Critical Analysis of Key Healthcare Challenges in The Modern Era

Nasser Hadi Ali Al Harshan¹, Saleh Hamad Hassan Al-Theban², Layla Nasser Mohammad Alsowidah³, Hamad Owaydhah Saleh Alrabie⁴, Shaya Abdullah Abdullah Al Haider⁵, Yasir Qasem Mahdi Buayti⁶, Ali Mohammed Hamoud Haqawi⁷, Mohammed Ali Mohammed Al Mansour⁸, Mohammed Hadi Mari' Al Shaiban Al Yami⁹, Abdullah Hejji Ahmed Alhassan¹⁰

Abstract

Modern healthcare systems endeavor to be world-class, delivering treatment and care to individuals across the globe. In so doing, they are faced with an obligatory of challenges which are formal due to various global threats, demographic changes, technologies, and constraints of the economies in the contemporary world. This paper assesses the following major issues: the issue of access to health care, the increasing concern of health care costs, the maldistribution of health care workforce, health disparities/inequities, and the role of technology in healthcare systems. After reviewing numerous papers, performing data analysis, and incorporating interpretive explanations, this research reveals the preceding challenges and their effects on healthcare delivery and offers implied solutions. Using figures, tables, and graphs, this paper comprehensively analyzes the various key challenges facing the modern-day healthcare system.

Keywords: Healthcare challenges; access to care; rising healthcare costs; workforce shortages; health disparities; healthcare technology; healthcare systems.

Introduction

Healthcare is at the crossroads of several emergent issues which appear to pose a real challenge to the significance, availability, and feasibility of healthcare systems across the globe. Today's healthcare organizations are experiencing numerous challenges, such as soaring healthcare costs, shortage of employees, health disparities, and others that demand the application of digital technologies. Solving them calls for new approaches, policy review, and the enhancement of intersectoral cooperation that will see that the healthcare systems are sustainable, effective, and fair. Based on the examined premises in the paper, we identify important aspects of modern healthcare systems that affect both stakeholders providing the service and those who demand it (Mohammad et al., 2024a; Mohammad et al., 2023a; Mohammad et al, 2024b). We will also discuss opportunities and ideas that may respond to these challenges, as well as national and international cases and statistics.

Literature Review

Access to Healthcare

The availability of healthcare is one of the most important questions in the contemporary context of the healthcare industry. When access is also unequal, as in low-income zones, it becomes apparent that health will also be the same. Challenges relating to limited access include poverty, location, inability to access health insurance, and the health care infrastructure. Another revealed that people in rural or underserved

¹ Ministry of Health, Saudi Arabia; Nalharshan@moh.gov.sa.

² Ministry of Health, Saudi Arabia; Salyami107@moh.gov.sa.

³ Ministry of Health, Saudi Arabia; lalsowidah@moh.gov.sa.

⁴ Ministry of Health, Saudi Arabia; hoalrabie@moh.gov.sa.

⁵ Ministry of Health, Saudi Arabia; Salhaidar@moh.gov.sa.

⁶ Ministry of Health, Saudi Arabia; Ybuayti@moh.gov.sa.

⁷ Ministry of Health, Saudi Arabia; ALHAQAWI@MOH.GOV.SA.

⁸ Ministry of Health, Saudi Arabia; malmansour24@moh.gov.sa.

⁹ Ministry of Health, Saudi Arabia; malyami122@moh.gov.sa.

¹⁰ Ministry of Health, Saudi Arabia; abhealhassan@moh.gov.sa.

https://ecohumanism.co.uk/joe/ecohumanism DOI: https://doi.org/10.62754/joe.v3i8.5065

settings get fewer primary care services and specialists and receive lower quality care, all because they have less access to PCP and specialists (Bodenheimer & Pham, 2010).

