

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 Policy 2015-2020)



Adoption of a Health-in-All-Policies approach and existing mechanism for multisectoral governmental coordination



Inclusion of indicators on relevant social, economic, environmental and commercial determinants of health in national health policies, strategies and plans



Finance

\$28 PHC expenditure per capita in US\$ (WHO, 2018)

1% Percentage of domestic general government health expenditure on PHC from total GGHE-D. (2017)

Inputs

Health workforce

Percentage of health workforce in PHC by occupation

Density of PHC by occupation

Health information systems

Presence and use of unique patient identifiers

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

Infrastructure

56.6% Percentage of population that have to travel more than 5 km or 1 hour to arrive at PHC facility¹ (Afghanistan Health Survey, 2018)

Processes

Model of care

Percentage of patients who are registered at PHC facilities

%

1.25% Percentage of cases referred to secondary care (HMIS, 2020)

Gatekeeper role for general practitioners/family physicians



Formal process exists for referrals



Quality processes

Percentage of facilities that monitor patient experience

Empowerment and engagement

Community/patient participation in facility management meetings (General Directorate of Monitoring, Evaluation Health Information (M&EHIS))



Outcomes

Effective coverage and quality of care

Percentage of hospital admissions for ambulatory care sensitive conditions

72.47% Average availability of 5 tracer reproductive, maternal, newborn and child health (RMNCH) services (Ministry of Public Health of Afghanistan, 2020)

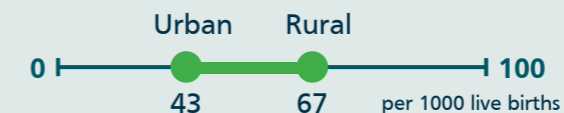
Empowerment and engagement

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

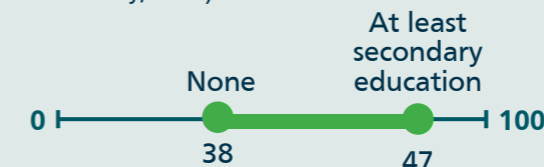
%

Equity

Under-5 mortality by residence (DHS, 2015)



Percentage coverage of RMNCH services by mother's education (Afghanistan Health Survey, 2018)



Impact

Financial protection

50.8% Percentage of population with impoverishing health Expenditure (Afghanistan health accounts NHA, 2017)

Mortality
Maternal mortality ratio [3.1.1] (Regional Core Indicators Booklet, 2020)

638 per 100 000

Premature noncommunicable diseases (NCD) mortality [3.4.1]

29.8% (Regional Core Indicators Booklet, 2020)

Country context

GDP per capita (PPP current international \$)
\$ 2 156.4 (World Bank, 2019)

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

N/A

Life expectancy at birth¹
65.3 Years (Regional Core Indicators Booklet, 2020)

REFERENCE KEY

- Yellow fill indicates a Vital Signs Profile indicator
- Purple fill indicates an SDG indicator. The numbers included in brackets refer to an SDG indicator number. Standard reporting sources or accepted United Nations estimates should be used.
- Present
- Absent
- Not available or not reported
- Not available or not reported

INTEGRATED SERVICES/PRIMARY HEALTH CARE

System/structure

Governance

Presence of UHC legislation inclusive of PHC	<input type="checkbox"/>
Equity mainstreamed in health policy	<input checked="" type="checkbox"/>
Existence of regulatory authorities for (health workforce, facilities, essential medicines and products) for both public and private sectors	<input checked="" type="checkbox"/>
Presence of quality improvement and assurance processes in the national health plan	<input type="checkbox"/>
Participatory governance structures	<input checked="" type="checkbox"/>

Finance

Government health spending as percentage of GDP	1%
PHC expenditure as percentage of current health expenditure	57%
Domestic general government expenditure on PHC as percentage of PHC spending	5%
Other sources of PHC expenditure (out of pocket, donor, etc.) as percentage of total PHC expenditure	95%

Inputs

Health workforce

Percentage of primary care workforce specialized in family practice (by occupation)	N/A
Proportion of health workforce in PHC who have received minimum continuous professional education according to national requirements in the last year	29.7%
Vacancy rate in PHC	53.8% doctors, 22.5% Nurses

Health information systems

Percentage of births registered	47%
Percentage of deaths registered	12%
Explicit adoption of a set of PHC indicators for monitoring and evaluation	<input checked="" type="checkbox"/>
Inclusion of section on PHC performance in annual health sector reporting	<input checked="" type="checkbox"/>
Percentage of public sector PHC that reports performance data ²	91%
Presence of a comprehensive individual patient record	<input type="checkbox"/>
Presence of a comprehensive family record	<input type="checkbox"/>
Is there a functioning electronic health information system (eHIS) in the country?	<input type="checkbox"/>
Percentage of PHC facilities using an eHIS	N/A

Infrastructure

Percentage of PHC facilities with adequate WASH	N/A
Percentage of PHC facilities with rooms with auditory and visual privacy for patient consultations	N/A
Percentage of PHC facilities with communication equipment	N/A

Percentage of PHC facilities with access to computer with email/internet access	N/A
Percentage of PHC facilities with standard precautions for infection prevention	45.3%
Percentage of PHC facilities with all infection control items	N/A

Medicines

Percentage of PHC facilities with correlated package of services	N/A
Proportion of facilities in which essential medicines are available (no stock outs in one year)	N/A

