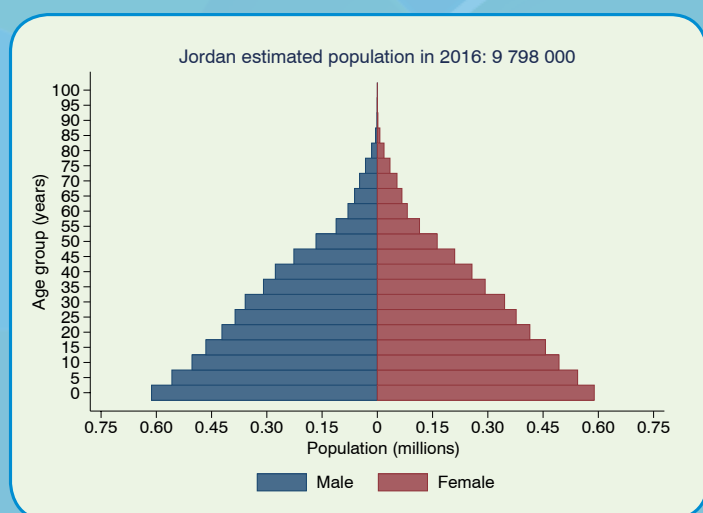




Universal health coverage

Primary health care facilities per 10 000 population (2016)	6.9
Hospital beds per 10 000 population (2016)	14.0
Modern contraceptive prevalence rate (2015)	43
Antenatal care visits (4+ visits) (2013)	94.5
Measles immunization coverage among 1-year olds (%) (2016)	96
Tuberculosis treatment success rate of new bacteriologically confirmed cases (%) (2015)	85
DTP3-containing vaccine / Pentavalent coverage among 1-year olds (%) (2016)	98
General government expenditure on health as % of GDP (2014)	5.2
General government expenditure on health as % of total government expenditure (2014)	13.7

Estimated population in 2016



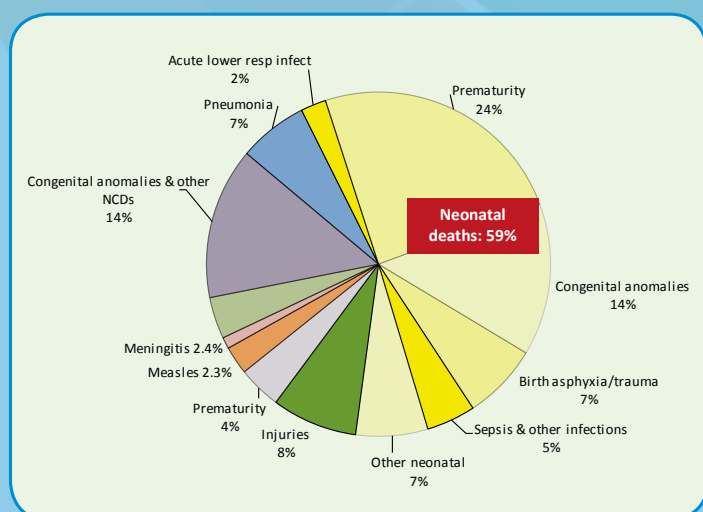
Selected determinants of health

Population living in urban areas (%) (2016)	90
Annual GDP growth (%) (2016)	2.0
Number of refugees ^a (2016)	2 860 669
Number of internally displaced persons ^b (2016)	0

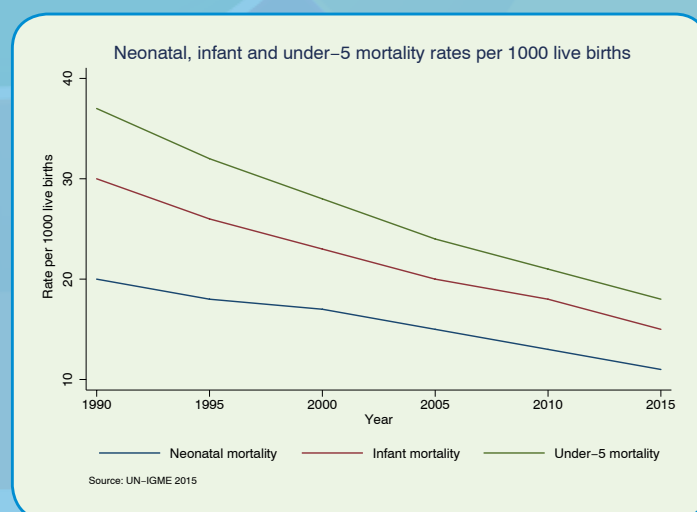
^a Including persons forcibly displaced from their country of origin due to persecution, war, or violence, recognized and reported by UNHCR, as well as Palestinian refugees registered by UNRWA.