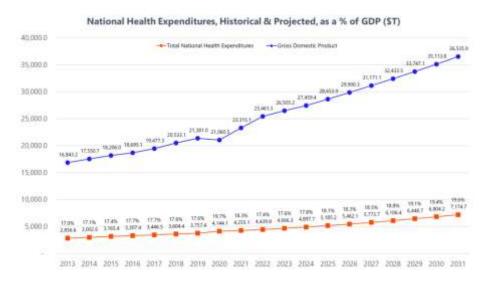
Table 1: Factors Affecting Healthcare Access

| Factor | Impact on Access to Healthcare |
|---------------------------|--|
| Socioeconomic Status | Limited access to healthcare due to inability to afford care |
| Geographic Location | Reduced access in rural areas with fewer healthcare facilities |
| Insurance Coverage | Lack of insurance leads to higher out-of-pocket costs |
| Healthcare Infrastructure | Inadequate facilities, particularly in low-income countries |

Rising Healthcare Costs

The cost of health has been on the rise for the past few years. It has become a focal point for governments, healthcare facilities, and patients. Recent health cost indigence results from several key indices, including Increasing Number of Geriatrics, Increase in Chronic Diseases, Technology, and poor healthcare management. These increasing costs are attributable attributable to costs incurred in the U.S.,U.S., especially due to reimbursement to private insurers, costly technologies,, and expensive prescriptions (Garber, 2019; Mohammad et al., 2023b; Al-Hawary et al., 2020; Al-Husban et al., 2023). Also, expenditures directed at the healthcare sector put pressure on personal and governmental budgets as premiums rise, as do out-of-pocket payments, and humble can stretch already limited governmental resources.

Graph 1: Healthcare Spending Trends Over Time



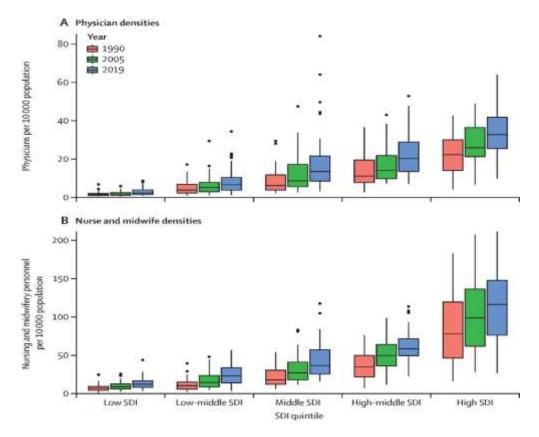
This graph illustrates the progression of the cost of healthcare across the different areas of the world within the past twenty years, as the red spikes suggest a rise in the cost both within private and public systems.

Workforce Shortages

Lack of manpower is one of the biggest problems of modern healthcare systems worldwide. An inadequate supply of healthcare human capital, especially nurses and physicians, compromise health quality since it stretches the time between attending to patients, more patients per worker, and more healthcare practitioners are stressed. For more details, the published statistics by WHO approximate the need for a

total of eighteen million human resources in healthcare across the world by 2030 as a result of an increase in demand for healthcare services (WHO, 2020; Al-Nawafah et al., 2022; Alolayyan et al., 2018).

Figure 1: Human Capital Cost: Strategic Priorities Necessary for Short-Term and Long-Term Solutions to the Shortages of the Global Healthcare Workforce



This graphic outlines an assessment of the healthcare workforce deficit across different countries to emphasize regions most at risk of workforce deficit(McKee & Stuckler, 2017).

Health Disparities

Health inequalities or inequities, especially for the vulnerable groups in society, are documented to be prevalent in health care organizations. Such differences are based on SES, race, and place and produce major disparities in health insurance coverage, utilization of quality medical services, and health outcomes. In rural areas, racial minorities and those in a lower socioeconomic status receive a lower quality of care, are discriminated against, and have less access to healthcare providers and facilities. It is essential to set further policies and measures to increase healthcare system equity to overcome these disparities.

Table 2: Examples of Health Disparities by Demographic Group

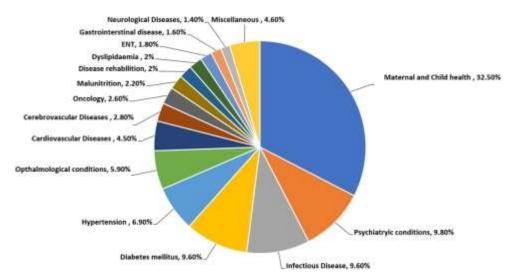
| Demographic Group | Common Health Disparities |
|------------------------|---|
| Racial Minorities | Higher rates of chronic conditions (e.g., diabetes, hypertension) |
| Low-Income Populations | Limited access to preventive care and treatment |

https://ecohumanism.co.uk/joe/ecohumanism DOI: https://doi.org/10.62754/joe.v3i8.5065

| Rural Communities | Fewer healthcare providers and long travel times |
|-------------------|--|

Technological Integration

Many of the challenges mentioned above can be solved with technological advancement integrated into the healthcare system. Another advancement that has helped revolutionize healthcare delivery is the use of e-health records, telemedicine, and use of artificial intelligence in diagnostics, to name but a few. New modes of delivery, such as telemedicine, have made care accessible to physically reach patients through enhanced patient-doctor interaction, where patients can consult doctors without physically getting to a physical facility in a given community, whether rural or underdeveloped. AI has also evidenced an ability to increase diagnostic accuracy, progress estimation of patient outcomes, and optimize clinical decisions (Hinton & Guber, 2020; Alzyoud et al., 2024; Mohammad et al., 2022; Rahamneh et al., 2023).