Supplies

Percentage of PHC facilities with standard priority diagnostics and equipment available	N/A
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Processes

Model of care

Annual outpatient department utilization rates per capita	2.5%
Percentage of PHC facilities that can provide mental health services	100%
Number of consultations per health worker (physician, nurse, etc.) per day	N/A

Management/quality improvement

Evidence-based national guidelines/protocols/standards exist for the management of all priority causes of morbidity and mortality ³	75.4%
Professionalized management at PHC level	N/A
Proportion of facilities with up-to-date performance reports in the last 6 months to 1 year	91%
Percentage of PHC facilities with systems to support quality improvement	N/A

Outcomes

Effective coverage/quality of care

Percentage of adverse events reported (immunization/medication)	N/A
Percentage of PHC prescriptions that include antibiotics in out patient clinics ^{II}	60%
Percentage of PHC prescriptions that include injectable medicines ^{III}	8.8%

Percentage of registered hypertension patients with blood pressure <90/140 at last 2 follow up visits	N/A
Percentage of registered diabetic patients with fasting blood sugar controlled at last 2 follow up visits/A1C <7%	N/A
Percentage of registered NCD patients with 10 years cardiovascular risk recorded in the previous year	N/A
Percentage of women who delivered and received at least once postnatal care visit within the first 40 days	19.3%
Percentage of substance users, including tobacco users, in receipt of brief intervention	N/A
Percentage of children under 5 that had weight and height measured in the previous year	5.4%

Children under 5 who are stunted, wasted, overweight, obese

36.6%	5%	4%
Stunted	Wasted	Overweight

Children under 5 with diarrhoea receiving ORS	48.5%
Exclusive breastfeeding 0-5months (%)	57.5%
Cervical cancer screening rates	N/A
Measles-containing-vaccine second-dose immunization coverage	75%
Diphtheria-tetanus-pertussis (DTP3) immunization coverage	87%
Average availability of services for 3 tracer communicable diseases (STI, TB, HIV)	43%
Average availability of diagnosis and management of 3 tracer NCDs (diabetes, chronic respiratory disease, cardiovascular disease)	84.6%
Care seeking for suspected child pneumonia	62%

Equity

DTP3 immunization coverage	87%
Perceived access barriers due to treatment costs	66.7%
Perceived access barriers due to distance	67%
Percentage of households with adequate WASH: [6.2.1/6.1.1]	67%
Percentage of households cooking with clean fuel [7.1.2]	25.8%
Percentage of children under 5 years of age who are developmentally on track [4.2.1]	N/A
Malaria incidence [3.3.3]	N/A
Physical inactivity in adults	26.5%
Proportion of population subjected to physical, psychological or sexual violence in the previous 12 months [16.1.3] ⁴	31% physical violence, 52% emotional, physical or sexual violence
Use of insecticide-treated bed nets for malaria prevention	3.9%
Percentage of facilities that implement the clinical documentation improvement program	N/A

Impact

Health status

Adult mortality rate 15–60 years	245.2 per 1000
Adolescent mortality rate	Female 3.07 per 1000 Male 1.81 per 1000
Under-5 mortality rate	50 per 1000 live births
Infant mortality rate	41 per 1000 live births
Neonatal mortality rate	23 per 1000 live births
Total fertility rate	5.1 children per woman
Met need for family planning [3.7.1]	44.6%
DPT3 dropout rate	7.4%
TB treatment success	91%
Antenatal care quality score based on WHO guidelines	N/A
Antenatal care coverage (4+ visits)	20.9%
Family planning quality score based on WHO guidelines	N/A
Demand for family planning satisfied with modern methods	44.6%
Sick child quality score based on IMCI guidelines	6.3%
People living with HIV receiving anti-retroviral treatment	13%
Prevalence of raised blood pressure (age-standardized estimate)	30.6%

Mortality by cause

Household and ambient air pollution [3.9.1]	95 per 10 000
Road traffic injuries [3.6.1]	5.3 per 10 000
Homicide [16.1.1]	6.7 per 10 000
Suicide rate [3.4.2]	5 per 100 000

Causes of death

44%	36%	19%
NCDs	Communicable diseases	Injuries

Efficiency

Proportion of caregivers who were given sick child diagnosis	N/A
Proportion of family planning, antenatal care, and sick child visits over 10 minutes	N/A
Provider absence rate	N/A
Adherence to clinical guidelines	N/A
Diagnostic accuracy	<input type="checkbox"/>
Adequate waste disposal	33.8%

Risk factor/chronic disease prevalence

Obesity prevalence	17%
Diabetes mellitus prevalence	9.2%
Hypertension prevalence	30.6%
Tobacco use [3.A.1]	N/A

Resilience

International Health Regulations core capacity index/joint external evaluation	42 40
Disaster-related death rate [1.5.1]	N/A

Alternative indicators

- I Percentage of population that could reach the facility within 30 minutes: 56.6 %, 2018
- II Percentage of patients that were prescribed antibiotics in public health facilities
- III Percentage of patients that were prescribed injectable medicines in public health facilities

Notes

- 1 WB value for 2018=64
- 2 Only for Public Health facilities it is available
- 3 The latter clinical guideline is only required for CHCs and DHs, as PHCs and BHCs are not required to have it.
- 4 Among ever-married women age 15-49 within the 12 months before the survey

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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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