American Journal of BioMedicine

Research Article doi: 10.18081/2333-5106/019-07/312-316

Overview of the reality healthcare in Al Muthanna governorate

Ahmed Mutar Mahdi¹, Nasser Ghaly Yousif², Mohammed Hassan Younise^{*1}, Basel Saber Oudea¹, Amer Saber Oudea¹, Abdul Kathem Husoon Abbas¹, Mohammed Radi Obiad¹, Abdul Hassan Mahdi Saleh¹

Abstract

Health is the main objective of each individual human societies as the active factor for the survival of the individual vital product able to engage in economic activity and social competence believes his survival, development and ensure the progress and the progress of society who live under its rules. This article is describing the indicators of the primary of health care in Al Muthanna governorate that included (PHCS) according of administrative types, numbers of the prepare beds for admission of official and private hospitals, rare specialties, comparative the percentage of poverty between 2007-2018.

Keywords: Health; Economic activity; Al Muthanna governorate

Corresponding author email: mohammedalhasay915@gmail.com
¹ Director of Al Muthanna Health governorate
² Al Muthanna University
Received February 12, 2019; accepted June 10, 2019; published July 15, 2019
Copyright © 2019 AM. This is article distributed under the terms of the Creative Commons Attribution License
(http://creativecommons.org), which permits unrestricted use, distribution, and reproduction in any medium, provided
the original work is properly cited.

Introduction

Health, as defined by the World Health Organization (WHO), is "a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity [1]. Health is the main objective of each individual human societies as the active factor for the survival of the individual vital product able to engage in economic activity and social competence believes his survival, development and ensure the progress and the progress of society who live under its rules [2]. Some demographic indicators, deterioration of education, poverty, social inequalities and low health systems are the main social causes of ill health [3]. Health planning is the organizational means to develop health care programs "preventive and treatment" at all levels and is an effective way to coordinate health services to achieve the objectives efficiently [4]. The study is to describe the indicators of the primary of health care in Al Muthanna governorate, that included (PHCS) according of administrative types, numbers of the prepare beds for admission of official and private hospitals 2017, rare specialties, comparative the percentage of poverty between 2007-2018 with the change amount [1], [5-7] as well as mentioned the names of (PHCS) did not provide with drinkable water, also we were indicated the percentage of the budget of the Ministry of health from the state budget (operational and investment). Addition to that we were explained the expenditures and the rate of financial implementation

Copyright © 2019 AJBM

312

Research Article doi:10.18081/2333-5106/019-07/312-316 of projects 2017. Also, we noted about the rate of infectious diseases per each ten thousand of

our population. we indicated the average of injuries numbers in emergency room, percentage of education reality in Al-Muthanna governorate [1]. The methodology in this research included use the description and analytic approach by using available data which issued by department planning of DOH in Al-Muthanna province.

Results and Discussion

The percentage of primary health care center in 2017 about %63 terminal primary health center (PHC) from total 43 terminal PHC, and the central primary health care about 27% in total 26 CPHC in five health districts. According type of administrative indicates about 94.2% manage by paramedical groups and 5.8% manage by doctors. The population for each primary health care center about 11498 persons. Addition to that indicates about 9 primary health center/100000 persons, as shown table (1).

Table 1.

Indicates 9 primary health center/100000 persons.

Mana	iged by Doctor	Administrative by Paramedical Groups		Total No.	Population/PHC	PHC/100000
No.	%	No.	%			
4	5.8	65	94.2	69	11498	9

Table 2.

Indicate to numbers of beds for admission in official and private hospital 2017 reach 1023 bed in official hospital while null at private.

No. of Beds in an Official Hospitals	No. of Beds in privates Hospitals	Total
1023	0	1023

Table 3.

Rare specializations

ſ	Radiotherapy	Anesthesia	Emrg.	Forensic	Oncology	Family Medicine	Plastic Surg.
Ī	1	10	0	0	0	3	0

The national strategy for reducing the effects of poverty indicates that many administrative units in southern Iraq (Muthanna, Diwaniyah and Maysan) have experienced poverty by more than 70% of the population, and poverty among children has increased so much that poverty suffers from one of the every four children and perhaps up to 50% in some southern provinces [1].

313

Research Article doi:10.18081/2333-5106/019-07/312-316

Percentage poverty according to districts it indicates in Al-Samawa district about 48.7%, Al-Rumeitha district about 51.8%, Al-Salman District about 76.5%, Al-Kuhder district about 64.2%. The average of poverty is 52.5%. as shown table (5).

Table 4.