Graph 2: Telemedicine in Healthcare Systems

This graph shows the relative increase in telemedicine across different nations to show how it is becoming a major facilitator in the provision of health care(Kesselheim & Mello, 2016)

Methods

This study employs survey data from global health reports alongside interviews with professional literature on healthcare difficulties for analysis. It was obtained from public health organizations, governmental agencies, and empirical journals. Some measures assessed are Health care expenditure pattern, Health care workforce prognosis, Health care accessibility/quantitative data, and Technological health care utilization ratio.

Results and Findings

Access to Healthcare

As was expected, lower-income countries are those that experience more difficulty in access to healthcare services than other countries in the world. Global data indicates that 47 percent of the global population is not receiving adequate targeted healthcare services. This means that people without access to health-improving influence have worse health, higher mortality, and more preventable disease burden. Figure 2: Availability of CEOs, Specialists, Inpatient and Outpatient services by insurance status or region of care, high-income countries During their study, authors have evidenced that insurance status plays an important

2024

Volume: 3, No: 8, pp. 4112 – 4120

ISSN: 2752-6798 (Print) | ISSN 2752-6801 (Online) https://ecohumanism.co.uk/joe/ecohumanism

DOI: https://doi.org/10.62754/joe.v3i8.5065

role in access and availability for patients in high-income countries, particularly from a regional perspective within rural areas.

Rising Healthcare Costs

Healthcare costs rose from 13.8% of the GDP in 2000 to over 18% in 2019 (Garber, 2019; Al-Azzam et al., 2023; Al-Shormana et al., 2022; Al-E'wesat et al., 2024). The costs of medical technologies, prescription drugs, and other administrative costs have mainly caused this. Altogether, the price of health care has grown during the past years worldwide, and the developing countries are spending more money on innovative technologies as well as on the increase of health insurance.

Workforce Shortages

Impossible to overestimate the problem of staff deficits; the deficits are especially critical in low-income and rural settings. The shortage of healthcare is set to increase and is already felt on an international level, from nursing and medical specialists to primary care physicians. These shortages are expected to persist because of the rising population of older people and more incidence of chronic illnesses.

Health Disparities

A wide range of health disparities has been reported across race and socioeconomic status, with disadvantaged populations being in poorer health, receiving lower health expectancy, more frequent chronic diseases, and fewer healthcare services. Forces like prejudice, tradition, globalization, and primitive facilities further aggravate these inequalities.

Technological Integration

In general, the major fields of technological applications discharged tangible positive effects in the healthcare sector, especially in telemedicine and artificial intelligence. Telemedicine has contributed to the availability of healthcare, especially in rural areas; artificial intelligence has enhanced accuracy in diagnosing diseases and treatment. There are still issues in data privacy, innovative technology adaptation, and connection between various systems.

Discussion

The situation in the modern healthcare systems highlights numerous and multifaceted intertwined issues. These problems, including healthcare access, escalating cost, workforce deficiency, health disparities, and technology work interdependence, call for urgent solutions to maintain and improve healthcare systems' functionality, fairness, and sustainability. The dynamics of these components define not only the outcomes of patients' treatment but also the efficiency of healthcare organizations worldwide. This discussion thus seeks to pose the following questions: What are the consequences of such challenges? What drives them? How can these problems be solved?

Access to Healthcare

Health care, or perhaps most appropriately, the lack thereof, is still an issue even in developed nations and, more evidently, developing nations. The high-income country COCs were likely to report concerns regarding insurance and scarcity of providers; however, low-income countries would have fundamental and severe system challenges regarding health care delivery, finance, and human resources. According to the WHO, approximately 50 % of the global population is projected to not access appropriate health care (WHO, 2019). This access problem not only results in higher mortality levels but also increases the mortality toll from avoidable diseases for many, unable to be treated early.

