

The Islamic Republic of Iran Primary Health Care in Action



Iranians open the door to health for all

They have been described as an “incredible masterpiece”. The Iranian health houses, introduced amidst the 1980–1988 war with Iraq have extended basic health services to the poorest, most far-flung corners of the Islamic Republic of Iran.

Despite initial opposition from experts who thought the scheme’s infrastructure was too ambitious and that the health workers lacked training, thanks to the scheme over 90% of the Islamic Republic of Iran’s 23 million rural population now has access to health services, officials say.

“At the beginning, we could never imagine such a breakthrough. We were at war and the country was in a miserable condition,” says Dr Sirous Pileroudi, a former senior official with the Ministry of Health and one of the founders of the Iranian health-care system.

Community workers are key

Community health workers have made a significant contribution to the sharp decline in mortality rates in the past three decades, helping to reduce deaths among infants and pregnant women, and curbing contagious diseases, according to Health Minister Dr Kamran Baqeri Lankarani. In just two decades, the country has seen an eight-year increase in life expectancy (now 71) since 1990.

Health workers or *behvarzan* from the Farsi words *beh* (good) and *varz* (skill) are trained to meet the basic health-care needs of people living in rural areas. Community health workers are often from the village they serve.

There are about 17 000 of these rural medical posts, the most basic unit of the Iranian health system. On average, each health house serves 1500 people and just over half the 30 000 community health workers are women.

When needed, the health houses refer patients to rural health centres, which are responsible for emergency case management, supporting the health houses, and supervising both the health technicians and the *behvarzan* or community health workers.

- Over 90% of 23 million rural Iranians benefit from free health care
- Primary health care has reduced infant mortality
- Health workers are from the communities they serve
- Health houses address changing health priorities

Community health work is part of a primary health care approach. This approach was the strategy countries adopted in the Declaration of Alma-Ata in 1978 to achieve the goal of ‘health for all’ of their people by 2000.

Shift to chronic diseases

“People enjoy primary health care services free of charge,” says Dr Mohammad Esmael Motlaq, the director of the Centre for Healthcare Promotion. “The health workers are well familiar with the culture and traditions and that is a big advantage.”

Dr Kamel Shadpour, another of the Iranian health-care pioneers, says the health houses did well when the main issue was to contain contagious diseases. They are doing the same

now with chronic diseases like diabetes and hypertension.

This is an abridged version of an article published in the Bulletin of the World Health Organization in August 2008¹.

The Islamic Republic of Iran in numbers²

Life expectancy (both sexes, 2006): 71 years

Gross National Product per capita (PPP in international \$, 2006): 9800

Per capita total expenditure on health (PPP in international \$, 2005): 677

Number of physicians (per 10 000 population, 2005): 9



Iranian *behvarz* – community health worker – with a patient

¹Iranian health houses open the door to primary care, WHO Bulletin Vol 86: 8 <http://www.who.int/bulletin/volumes/86/8/08-010208/en/index.html> - Homepage: <http://www.who.int/bulletin/en/>
²World Health Statistics 2008, Online version: <http://www.who.int/whosis/data/Search.jsp> (accessed on 24/09/2008)