

Bahrain





System/structure



Governance

A comprehensive national health sector policy, strategy or plan with goals and targets that includes all three components of a PHC approach exists and has been updated (National health Plan 2016-2025, Primary health care plan 2018-2025)



Adoption of a Health-in-All-Policies approach and existing mechanism for multisectoral governmental coordination (Implementation plan for the PHC, 2018)



Inclusion of indicators on relevant social, economic, environmental and commercial determinants of health in national health policies, strategies and plans (Primary Health care, 2018)



(\$) Finance



PHC expenditure per capita in US\$ (Ministry of Health, 2016)

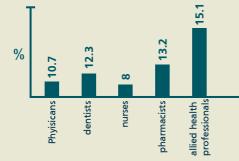


Percentage of domestic general government health expenditure on PHC from total GGHE-D. (Ministry of Health)

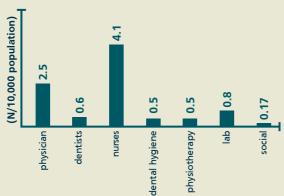
Inputs

Health workforce

% health workforce in primary care by occupation (Annul PHC report 2019 & NHRA 2019)



Density of PHC by occupation (PHC Annual report, 2018 & MOH health statistics)



Health information systems

Presence and use of unique patient identifiers (Information and eGovernment Authority, 2019)

Use of patient health records follow a patient through their encounter with the health care system

Infrastructure



Percentage of population that have to travel more than 5 km or 1 hour to arrive at PHC facility (Health Summary Statistics, 2017)

Processes



Model of care

Percentage of patients who are registered at PHC facilities (Planning and Information Department/ MOH, 2018)

54.3%



Percentage of cases referred to secondary care (PHC annual 2018 report)

Gatekeeper role for general practitioners/family physicians (Planning and Information Department)



Formal process exists for referrals (DPP Referral from Primary to Secondary Health



Quality processes



Percentage of facilities that monitor patient experience (PHC Annual report, 2018)

Empowerment and engagement

Community/patient participation in facility management meetings (The National Suggestion & Complaint system "Tawasul")



Outcomes

Effective coverage and quality of care

Percentage of hospital admissions for ambulatory care sensitive conditions (main Seconadery care referral for PHC, 2017)





Average availability of 5 tracer reproductive, maternal, newborn and child health (RMNCH) services (Mother and child care unit in Primary health care)

Empowerment and engagement

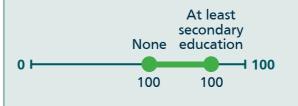
Percentage of population who believe decision-making is inclusive [SDG 16.7.2]



Under-5 mortality by residence (EMRO core indicator, 2020)



Percentage coverage of RMNCH services by mother's education (Public health report, 2018)



Impact



Financial protection



Percentage of population with impoverishing health Expenditure (SDG 2019)

™ Mortality

Maternal mortality ratio [3.1.1] (EMRO core-indicator, 2020)

20 per 100 000

Premature noncommunicable diseases (NCD) mortality [3.4.1] (EMRO core indicators, 2020)

11.3%

(2016)

Country context

GDP per capita (PPP current international \$)

\$ 47 002.5

(World Bank, 2019)

Population living in poverty (Under \$1.90 int'l dollars/day)

0%

(Ministry of Labour & Social Development)

Life expectancy at birth

(EMRO core-indicator, 2020)

REFERENCE KEY



Yellow fill indicates a Vital Signs Profile indicator







Not available or not reported

Not available or not reported

INTEGRATED SERVICES/PRIMARY HEALTH CARE

System/structure

Governance

Equity mainstreamed in health policy
Existence of regulatory authorities for (health workforce,
facilities, essential medicines and products) for both public
and private sectors
Presence of quality improvement and assurance processes
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in the national health plan

Participatory governance structures

Presence of UHC legislation inclusive of PHC



100%

Finance		
Government health spending as percentage of GDP	71	2%
PHC expenditure as percentage of current health expenditure		22
Domestic general government expenditure on PHC as percentage of PHC spending	7	49

Inputs

Health workforce

Percentage of primary care workforce specialized in family
referringe of primary care workforce specialized in family
practice (by occupation)
p. d.