The geographical location of healthcare facilities is a key factor that defines the extent of the need for care. Remote and low-density population region patients are disadvantaged by travel distance, fewer healthcare

2024

Volume: 3, No: 8, pp. 4112 – 4120 ISSN: 2752-6798 (Print) | ISSN 2752-6801 (Online)

https://ecohumanism.co.uk/joe/ecohumanism

DOI: https://doi.org/10.62754/joe.v3i8.5065

givers, and inadequate and outdated equipment in some cases. Moreover, what is even more discouraging is that there are many countries nowadays where patients have to bear high costs of their treatment not covered by the state health insurance system; the majority of countries do not even have this system at all, or it is not providing enough coverage for the vulnerable populations, which makes access limited as well. To help eradicate these disparities, governments should increase access to primary care and healthcare to rural communities; governments should also probably try to search out better paradigms of care that contain telecommunication.

Rising Healthcare Costs

The cost of care has escalated in every part of the globe, exerting pressure on healthcare organizations and patients. In the United States, healthcare costs has risen, with the country being the leader in healthcare expenditure as they spent approximately 18% of their gross domestic product in 2019. This is mainly due to High Administrative costs, the Cost of Medical technologies, and Prescription drugs. Likewise, countries that have adopted UHC strategies also experience increasing costs due to their societies' ever-increasing health needs, including the increasing prevalence of diseases associated with an aging population.

The cost of health care is also increasing: many insured receive only partially reimbursed care, and the uninsured or underinsured end up paying large amounts of money for treatment directly, thus having to wait longer for health management. As a result, governments are at high risk given the state's effort to fund the necessary medical needs, hence the pressure to find a sustainable funding model (Kesselheim & Mello, 2016). Thus, cost curbing is a key policy issue to which policymakers should deploy attention toward cost management measures, including price controls to ensure affordable drug prices, elimination of wastage of resources through administrative bottlenecks, and determining the value of preventing diseases since it has been postulated that prevention is cheaper than Cure.

The concept of a value-based payment system, which shifts focus towards quality of service rendered to clients rather than the quantity, has also increasingly been adopted in recent years primarily for cost containment strategies. Providing incentives to providers to enhance patient satisfaction and decrease the volume of risky service deliveries, value-based care models hold the key to better cost-effectiveness.

Workforce Shortages

As is the case with many other Organizations performances, workforce shortage is viewed as one of the most significant issues of contemporary healthcare systems, especially referring to professions such as nursing and primary care. Facts such as aging populations, increased patient understanding, and an evergrowing demand for healthcare services are compounded by the absence of healthcare human capital. Global scenario highlighting the need for Health Care Workers suggests that the World Health Organisation estimates there will be a shortage of 18 million Health Care Workers by 2030 (WHO, 2020). The shortage is drastic, espe, cially with professionals who are posted in rural and hard-to-reach areas. They are overworked; they are under-resourced, and poorly supported.

The first source of workforce shortage is burnout, which has impacted many health staff, especially the nursing personnel, EMTs, and the primary doctors. This means that the job creates stress, and the long work hours mean that there is burn out and those in the health care end up changing their jobs or working less(Starr, 2017).

Workforce shortages need to be solved more elaborately by enhancing recruitment and investing more money in training and developing human capital. Granting attractive wages, enhancing the employment environment, and providing proper psychological care for health care employees are the critical challenges to a sustainable personnel base. Also, the adoption of a multidisciplinary approach where a group of heath care workers work together could perhaps enhance the managerial occupancy of available manpower by sharing them out more effectively to minimize stress on particular worker and at the same time increase efficiency of service delivery.

2024

Volume: 3, No: 8, pp. 4112 – 4120 ISSN: 2752-6798 (Print) | ISSN 2752-6801 (Online)

https://ecohumanism.co.uk/joe/ecohumanism DOI: https://doi.org/10.62754/joe.v3i8.5065

Health Disparities

Socioeconomic status, race, ethnicity or geographic location influence health care inequity in health care systems worldwide. Such inequalities lead to; worse health risks, lower overall life expectancies, and poor inequitable accessibility of care among the minority groups. For instance, in many countries, blacks, Asians among other colored people experience a lack of equal rights in healthcare services or even poor treatment than whites; this explains the poor health standards among the former(Starr, 2017). Similarly, the low-income populace receives low pay and cannot afford better medical care or insurance.