^b Including persons forcibly displaced due to conflict, remaining in their own country, as recognized and reported by UNHCR.

Distribution of causes of death among children aged <5 years (%)



Neonatal, infant and under-5 mortality rates per 1000 live births



Selected SDGs health-related indicators*

1 NO POVERTY

Population below the international poverty line % ...

Proportion of employed population below the international poverty line (ILO estimate, 2016)	Male %	2.9
	Female %	2.5

2 ZERO HUNGER

Children under 5 who are (2013)		
stunted	%	7.7
wasted	%	2.4
overweight	%	4.4

4 QUALITY EDUCATION

Literacy rate (15-24 years) (2015)	Total %	96
	Male %	97
	Female %	91

Net primary school enrolment ratio per 100 school-age children (2014)	Total ratio	98
	Male ratio	98
	Female ratio	99

5 GENDER EQUALITY

Demand for family planning satisfied with modern methods (UN Population Division estimate, 2015)	%	83.8
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6 CLEAN WATER AND SANITATION

Access to improved drinking water (World Health Statistics, 2015)	%	97
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Access to improved sanitation facilities (World Health Statistics, 2015)	%	99
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8 DECENT WORK AND ECONOMIC GROWTH

Unemployment rate (15+ years) (ILO estimate, 2013)	Total %	12.6
	Male %	10.6
	Female %	22.2

11 SUSTAINABLE CITIES AND COMMUNITIES

Concentrations of fine particulate matter (PM2.5) (WHO/CEHA, 2014)	Total	35.9
	Urban	37.7

16 PEACE, JUSTICE AND STRONG INSTITUTIONS

Estimated direct deaths from major conflicts (per 100 000 population) (WHO Global Health Observatory, 2011-2015)	<0.1
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*Because of the scarcity of data, the above presentation is limited. Where available, information is obtained from the Regional Core Indicators Programme

Key health indicators

Indicator	Male	Female	Total
Life expectancy at birth in years (2015)	72.5	75.9	74.1
Maternal mortality ratio (deaths per 100 000 live births) (UN-MMEIG 2015 estimate)	—	—	58
Neonatal mortality rate (deaths per 1000 live births) (UN-IGME 2015 estimate)	...	...	11
Infant mortality rate (deaths per 1000 live births) (UN-IGME 2015 estimate)	...	...	15
Under-five mortality rate (deaths per 1000 live births) (UN-IGME 2015 estimate)	...	...	18
Tobacco use among persons 15+ years (%) (2014)	65.5	10.2	38.4
Overweight (18+ years) (%) (2014)	...	...	65.9
Obesity (18+ years) (%) (2014)	...	...	30.5
Raised blood pressure among persons 18+ years (%) (2014)	...	...	19.3
Raised blood glucose among persons 18+ years (%) (2014)	...	...	14.9
Raised cholesterol among persons 18+ years (%)	...	...	...
Mortality between ages 30 and 70 from cardiovascular disease, cancer, diabetes, chronic respiratory disease per 10 000 (2015)	...	...	20
Cancer incidence per 100 000 (2012)	...	...	155.4

Universal health coverage (UHC) means provision of quality services to everybody without discrimination of any kind and without exposing people to financial hardship. UHC is one of the targets of Sustainable Development Goal 3, and attaining UHC will also contribute directly or indirectly to achieving the other SDGs. Achieving UHC means ensuring healthy lives and promoting well-being for all at all ages with explicit affirmative action for vulnerable populations including refugees and migrants. Thus, disaggregated data will be necessary to assess and address inequities in health. UHC requires inter-sectoral action. All countries can and must advance towards UHC by year 2030, if not earlier.