Other sources of PHC expenditure (out of pocket, donor,

etc.) as percentage of total PHC expenditure

72% 21% Physicians Nurses Proportion of health workforce in PHC who have received minimum continuous professional education according to

national requirements in the last year 13.4% Vacancy rate in PHC

Health information systems

nealth information systems	
Percentage of births registered	100%
Percentage of deaths registered	100%
Explicit adoption of a set of PHC indicators for monitoring and evaluation	
Inclusion of section on PHC performance in annual health sector reporting	
Percentage of public sector PHC that reports performance data	100%
Presence of a comprehensive individual patient record	
Presence of a comprehensive family record	
Is there a functioning electronic health information system (eHIS) in the country?	
Percentage of PHC facilities using an eHIS	100%

Infrastructure >

Percentage of PHC facilities with adequate WASH	100%
Percentage of PHC facilities with rooms with auditory and visual privacy for patient consultations	100%
Percentage of PHC facilities with communication	100%
equipment	

100%	
100%	
100%	
100%	
100%	
	100% 100%

Supplies **¬**

Dorsontago of DUC facilities with standard priority
Percentage of PHC facilities with standard priority
diagnostics and equipment available
alagnostics and equipment available

Processes

Model of care

Annual outpatient department utilization rates per capita	
Percentage of PHC facilities that can provide mental health	
services	
Number of consultations per health worker (physician,	
nurse, etc.) per day ¹	

30.5% 9% 11% **64**% Physicians **Dentists** Physiotherapists Nurses

Management/quality improvement

Evidence-based national guidelines/protocols/standards exist	100%	
for the management of all priority causes of morbidity and		
mortality		
Professionalized management at PHC level	8%	
Proportion of facilities with up-to-date performance reports in	1000/	
the last 6 months to 1 year	100%	
*		
Percentage of PHC facilities with systems to support quality	92%	
improvement		

Outcomes

Effective coverage/quality of care

Percentage of adverse events reported (immunization/medication)	
143 169 AEFI Medications	
Percentage of PHC prescriptions that include antibiotics in out patient clinics	6%
Percentage of PHC prescriptions that include injectable medicines	4%

Percentage of registered hypertension patients with blood pressure <90/140 at last 2 follow up visits Percentage of registered diabetic patients with fasting blood sugar controlled at last 2 follow up visits/A1C <7%				29.2%
				39.3%
	Percentage of registered NCD patients with 10 years cardiovascular risk recorded in the previous year			
Percentage of women who delivered and received at least 19				.2% within 6 eeks to 6 months
Percentage of substance receipt of brief interven		ing tobacco users,	in	42%
Percentage of children measured in the previous		had weight and he	eight	100%
Children under 5 who are stunted, wasted, overweight, obese				
4.4%	2.6%	4.9%	1.3%	
Stunted	Wasted	Overweight	obese	
Children under 5 with d	iarrhoea recei	ving ORS		56 %
Exclusive breastfeeding 0-5months (%)				12.6%
Cervical cancer screening rates ^{II}				7. 4.8%
Measles-containing-vaccine second-dose immunization coverage			99.5%	
Diphtheria-tetanus-pertussis (DTP3) immunization coverage			100%	
Average availability of services for 3 tracer communicable diseases (STI, TB, HIV)				100%

7100%

N/A

Equity

cardiovascular disease)

