b>
Overweight	<b>66.5 [61.7-71.0]</b>	<b>71.2 [68.3-73.8]</b>	<b>68.8 [66.0-71.4]</b>
Obesity	<b>27.3 [23.4-31.4]</b>	<b>41.7 [38.4-44.9]</b>	<b>34.3 [31.7-36.9]</b>
Raised cholesterol	<b>47.8 [35.4-59.9]</b>	<b>49.6 [34.4-64.2]</b>	<b>48.8 [39.0-58.5]</b>

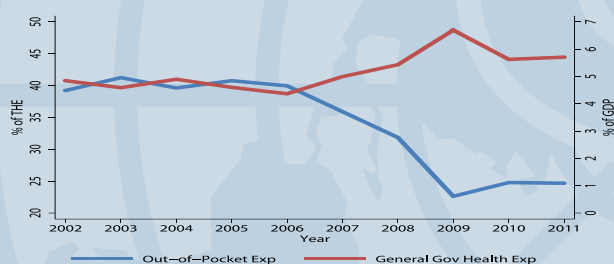
### Distribution of causes of death among children aged <5 years (%)



Communicable diseases are estimated to account for 15% of all deaths among children aged <5 years

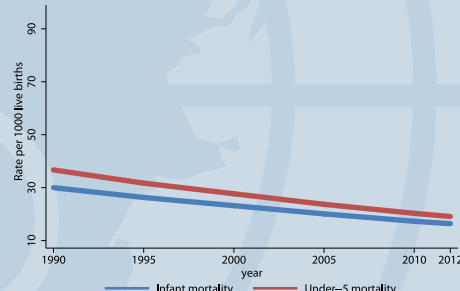
### Expenditure and mortality trends

#### Health finance



The general government expenditure on health as % of Gross Domestic Product (GDP)  
 The out-of-pocket expenditure as % of Total Health Expenditure (THE)

#### Infant and under 5 mortality rates per 1000 live births



### Health system: governance

Existence of a national health strategy/strategic plan and time frame	<b>Yes</b>
Annual publication/dissemination of ministry of performance report	<b>Yes</b>
High level multisectoral advisory council for health available	<b>Yes</b>

### Health system: information

#### Functioning civil registration and vital statistics

Percentage of births registered	<b>&gt;90</b>
Percentage of causes of ICD death recorded	<b>48</b>
Year most recent use of ICD in mortality classification reported	<b>2008</b>
Year most recent annual health statistics report published	...

### Health system: health workforce

#### Health workforce per 10 000 population (2011)

Physicians	<b>27.1</b>
Nurses/midwives	<b>46.6</b>
Dentists	<b>8.9</b>
Pharmacists	<b>15.4</b>

#### Health professions education institutions

Medical	...
Nursing	...

#### Percentage of doctors working in rural settings

Percentage of doctors working in rural settings	...
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### Health system: service provision

#### Infrastructure

Primary health care facilities per 10 000 population	<b>2.4</b>
Hospital beds per 10 000 population	<b>18</b>

#### Service delivery

Access to local health services (%)	<b>99</b>
Contraceptive prevalence (%)	<b>61</b>
Antenatal care visits (4+ visits) (%)	<b>94.1</b>
Measles immunization coverage among 1-year-olds (%)	<b>98</b>
Smear-positive tuberculosis treatment success (%)	<b>87</b>
Number of tobacco (m)POWER measures implemented at the highest level of achievement	...