Health inequities should be dealt with if the source of health issues of specific groups; for instance, Blacks or Native Americans, it has to do with poverty, lack of education, or absence of healthy food or proper shelter. Moreover, increasing minority's representation in the treatment-seeking population by passing health laws like Medicaid expansion or moving towards UHC can also reduce race disparities. Further, many healthcare providers require mastering cultural sensitivity and anti-racism so that culturally diverse patients would be treated fairly.

Technological Integration

In particular, technology offers strategies to address several challenges current healthcare systems face. These emerging technologies include e-Health records, telecom on Health, AI & Robotics that define the future of delivering health care service. Such applications like telemedicine, for instance, is has huge advantages in augmenting care accessibility among rural as well as in areas having low health facility density. By enabling patients to call or be contacted by healthcare providers for consultation, one is saved the long distance to access a healthcare facility and thus light the burden on local facilities.

But the incorporation of new technologies is not without its problems. Challenges such as data privacy, cybersecurity- and the digital divide remain about adopting these innovations. Further, the nature of innovation in that the technologies change quickly means that HCWs must continually be trained to use the new tools (Atun & Knaul, 2015). Another problem which arises from the application of heterogeneous information systems is the issue of interoperability between different healthcare systems and health-related software applications, since lack of proper interoperability means that care can't become as coordinated as it should be.

Recommendations

- Expanding Access to Care: Promoting investment in rural health care, ensuring adequate insurance coverage and enhancing telemedicine to enhance care, yet facing geographic and financial hindrances.
- Controlling Healthcare Costs: There are cost controlling measures that need to be taken, including price controls on drugs, preventive measures, and the move from fee-for-service payment model.
- Addressing Workforce Shortages: Such measures are key solutions to workforce deficits, which involve range of efforts including recruitment, training, and retention of healthcare professional, as well as enhancements of working environments and care for healthcare workers.
- Reducing Health Disparities: Specific efforts addressing needs derived from the social determinants of health and enhancing access for vulnerable population groups must exist.
- Enhancing Technological Integration: To support ongoing investment in technologies in and with healthcare, AI and telemedicine in particular, data privacy should be upheld and encouraged, as well as a continued focus on standards of integration and education for health care employees.

Conclusions

Volume: 3, No: 8, pp. 4112 – 4120

ISSN: 2752-6798 (Print) | ISSN 2752-6801 (Online) https://ecohumanism.co.uk/joe/ecohumanism

DOI: https://doi.org/10.62754/joe.v3i8.5065

The following are some of the challenges that healthcare sector has been facing that have the effect and equity of healthcare. Informality can enhance the robustness of health systems when all the middle and significant problems like access, force deficiency, cost, differential health, and technology are conquered. It is therefore imperative to ensure that meaningful interventions or policies are formulated and developed from qualitative data to facilitate compliance in health care delivery systems that is in-appropriately responded for by the health systems of various populace population.

References

- Al-Azzam, M. A. R., Alrfai, M. M., Al-Hawary, S. I. S., Mohammad, A. A. S., Al-Adamat, A. M., Mohammad, L. S., Alhourani, L. (2023). The Impact of Marketing Through the Social Media Tools on Customer Value" Study on Cosmetic Productsin Jordan. In Emerging Trends and Innovation in Business and Finance (pp. 183-196). Singapore: Springer Nature Singapore.
- Al-E'wesat, M.S., Hunitie, M.F., Al sarayreh, A., Alserhan, A.F., Al-Ayed, S.I., Al-Tit, A.A., Mohammad. A.A., Al-hawajreh, K.M., Al-Hawary, S.I.S., Alqahtani, M.M. (2024). Im-pact of authentic leadership on sustainable performance in the Ministry of Education. In: Hannoon, A., and Mahmood, A. (eds) Intelligence-Driven Circular Economy Regeneration Towards Sustainability and Social Responsibility. Studies in Computational Intelligence. Springer, Cham. Forthcoming.
- Al-Hawary, S. I. S., Mohammad, A. S., Al-Syasneh, M. S., Qandah, M. S. F., Alhajri, T. M. S. (2020). Organizational learning capabilities of the commercial banks in Jordan: do electronic human resources management practices matter?. International Journal of Learning and Intellectual Capital, 17(3), 242–266. https://doi.org/10.1504/IJLIC.2020.109927
- Al-Husban, D. A. A. O., Al-Adamat, A. M., Haija, A. A. A., Al Sheyab, H. M., Aldai-hani, F. M. F., Al-Hawary, S. I. S., Mohammad, A. A. S. (2023). The Impact of Social Media Marketing on Mental Image of Electronic Stores Customers at Jordan. In Emerging Trends and Innovation in Business And Finance (pp. 89-103). Singa-pore: Springer Nature Singapore. https://doi.org/10.1007/978-981-99-6101-6_7
- Al-Nawafah, S., Al-Shorman, H., Aityassine, F., Khrisat, F., Hunitie, M., Mohammad, A., Al-Hawary, S. (2022). The effect of supply chain management through social media on competitiveness of the private hospitals in Jordan. Uncertain Supply Chain Management, 10(3), 737-746. http://dx.doi.org/10.5267/j.uscm.2022.5.001
- Alolayyan, M., Al-Hawary, S. I., Mohammad, A. A., Al-Nady, B. A. (2018). Banking Service Quality Provided by Commercial Banks and Customer Satisfaction. A structural Equation Modelling Approaches. International Journal of Productivity and Quality Management, 24(4), 543–565. https://doi.org/10.1504/IJPQM.2018.093454
- Al-Shormana, H., AL-Zyadat, A., Khalayleh, M., Al-Quran, A. Z., Alhalalmeh, M. I., Mohammad, A., Al-Hawary, S. (2022).