Percentage poverty according to districts it indicates in AI-Samawa district

Governorate	District	Poverty	Economic activity average	JOBLESS Average
		Percentage%	with 15 years old and more	with 15 years old and more
Al-Muthanna	Al-Samawa	48.7	39.8	10.4%
	Al-Rumatha	51.8	35.6	6.5%
	Al-Salman	76.5	35.8	14.4%
	Al-Kuder	64.2	36.8	13.1%
Total	52.5			

Polio reach to 0.13, Pertussis 0.29, Measles 0, Mump 13.69, Leishmaniasis 2.47, Kalazer 0.03, Hydatid cyst 0.97, Amebiasis 0.20, Chickenpox 12, Hepatitis A 0.42, HB 0.11, Meningitis C 0.04, HC 0, meningitis 1.1, as shown table (6).

Table 5.

Indicates to average of infectious disease per 10000 persons

Disease	Al-Muthanna Governorate	Iraq
polio	0.12	0.17
Pertussis	0.29	0.39
Measles	0	0.01
Mump	13.69	9.79
Leishmaniasis	2.47	5.08
Kalazer	0.03	0.05
Hydatid cyst	0.97	0.1
Amebiasis	0.20	0.12
Chicken Pox	12	17
Hepatitis A	0.42	0.76
Hepatitis B	0.11	0.52
Hepatitis C	0.04	0.16
Hepatitis E	0	0.02
Meningitis	1.1	0.54



Table 6.

Average of injuries in emergency ward 39%: (roads accidents 2000, fall from height 635, bullet injuries 27, stab wounds 452 and others 2.

Roads accidents	Fall from height	bullet	stab wounds	Others	Total	%	
		injuries					
2000	635	27	452	2	3116	39	Rate

of reality of AI Muthanna education 30%, included the following divisions (number of educational institutes 763, number of total students, number of populations 814371.

Table 7.

Rate of reality of Al Muthanna education

No. educational institutes	number of total students	number of populations	Educational %
763	242427	814371	30

According to indicates of mortality for adult and child, The under-five ages of mortality rate is still 19.7 per 1,000 live births and is still a high indicator of sustainable health, compared to Iraq, which is 23.1 per 1000 live births in 2017. The governorate suffers from a very high and severe poverty rate at the same time as shown in Table (4). According to indicated by Margreat Chin the health system to any country represent a frame is which we can know the needs of population for health services and make to provide the health requirements through save the necessary resources and it administrative upon the correct foundations, finally that lead take care of health citizen and attention of it. The health systems of global are multiply, there isn't ideal system, but the health system to any country is give the common political vision to that country. But the mutual factor to the best health services in the world is what the range of achievement of the following objects:

- Comprehensive coverage of all citizens.
- Fair coverage of all citizens.
- This cost shall be reasonable for the state and the citizen
- This coverage is based on the correct scientific basis.

Comprehensive health coverage is the single most powerful public health concept. Where our country is still classified by the World Health Organization as a country suffering from an increase in the mortality rate for adults and children compared with poor countries such as (Afghanistan, Sudan, Djibouti and Yemen) [2].

Competing interests

The author declare that he has no competing interests.

References

1. World Health Organization. Constitution of the World Health Organization as adopted by the International Health Conference, New York, 19–22 June 1946; signed on 22 July 1946 by the representatives of 61 States (Official Records of the World Health Organization, no. 2, p. 100) and entered into force on 7 April 1948. *In* Grad, Frank P. (2002). "The Preamble of the Constitution of the World Health Organization". Bulletin of the World Health Organization. 2002;80:12.

2. Ali SH. The reality of health services in the city of Samawah, the efficient distribution of its foundations for the year 2010. Geographic researches magazine 2010;14.

3. Abdullah MN. The reality of the geographical distribution of health services in Samawah city, and its efficiency for year. Koufa Arts magazine 2010;5.

4. Al-Muthanna Directorate of Health, Planning Dept., Annual report, 2007-2017

5. Al-Muthanna Directorate of Health, Public Health Dept., Annual report, 2007-2017

6. Alharbi MA. Overview of the Reality of Healthcare Reform in Saudi Arabia with Emphasis on Public Hospitals: A Critical Appraisal. Research Journal of Medical Sciences 2018;12:12-25.

7. Alwan A. Health situation in Iraq. Challenges and priorities for action, Minister of Iraqi MOH, May/2019.



American Journal of BioMedicine Journal Abbreviation: AJBM ISSN: 2333-5106 (Online) DOI: 10.18081/issn.2333-5106 Publisher: BM-Publisher Email: editor@ajbm.net



