

Primary Health Care Initiatives (PHCI) Project
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The Family Health Care Model

One of the goals of the Ministry of Health is that the primary and reproductive health care training follow the concept of family health care at the primary care level. However, we have found that many people are unsure about what the family health model of care really is.

The family health care model is first of all a way of thinking, a paradigm, of health care, rather than a collection of medical or nursing activities. The principal goal of the family health care model is to promote the well-being of each member of the family unit, physically, mentally, socially, and spiritually. This means that the care given may go beyond simply attending to the medical needs presented, but should take into consideration the needs of the whole person within the context of his or her family and community. This model of care does not just deal with illness, but attempts to promote the well-being of the individual and family through specific counseling and preventive activities.

There are several characteristics of the family health model of care that can help guide primary health care activities. First of all, health care should be **COMPREHENSIVE**. This means that medical attention should not only deal with the immediate pain or infection or injury, but also address the psychological, social, and even spiritual implications of this problem, as well as its impact on the whole family. For example, the diagnosis of a serious pneumonia in a 5-year-old child usually means lost sleep for the mother, and often added expense or lost income for the family, all of which can impact her health and ultimately the health of the family. Comprehensive care means that someone on the medical team would help the family identify someone who could assist with the added burden facing the mother. The health care team does not just treat the sick person, but the entire family which is affected by this illness.

Family health care is also **INTEGRATED**, which means that all the components of health care function in a coordinated fashion. This implies that primary health care is offered to a family in a team approach, which at the least includes the physician and nurse, but also often includes the pharmacist, laboratory technician, and clinic assistants. This also implies that there is a seamless, functioning referral system for managing problems that are beyond the scope or expertise of the primary health care team. This means that people with complex problems are quickly and easily referred to capable specialists, who return the

treated patient back to the primary care physician with a full report of what has been done and how the problem should be managed.

In this model, health care is CONTINUOUS. Ideally, a single primary health care team cares for all members of the family, following them and supporting them through the various stages of the life cycle. The medical record documents the necessary information, and becomes an important document of communication if changes in health care providers are necessary.

A major focus of the family health model is PREVENTIVE care. In contrast to many medical care models, significant attention is paid to the prevention as well as the treatment of illness. Significant risk factors associated with the age, gender, and local epidemiology are identified for each member of the family, and appropriate screening or counseling is incorporated into every clinic visit.

A final aspect of family health care is that it is of demonstrable HIGH QUALITY. The confidence of the patient is developed through competent diagnostic and curative care, which gives added credibility to preventive messages that are communicated at each visit. This implies not only high quality medical training, but also an ongoing process of continuous medical and nursing education for all health team members to keep up to date.

This model of family health care is nothing new. It has been put into practice around the world for decades, but has become increasingly important as the medical care of families and individuals is fragmented into specialty units. Nor is this model new to Jordan, since the specialty of family medicine, which attempts to incorporate all of these elements into its practice, has been recognized in the Kingdom since 1986. Following the principles of the Alma Ata Declaration of 1978 and Health for All 2000, the World Health Organization has recognized the importance of the family health model in the primary care system, and has supported the development of family health care workers as the basis of the primary health care system.