3 GOOD HEALTH AND WELL-BEING



ENSURE HEALTHY LIVES
AND PROMOTE WELL-BEING
FOR ALL AT ALL AGES

Voluntary National Review

Completed in 2017: <https://sustainabledevelopment.un.org/content/documents/16289Jordan.pdf>

National Focal Point for 2030 Agenda

Mr Mutasim M.D. Zaid Al-Kilani, Head of Sustainable Development Division, Ministry of Planning and International Cooperation

National Focal Point in Ministry of Health for health-related SDGs

Dr Niemat Barawi

1. How is Jordan incorporating the 2030 Agenda into its development policy and planning?

The government of Jordan has internalized the 2030 Agenda and the SDGs as part of Jordan 2025 A National Vision and Strategy, a blueprint developed with wide participation from major groups and organizations. Jordan 2025 determines the integrated economic and social framework which will govern economic and social policies based on providing equal opportunities for all. The Executive Development Plan (EDP) translates the Jordan 2025 document into actionable development programmes. The SDG goals and targets of the 2030 Agenda have been mainstreamed to a great extent throughout the EDP; almost 40% of the indicators categorized as tier I indicators are among the 600 indicators that monitor progress.

Jordan 2025 is available here: <http://www.mop.gov.jo/EchoBusV3.0/SystemAssets/pdf/MOP-pdf/Jordan%202025%20en.pdf>.

2. How is Jordan incorporating SDG 3 targets in health policy, strategy, and planning?

The National Strategy for the Health Sector in Jordan 2016-2020 is derived from Jordan 2025, and it is aligned with the 2030 Agenda. It focuses mainly on good governance of the health sector, patient-centred services, providing services and financial protection coverage. The indicators in the strategy were aligned with the indicators of the EDP. However, the Ministry of Health's (MoH) current strategic plan is coming to an end this year, the MoH, with support from WHO, is embarking on developing a new strategic plan for 2018-2022 in line with the SDGs and the aim to achieve Universal Health Coverage (UHC).

3. Are there any major partnerships in Jordan for advancing the 2030 Agenda?

The UN SDG Group promotes strategic collaboration among the UN Country Team (UNCT) members to support the implementation of the 2030 Agenda in Jordan. The UNCT is now embarking on developing the UN Sustainable Development Framework (UNSDF) 2018-2022. All residing and non-residing agencies are on board. In the process of preparing the Voluntary National Review, key stakeholders were solicited to provide insight about their perceived role in implementing and monitoring the 2030 Agenda and the support needed to reach the targets. Stakeholders included youth, civil society organizations, parliamentarians, and private sectors among others.

4. Are there any major partnerships in Jordan for advancing the health-related SDGs?

Other than the SDG group and the UNSDF, which support the implementation of the 2030 Agenda in general, WHO is leading the initiative to establish a network for advancing health related SDGs. The network will include parliamentarians, media, academia, private and public sectors and civil society organizations. The network will support initiatives in transforming the health system by identifying key policy enablers that might be needed to accelerate steps towards UHC and SDGs. They will advocate for Health in All Policies approach in doing so. The government of Jordan will sign UHC2030 Global Compact during 2017 as an opportunity to promote a comprehensive and coherent approach for collective commitment to UHC. This ensures coordination and alignment of health system strengthening efforts at global, regional and country levels and appropriate linkages with other sectors.

5. Has Jordan reoriented its National Health Policies, Strategies, and Plans to incorporate Universal Health Coverage?

Access to Universal Health Coverage (UHC) has been a strategic target for all successive governments in Jordan since more than three decades. This is a central part in the National Strategy for Health Sector in Jordan 2016-2020. The strategy focused on provision of patient-centred health services, as well as reforming the health financing system. Another integral part mentioned in the strategy is the need to strengthen primary healthcare through family medicine. As noted above, the MoH will start the process of developing a new strategic plan 2018-2022 in line with the SDGs. It will guide the transformation of the MoH in particular, and the health system in general, towards achieving UHC.