Tishk International University Science Faculty Medical Analysis Department



Primary Healthcare

Lecture 1 part 1

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Instructor: Dr. Nabeel A. Fattah



Primary Health Care (PHC)

Edited and modified by

Dr. Nabeel A. Fattah

001 PHC Introduction - Lecture note 1 part 1.mp4

Medical Analysis – Stage 4
Primary Health Care
Lecture note 001 part 1



Objectives:

Students should know how to:

- 1- Define PHC
- 2- Describe the concept of PHC and how it relates to basic health services
- 3- List the elements and principles of PHC
- 4- Define the promotive services
- 5- Define the preventive services
- 6- Define the curative care services

WHO-UNICEF held international conference in 1978 at Alma-Ata (USSR), the governments of 134 countries and many voluntary agencies called for a revolutionary approach to health care.

The Alma-Ata conference called for acceptance of the WHO goal for Health for All (HFA) by the year 2000 and proclaimed primary health care as a way to achieving Health for all.



The Alma-Ata Conference defined

PHC as follows:-

"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 and at a cost the community & country can afford to maintain at every stage of their development in the spirit of self determination".



- PHC is equally valid for all countries, although it takes varying forms in each of them.
- The concept of PHC has been accepted by all countries as the key to the attainment of HFA(Health For All).
- It is accepted as an integral part of the country's health system.



Elements (components) of PHC

Although specific services provided will vary in different countries & communities, the Alma-Ata Declaration has outlined 8 essential components of PHC:-



- 1. Health education concerning prevailing health problems & the methods of preventing & controlling them.
- 2. Promotion of food supply & proper nutrition.

3. An adequate supply of safe water & sanitation.

4. Maternal & child health care.



5. Immunization against major infectious diseases.

6. Prevention & control of locally endemic diseases.



7. Appropriate treatment of common diseases & injuries.

8. Provision of essential drugs.



- The first three elements are promotive services.
- The middle three are preventive services.
- The last two services are curative care services.



The concept of PHC involves an effort to provide the rural population in developing countries with at least the basic minimum of health services. The list can be modified to fit local circumstances

For example some countries have specifically included:

- Mental health
- Physical handicaps.
- Health and social care of the elderly.



PHC principles

The mentioned eight services indicated as elements, are to be organized & delivered on basis of the principles of :-

- 1- Equity in distribution.
- 2- Appropriate technology.
- 3- Multisectoral approach.
- 4- Community participation.



1. Equitable distribution.

The first key principle in the PHC strategy is equity or equitable distribution of health services.

Health services must be shared equally by all people irrespective of their ability to pay.



PHC aims to re-adress this imbalance by:

Shifting the centre of gravity of the health care system from cities (where three-quarters of the health budget is spent) to \rightarrow rural areas (where three-quarters of the people live).

Bring these services as near people's home as possible.



Equity means:

- 1. Services to all
- 2. More services to needy & vulnerable



i.e. while continuing to provide essential health care for all the population irrespective of social, economical & cultural preferences, extended care is to provided to the "high risk" groups in the community either within the health centers or by referral from the health centers to a higher level of care (hospital).



For ensuring equity:

- -The population to be served must be known.
- The vulnerable groups are to be identified & reached.

PHC principles (cont.)



For ensuring equity (cont.):

- The health services (not necessarily health centers) have to be dispersed into:
- The farthest remote rural areas.
- The deepest parts of the underserved urban population.
- The failure to reach the needy & the majority is usually due to <u>limited geographical access</u>.

PHC principles (cont.)



Thus, to ensure <u>equity</u>, <u>accessibility</u> has to be improved by :

- Increasing the number of health facilities.
- Improving transport conditions.
- Organizing outreach services, thus substituting one when the other is not available.



PHC aims to:

- Correct imbalance in <u>accessibility</u>
- Bring health services as near to people's homes as possible.
- To achieve this, PHC is supported by higher level of health care to which patients can be referred for extended care.





2. Community participation.

Involvement of individuals, families, & communities in promotion of their own health & welfare.



There must be:

A continuing effort to secure meaningful involvement of the community in:

Planning.

Implementation.

Maintenance of health services.

Evaluation of health services.

Maximum reliance on local resources such as:

Manpower.

Money.

Materials.



Universal coverage by PHC cannot be achieved without the involvement of the local community.

In short, PHC must be built on the principle of community participation (or involvement).



3. Intersectoral coordination.

There is an increased realization of the fact that the components of PHC cannot be provided by the health sector alone.



The Declaration of Alma-Ata states that "PHC involves in addition to the health sector, all related sectors & aspects of national & community development, in particular <u>agriculture</u>, <u>animal husbandry</u>, <u>food</u>, <u>industry</u>, <u>education</u>, <u>housing</u>, <u>public works</u>, <u>communication</u> & others sectors".



4. Appropriate technology.

Definition:" technology that is scientifically sound, adaptable to local needs, & acceptable to those who apply it & those for whom it is used, & that can be maintained by the people themselves in keeping with the principle of self reliance with the resources the community & country can afford".



Health technologies are required not only for:

Diagnostic maneuvers.

Therapeutic maneuvers.

But also for:

Disease prevention.

Disease control.

Health promotion.



Though it is commonly perceived that person who is going to apply it is a trained health professional, in PHC practice there are instance where

technology may have to be applied by:

Individual.

Family.

Community.

e.g. use of tooth brush, eye glasses, domestic water filters, domestic pest control, etc.

So, technology should be applicable for "self use".



- So, the simplicity of the technology is always desirable; examples of such are:
- 1- ORS in diarrheal disease control.
- 2- Breast feeding in spacing.
- 3- Weighing for growth monitoring... etc.