### Health system: finance

National health accounts conducted (number of rounds; last reference year(s))	<b>(4; 2008)</b>
General government expenditure on health as % of GDP (2011)	<b>8.4</b>
Out-of-pocket expenditure as % of total health expenditure (2011)	<b>24.7</b>
General government expenditure on health as % of total government expenditure (2011)	<b>17.6</b>

### Health system: technology

Existence and year of last update of published essential medicines list (EML)	<b>Yes (2011)</b>
Existence of a functional national regulatory authority (NRA)	<b>Yes (medicines and medical devices)</b>
Number of MRI/CT scanners (in public facilities) per million population	<b>2.5 / 6.7</b>

## Health System Strengths, Weaknesses, Opportunities, Challenges, and Priorities

Strengths	Weaknesses
<ul style="list-style-type: none"> <li>• High population coverage with prepayment schemes, covering 87.5% of the population and maintaining the share of out-of-pocket spending at 22.6% of total health expenditure (in 2011)</li> <li>• Well trained health workforce, with particular emphasis on good quality training for nurses</li> <li>• National Hospital Accreditation Programme since 2004 and Jordanian Health Care Accreditation Council (HCAC) since 2008</li> <li>• Quality Control Directorate in the Ministry of Health that implements, supervises and monitors quality assurance programs</li> <li>• Comprehensive National Drug Policy, Essential Drug List and standardized treatment protocols</li> <li>• Enhanced partnership between public and private sectors in the context of health reforms</li> </ul>	<ul style="list-style-type: none"> <li>• Health system development approach continues to be disease-oriented and not health promotion-oriented</li> <li>• Centralized management practices, weak performance management and lack of human resources for health planning</li> <li>• Disparity in distribution of health care personnel between public and private sectors and urban and rural areas</li> <li>• Inadequate in-service training despite good quality pre-service training</li> <li>• Lack of effective systems for monitoring and auditing of clinical practices</li> <li>• Essential Drug List has not been widely promoted nor properly implemented at the level of health facilities</li> <li>• Health information relies on population studies and not on a routine health management information system</li> <li>• Lack of disaggregated data and weak data analysis, reporting and use in decision-making processes</li> </ul>
Opportunities	Challenges
<ul style="list-style-type: none"> <li>• High government commitment and potential for achieving universal health coverage</li> <li>• Government health expenditure representing more than 17.5% of general government expenditure in 2011</li> <li>• Total health expenditure as percentage of GDP was 7.72% in 2011</li> <li>• High Health Council provides the right forum to align and coordinate among all health-related parties</li> <li>• Conducive environment for Ministry of Health to align with bilateral and multilateral development partners as 7% of the total health expenditure comes from external assistance</li> <li>• Thriving medical tourism sector that is a source of revenue of up to US\$ 1.0 billion</li> <li>• Mass communication network which can facilitate information sharing on health-related matters</li> <li>• Ministry of Higher Education has established standards for all health professional programmes that will positively affect the quality of newly graduated health professionals</li> </ul>	<ul style="list-style-type: none"> <li>• High burden of noncommunicable diseases and their risk factors (e.g. 50% of those 20 years old and above are smokers and more than 70% are overweight), accidents and health of the elderly</li> <li>• Standardized treatment protocols are not based on cost-effective approaches leading to high cost of drugs and hospital care</li> <li>• Low nurse-to-doctor ratio; shortage of specialists such as: cardiovascular surgeons, anaesthetists, intensive care and trauma specialists</li> <li>• Surplus of sophisticated and advanced diagnostic facilities (number of CT scanners and MRI units per population is higher than some industrialized countries), which increases the cost of health care</li> </ul>

### Priorities

- Develop a vision, strategy and roadmap to achieve universal health coverage by 2020
- Consolidate and scale up the family practice programme, including a functioning referral system across the country which is universally accessible
- Earmark a proportion of the revenues generated through medical tourism for preventive and promotive health interventions
- Develop a certificate of needs programme to ensure rational distribution of health care and diagnostic facilities and introduce health technology assessment tools to promote cost-effective use of technologies in the public and private sectors
- Apply policies and incentives to attract health care providers to work in the public sector and rural areas
- Establish a system of continuing professional development and recertification of health professionals
- Reinforce health information systems, including: civil registration, risk factor and morbidity monitoring and health systems performance; and promote informed decision-making
- Institutionalize health system research and promote evidence-based health policy development

#### Jointly developed by:

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**World Health  
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