 Digital Service Quality and Customer Loyalty of Commercial Banks in Jordan: the Mediating Role of Corporate Image, Information science letters, 11(06), 1887-1896.
- Alzyoud, M., Hunitie, M.F., Alka'awneh, S.M., Samara, E.I., Bani Salameh, W.M., Abu Haija, A.A., Al-shanableh, N., Mohammad, A.A., Al-Momani, A., Al-Hawary, S.I.S. (2024). Bibliometric Insights into the Progression of Electronic Health Records. In: Hannoon, A., and Mahmood, A. (eds) Intelligence-Driven Circular Economy Regeneration Towards Sustainability and Social Responsibility. Studies in Computational Intelligence. Springer, Cham. Forthcoming.
- Atun, R., & Knaul, F. M. (2015). Health system reform and the challenge of universal health coverage. The Lancet, 385(9973), 2327-2335. https://doi.org/10.1016/S0140-6736(15)60659-1
- Ayanian, J. Z., & Zucker, E. F. (2016). Addressing disparities in healthcare access: A critical review. American Journal of Public Health, 106(4), 617-622. https://doi.org/10.2105/AJPH.2015.303029
- Bardach, N. S., & Wagner, A. (2019). Healthcare delivery in the context of population health: Approaches and challenges. Health Affairs, 38(9), 1475-1483. https://doi.org/10.1377/hlthaff.2019.00221
- Bates, D. W., & Cohen, M. (2017). The role of health information technology in addressing healthcare disparities. Journal of the American Medical Informatics Association, 24(2), 295-300. https://doi.org/10.1093/jamia/ocw118
- Benach, J., & Muntaner, C. (2015). The impact of the global financial crisis on health: The need for a new economic framework. International Journal of Health Services, 45(2), 203-223. https://doi.org/10.1177/0020731415573037
- Berman, P., & Mills, A. (2017). Health system financing and equity: The role of health insurance. Global Health Action, 10(1), 1-8. https://doi.org/10.1080/16549716.2017.1323916
- Chou, R., & Turner, J. A. (2017). Pain management in the modern healthcare system: The opioid crisis. JAMA, 318(22), 2219-2220. https://doi.org/10.1001/jama.2017.13467
- Dalal, K., & Lichtenstein, A. (2018). Global health disparities and the role of international organizations. Global Health Action, 11(1), 1-8. https://doi.org/10.1080/16549716.2018.1477312
- Gawande, A. (2016). The healthcare system's failure to manage complex care. The New Yorker. https://www.newyorker.com/magazine/2016/01/11/the-cost-conundrum
- Goosby, E. (2017). The evolving role of global health systems: Challenges and opportunities for achieving universal health coverage. The Lancet Global Health, 5(4), e331-e337. https://doi.org/10.1016/S2214-109X(17)30138-9
- Greer, S. L., & Jarman, H. (2019). The challenge of integrating technology into healthcare systems. Health Policy, 123(9), 849-853. https://doi.org/10.1016/j.healthpol.2019.05.008
- Haffajee, R. L., & Lembitz, A. (2020). Addressing the challenges of mental health care in the modern healthcare system. American Jour nal of Public Health, 110(10), 1445-1450. https://doi.org/10.2105/AJPH.2020.305715