100%

4.9%

16%

DPT3 immunization coverage Perceived access barriers due to treatment costs ² Perceived access barriers due to distance	7 100% 7 0% 7 0%
Percentage of households with adequate WASH: [6.2.1/6.1.1]	100%
Percentage of households cooking with clean fuel [7.1.2]	7 100%
Percentage of children under 5 years of age who are developmentally on track [4.2.1]	7 95.5%
Malaria incidence [3.3.3]	₹ N/A
Physical inactivity in adults	
50.9% 51.9% Bahraini Non-Bahraini	
Proportion of population subjected to physical, psychological or sexual violence in the previous 12 months [16.1.3]	0.03%
Use of insecticide-treated bed nets for malaria prevention	7 N/A

Average availability of diagnosis and management of

3 tracer NCDs (diabetes, chronic respiratory disease,

Care seeking for suspected child pneumonia

Impact

Health status

Adult mortality rate 15–60 years	N/A
Adolescent mortality rate	29.7 per 100 000
Under-5 mortality rate	8 per 1000 live births
Infant mortality rate	7 per 1000 live births
Neonatal mortality rate	74 per 1000 live births
Total fertility rate	1.8 children per woman
Met need for family planning [3.7.1]	7 58.5%
DPT3 dropout rate	₹ 0%
TB treatment success	68%
Antenatal care quality score based on WHO guidelines	N/A
Antenatal care coverage (4+ visits)	7 99.1%
Family planning quality score based on WHO guidelines	N/A
Demand for family planning satisfied with mod methods	ern 58.5%
Sick child quality score based on IMCI guidelines	S N/A
People living with HIV receiving anti-retroviral treatment	74%
Prevalence of raised blood pressure (age-standardized estimate)	33.6 %

Mortality by cause **▼**

Household and ambient air pollution [3.9.1] Road traffic injuries [3.6.1] Homicide [16.1.1] Suicide rate [3.4.2]		<u> </u>	39 per 10 000 4.8 per 10 000 0.27 per 10 000 4.26 per 100 000
	.9% 7.5% CDs Communicable diseases	9.1%	2.5% Others

Efficiency >

Proportion of caregivers who were given sick child diagnosis	N/A
diagnosis	
Proportion of family planning, antenatal care, and	100%
sick child visits over 10 minutes ^{III}	10070
Provider absence rate	3.4 %
Adherence to clinical guidelines ^{IIII}	7 48%
Diagnostic accuracy	71
Adequate waste disposal	7 94%

Risk factor/chronic disease prevalence

•	-		
Obesity prevalence			36.9%
Diabetes mellitus prevaler	nce		15%
Hypertension prevalence			33.6%
Tobacco use [3.A.1] ³			
	22.3%	12.2%	
	Bahraini	Non-Bahraini	

Resilience **T**

International Health Regulations core capacity index/joint external evaluation	88 79	
Disaster-related death rate [1.5.1]	N/A	

Alternative indicators

- Percentage of women who delivered and received at least once postnatal care within 6 weeks to 6 months.
- Proportion of women (Bahraini & non Bahraini married to bahrain), aged 30-64 years who were screened for cervical cancer using Pap smear as screening test.
- Percentage of scheduled every 15 minutes visits of women attending family planning, women screening and antenatal care and children screening clinic.
- Adherence to clinical guidelines in the clinical examination of 5 year childern before entering school.

Notes

- Majorty of physcians in primary health care are females. Females in the Bahraini's law get a paid two-months maternity leave, in addition to two hours per day for two years for child care. That affects manpowers, and puts burden on the system.
- For Bahrinin only.
- ³ 18+ years.

The data presented here are either reported by countries, come from United Nations estimates, or are directly collected from publicly available sources such as demographic and household survey reports.

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Information and Dissemination



Countries around the world agreed to the Declaration of Astana in 2018, vowing to strengthen their primary health care systems as an essential step toward achieving universal health coverage.

The Declaration of Astana reaffirms
the historic 1978 Declaration of Alma-Ata,
the first time world leaders committed to
primary health care.

Thus, a well-organized and prepared health system has the capacity to maintain equitable access to high-quality essential health services throughout an emergency, limiting direct mortality and avoiding indirect mortality.

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All data are country reported unless otherwise indicated