**مرحلة ثالثة Community د. نادية عفتان**

**Primary Health Care**

**Concept of primary health care**

Primary health care [PHC] 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.

**Components of primary health care**

1. Education is about prevailing health problems and the

methods of preventing and controlling them.

2. Promotion of food supply and proper nutrition.

3. Adequate supply of safe water and basic sanitation.

4. Maternal and child health care, including family planning.

5. Immunization against the major infectious diseases.

6. Appropriate treatment of common diseases and injuries.

7. Provision of essential drugs.

8. Prevention and control of locally endemic diseases.

**Principles of primary health care**

**1. Equitable distribution**

*Equity* is concerned with creating equal opportunities for health and bringing health differentials down to the lowest possible levels.

Health services must be shared equally by all people irrespective of their ability to pay, and all people either rich or poor, urban or rural must have access to health services. Bringing these services to as near as possible to people could help in achieving these goals.

**2. Community involvement/participation**

A fundamental element of PHC (Primary health care) is input by non-professional community members. Failing to involve communities in ways that are based on their own cultures, values and experiences has doomed many health initiatives.

For programs to be appreciated and used, they have to be relevant. It is more effective to begin work in a community, it is better to make use of local resources such as manpower, money, materials and involve local community in planning and implementation of health services.

**3. Focus on prevention and health promotion**

The focus of health planners and funding must shift from medical/dental care to prevention and health promotion.

At the heart of health promotion is empowerment, which is achieved when people are enabled to set their priorities, make decisions, plan and implement their own strategies for achieving health.

Not being in control is recognized as a risk factor for disease, whereas empowerment has shown to be an important promoter of health.

**4. Appropriate technology**

Appropriate technology has been defined as “technology that is scientifically sound, adaptable to local needs and acceptable to those who apply it and those for whom it is used, and that can be maintained by the people themselves in keeping with the principle of self reliance with the resources, the community and country can afford”.

Appropriate refers to not making use of costly equipment, procedures, techniques and infrastructure when cheaper scientifically valid and acceptable ones are available.

Atraumatic Restorative Treatment [ART] technique offers a minimal threatening treatment for caries at an early stage and at low cost, as it can be provided where electricity is not available or where it is not possible to afford and maintain expensive dental equipments.

**5. Multisectoral approach**

A major reason for the lack of success of many oral health programs is the fact that they operate **in isolation**, i.e. separate from the general health care structure. Solution to ill-health cannot be solved only by the health sector. Social, economical, agriculture and educational sector must coordinate policies that affect health.

**Oral health** can be better integrated into general health programs by tackling common causes, by including oral health in general health education. For example, smoking effects heart disease, respiratory disease and oral disease, hence dental and medical health workers should both support and compliment each other in programs aimed at reducing health problems.