

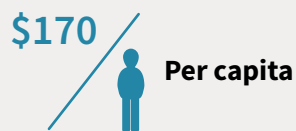
Islamic Republic of Iran Primary Health Care Vital Signs Profile



\$ FINANCING

NHA (2017)

PHC spending:



Prioritization of PHC:

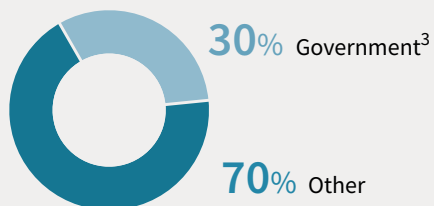
Overall health spending¹

38% on PHC

Government health spending²

26% on PHC

Sources of PHC spending:



CAPACITY

Primary Health Care Progression Model⁴

Governance



Inputs



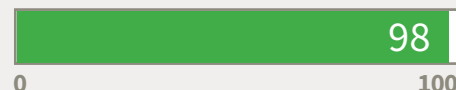
Population Health & Facility Management



PERFORMANCE

Access Index⁵

Utilization Health Survey (2015)

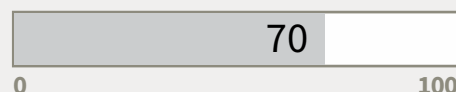


Quality Index⁵



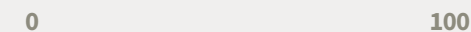
Service Coverage Index

2018 Regional core indicators booklet, 2019 UHC Global Monitoring Report, MOHME (Deputy for Public Health) 2017

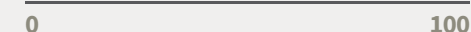


EQUITY

Access: % with perceived barriers due to cost, by wealth quintile



Coverage of RMNCH⁶ services, by mother's education



Outcomes: Under-five mortality⁷, by residence

MOHME (Deputy for Public Health) 2017



COUNTRY CONTEXT AT-A-GLANCE

GDP per capita

(PPP int'l dollars)
WDI (2017)

\$14,536

Living in poverty

(Under \$1.90 int'l dollars / day)
WDI (2018)

0.3%

Government health spending as % of GDP⁸

WHO GHED (2017)

4%

Life expectancy at birth

(Years) WHO (2016)

76

Maternal mortality⁹

(Per 100,000 live births)
WHO est. (2017)

16

Neonatal mortality

(Per 1,000 live births)
WHO est. (2018)

9

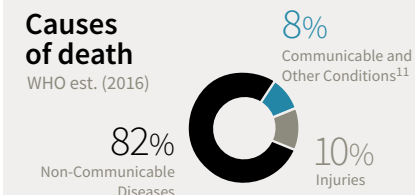
Premature NCD mortality¹⁰

(Probability)
WHO est. (2016)

15%

Causes of death

WHO est. (2016)



Note: Indicator values presented here may differ from country data sources due to the use of standardized categories and methods to enhance international comparability. See Indicator Description Sheet for details.

Note: Scores for the Capacity, Performance, and Equity domains are color-coded to reflect good (green), medium (yellow), and poor (red) performance, where comparable data are available. Cut-offs can be found in the Indicator Description Sheet. Scores based on data from non-comparable sources are colored gray. Finance indicators are not color-coded because these indicators lack common targets.

Note: The country has requested suppression of indicators related to family planning

1. Current PHC expenditure as % of Current Health Expenditure (CHE)
2. Domestic general government PHC expenditure as % of domestic general government health expenditure
3. Domestic general government PHC expenditure as % of current PHC expenditure
4. The PHC Progression Model uses mixed methods to assess foundational capacities of PHC on a scale from 1 (low) to 4 (high)
5. Because different data/indicators are used in each country, composite index values may not be comparable across countries. See page 2 for the specific indicators used in this VSP.

6. The composite coverage index is a weighted score reflecting coverage of eight RMNCH interventions along the continuum of care (http://www.who.int/gho/health_equity/report_2015/en/)
7. Deaths of children before age 5, per 1,000 live births
8. Domestic general government health expenditure as % of gross domestic product (GDP)
9. National value is 17.7. source: MOH&ME (National Maternal Mortality Surveillance System, 2018)
10. Probability of dying between ages 30 and 70 from cardiovascular disease, cancer, diabetes, or chronic respiratory disease
11. Communicable, maternal, perinatal, and nutritional conditions
Last updated 12/2020



World Health Organization
REGIONAL OFFICE FOR THE Eastern Mediterranean



Islamic Republic of Iran	SCORE	PERCENTAGE	SOURCE	YEAR
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ACCESS	98			
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Financial
Perceived access barriers due to treatment costs*  4% *Utilization Health Survey 2015*

Geographic
Perceived access barriers due to distance*  1% *Utilization Health Survey 2015*

QUALITY				
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Comprehensiveness
Avg. availability of services for 3 tracer communicable diseases  100% *HMIS System*
Avg. availability of diagnosis & management for 3 tracer NCDs⁺  100% *HMIS System*




Continuity
DTP3 dropout rate*  <1% *MOHME (Deputy for Public Health) 2018*
Treatment success rate for new TB cases  86% *MOHME (Deputy for Public Health) 2017*





Person-Centeredness
No recent indicator available from international or national data sources


Provider availability
No recent indicator available from international or national data sources

Safety
No recent indicator available from international or national data sources

SERVICE COVERAGE	70			
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Reproductive, Maternal, Newborn and Child Health
Antenatal care coverage (4+ visits)  83% *MOHME (Electronic Health Records) 2019*
Coverage of DTP3 immunization  99% *MOHME (Deputy for Public Health) 2018*
Care-seeking for suspected child pneumonia  76% *MOHME (Deputy for Public Health) 2018*

Infectious diseases
Tuberculosis cases detected and treated with success  69% *UHC Global Monitoring Report 2019*
People living with HIV receiving anti-retroviral treatment  20% *UHC Global Monitoring Report 2019*
Indoor Residual Spraying  78% *National Report for Malaria Control in Iran 2019*
Children under 5 with diarrhea receiving ORS  85% *Regional core indicators booklet 2018*

Non-Communicable Diseases (NCDs)
% of population with normal blood pressure***  60% *UHC Global Monitoring Report 2019*

+CRD not available in HMIS data used, excluded from the calculation.*Indicators where lower values are preferable were transformed before inclusion in the index. The modified indicator was defined as 100-X, where X is the original percentage shown in this table. **Country-specific (proxy) indicator, used in absence of globally comparable survey data. ***Percentage of adult population with normal blood pressure is based on age-standardized estimates. These distributions are rescaled to provide finer resolution before inclusion in the index. Rescaled indicator = (X-50)/(100-50)*100, where X is the prevalence of normal blood pressure. For more details see Tracking UHC: 2017 Global Monitoring Report. Note: Summary scores for the domains of Access, Quality, and Coverage are calculated by taking the average of indicator values within each subdomain, and then taking the average across subdomain scores.