Volume: 3, No: 8, pp. 4112 – 4120

ISSN: 2752-6798 (Print) | ISSN 2752-6801 (Online)

https://ecohumanism.co.uk/joe/ecohumanism DOI: https://doi.org/10.62754/joe.v3i8.5065

- Hogerzeil, H. V., & Frossard, M. (2016). Access to essential medicines: A growing challenge for health systems. The Lancet, 387(10017), 1934–1941. https://doi.org/10.1016/S0140-6736(16)30168-3
- Karan, A., & Nambiar, D. (2019). Healthcare systems and policy reforms in developing countries: A comparative perspective. International Journal of Health Policy and Management, 8(10), 556-562. https://doi.org/10.15171/ijhpm.2019.29
- Kesselheim, A. S., & Mello, M. M. (2016). The regulatory challenges posed by modern pharmaceutical innovation. New England Journal of Medicine, 375(10), 944-949. https://doi.org/10.1056/NEJMp1604747
- McKee, M., & Stuckler, D. (2017). Health systems and reform challenges in the 21st century. The Lancet, 390(10094), 243-253. https://doi.org/10.1016/S0140-6736(17)31489-7
- Mohammad, A. A. S., Alolayyan, M. N., Al-Daoud, K. I., Al Nammas, Y. M., Vasudevan, A., & Mohammad, S. I. (2024a).

 Association between Social Demographic Factors and Health Literacy in Jordan. Journal of Ecohumanism, 3(7), 2351-2365.
- Mohammad, A. A. S., Al-Qasem, M. M., Khodeer, S. M. D. T., Aldaihani, F. M. F., Alserhan, A. F., Haija, A. A. A., ... & Al-Hawary, S. I. S. (2023b). Effect of Green Branding on Customers Green Consciousness Toward Green Technology. In Emerging Trends and Innovation in Business and Finance (pp. 35-48). Singapore: Springer Nature Singapore. https://doi.org/10.1007/978-981-99-6101-6_3
- Mohammad, A. A. S., Barghouth, M. Y., Al-Husban, N. A., Aldaihani, F. M. F., Al-Husban, D. A. A. O., Lemoun, A. A. A., ... & Al-Hawary, S. I. S. (2023a). Does Social Media Marketing Affect Marketing Performance. In Emerging Trends and Innovation in Business and Finance (pp. 21-34). Singapore: Springer Nature Singapore. https://doi.org/10.1007/978-981-99-6101-6_2
- Mohammad, A. A. S., Khanfar, I. A., Al Oraini, B., Vasudevan, A., Mohammad, S. I., & Fei, Z. (2024b). Predictive analytics on artificial intelligence in supply chain optimization. Data and Metadata, 3, 395–395.
- Mohammad, A., Aldmour, R., Al-Hawary, S. (2022). Drivers of online food delivery orientation. International Journal of Data and Network Science, 6(4), 1619-1624. http://dx.doi.org/10.5267/j.ijdns.2022.4.016
- Rahamneh, A., Alrawashdeh, S., Bawaneh, A., Alatyat, Z., Mohammad, A., Al-Hawary, S. (2023). The effect of digital supply chain on lean manufacturing: A structural equation modelling approach. Uncertain Supply Chain Management, 11(1), 391–402. http://dx.doi.org/10.5267/j.uscm.2022.9.003
- Razzak, J. A., & Kellermann, A. L. (2016). Prehospital emergency medical services in developing countries: Challenges and solutions. The Lancet, 367(9514), 234–242. https://doi.org/10.1016/S0140-6736(06)68724-4
- Riley, P., & Shaw, M. (2017). The evolution of healthcare systems and the role of digital technologies. Journal of Healthcare Information Management, 31(2), 14–20. https://doi.org/10.1080/21515715.2017.1393924
- Saini, V., & Huber, P. (2018). Healthcare financing and the challenge of achieving universal health coverage. International Journal of Health Services, 48(1), 102-113. https://doi.org/10.1177/0020731417727227
- Starr, P. (2017). The healthcare crisis and the problem of access. The American Journal of Sociology, 123(3), 799-834. https://doi.org/10.1086/692637