

The Role of Self-financing in Improving the Quality of Services Provided in the Government Health Sector in Iraq

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The study addressed one of the most important types of government service institutions, which is the health services sector in Iraq by identifying the funding reality for the health sector and what was covered in the literature, reports and previous studies in this regard. The results of the survey and descriptive analysis of the axes of the questionnaire conducted by the researcher, and his analysis using the descriptive statistics tools to estimate the compatibility of the answers of the members of the sample whose number reached (34) An individual distributed among some general managers of the stakeholders in the Iraqi Ministry of Health, doctors, and a number of auditors and professors of the financial and banking sciences department at the College of Administration and Economics at the University of Baghdad. The results of the study showed the strength of the relationship between self-financing as an independent variable and the quality Health services in the government health sector as a dependent variable.

Keywords: *Self-financing, Financing management, Health sector, The reality of health in Iraq, Government hospitals.*

Introduction

The human being is the most important element and the main pillar in the growth and development of societies, so all nations strive to take into account human health and ensure that it remains healthy in order to develop human wealth, which is the key to progress and prosperity. Since health is the most important thing that a person has, he must lay solid foundations and stable pillars of a healthy health system. It fits the requirements of the

contemporary individual and his growing needs day after day with the increasing number and development of his ambitions as a result of the changes in the surrounding environment, which are accelerating due to the rapid scientific progress, and later the responsibility of developing the health sector is no longer the preserve of health sector workers, including doctors. For nurses and administrators, but rather they have been extended to other important sectors such as the economic, political, educational, and other sectors, and the way that any country chooses to finance the health care system plays a pivotal role in enabling the state to achieve its goals in the national health field. Financing has a major role in the process of providing health and service care in hospitals And the high level of performance of these services increases with increasing funding and rationality in the disposal of these funds, for the purpose of supporting the basic elements that the health sector depends on in providing advanced services comparable to those provided in other countries, and one of the most important challenges that hinder this; The scarce resources that are not sufficient to promote and develop the health value that need many expenses to continue the effort to improve health services and advance the deteriorating reality of the health sector in Iraq after witnessing a clear deterioration in the health services provided and a retreat in the infrastructure of health centers and government hospitals; as a result of weak government funding from On the one hand, and due to financial corruption, complex routine procedures, and government neglect on the other, which also caused the deterioration of the Iraqi health situation in general, despite the significant increase in the Ministry of Health's funding from its allocations within the annual budget issued by Ministry of Finance, Vlatzal government funding of the Iraqi people is low compared to some of the Arab countries is very low compared to other countries of the Arabian Gulf.

No, while the Iraqi Ministry of Health devised a strategy to rehabilitate and build the health sector, however, it faced the problem of finding additional financing alternatives that would enable it to bridge the financial shortfall in government funding without overburdening health service applicants (Mreza, Bachay & Flayyih, 2018:Sharaf et al, 2020).

So It has become necessary to find new formulas that suit the Iraqi reality in all its economic, social and political dimensions, taking into account the specificity of the conditions that the country has gone through in recent years and the almost complete collapse of the Iraqi health sector in some places affected by recent military operations directly or indirectly. The intention is to purify the country from the terrorist organization ISIS, by finding new forms of self-financing for the government health sector in Iraq, after reaching answers to research questions that focused on identifying the reality of financing the Iraqi health sector and contemporary international and regional trends in financing government hospitals.

To answer these questions, the researcher resorted to adopting the descriptive analytical approach to describe the current reality of financing the Iraqi health sector and using it as a

starting point to reach the goals of the research. After the in-depth analysis, the researcher tested a questionnaire designed to explore the sample views before proceeding to find a proposed scenario for financing the Iraqi health sector that can be appropriate with the available capabilities and the surrounding environment for an Iraqi community.

The method chosen by any country contributes to financing its health care system, in which it specifically finances government hospitals, as this method plays a pivotal role in enabling the country to achieve its goals in the national health field, so financing has a major role in the process of providing health and service care in hospitals, The level of performance increases For these services by increasing funding and rationality in the disposal of these funds, for the purpose of supporting the basic elements that the hospital is dependent on in providing its services, which are specialized medical, health, administrative and other owners

The Concept of Financing

Funding concepts and definitions are numerous, as the traditional view of financing is to obtain funds and use them to operate or develop projects, which mainly focus on determining the best source for obtaining funds. In the contemporary economy, financing has become one of the basic ingredients for developing and expanding productive forces and strengthening capital. We can supply some of the most important definitions as follows:

Funding is defined as the search for appropriate methods of obtaining funds, choosing and dividing those methods, and obtaining the best mix between them in a manner that suits the quantity and quality of the institution's money needs (Al-Zaidi, 1999).

The United Nations has defined it as a set of financial resources intended for educational institutions to achieve specific goals and to manage them efficiently. (United Nations, 1990).

It is defined as "spending money or using effort, which is a complex process with dimensions and stages and is one of the jobs that pertain to all the work related to providing the institution with the funds necessary to achieve the purposes for which it was established and the movement of these funds in it" (Al-Awda, 1998).

As for (Stephen, 1993) he defines it as all executive activities that require obtaining funds and resources, and investing them in a specific set of operations that lead to raising the quality and efficiency of expected results, through resources at the present time, and investing them to improve the expected return.

Funding the government health sector in this study means from the researcher's point of view that all the financial resources allocated to the Ministry of Health and government hospitals and all that relates to the health sector from the state budget, in addition to other sources such

as gifts, donations, fees or local and foreign aid and manage them effectively in order to provide Quality health services acceptable to all parties within a specified time period (Tamimi & Flayyih, 2017).

The Importance of Financing

Financing is the blood circulation in the economy in general and in the institution in particular (Maytham, 2001, 32), whereby funds must be pumped accurately into the various channels in order to achieve the operational and strategic goals controlled by the institution, as any institution needs different sources of funding In all the different productive stages that you pass through (report Bollo, 2001), and when talking about funding government hospitals in particular, funding is the basic artery for any health service organization, which determines the amount and quality of services that the hospital can provide to patients.

Advantages of Self-Financing

1. It is an essential and important means for small and medium-sized enterprises that may find it difficult to obtain funding from external sources.
2. Self-financing supports the financial position of the institution and avoids potential seasonal fluctuations as it has a proper cash balance to meet its changing needs.
3. Self-financing is the first source of natural capital formation at the lowest possible cost.
4. Gives enterprises more autonomy in choosing to invest without complying with credit or interest recovery requirements or various guarantees, thereby avoiding external financing burdens. (Khadija, 2005, p. 19)

Challenges in Implementing Health Sector Funding Reform

The Rand Foundation, which specializes in health research, has outlined a range of challenges facing the implementation of reform of the health sector in The Kurdistan region, most notably (Ross, 2014; Cassels, 1995; Lloyd-Sherlock, 2005; McKee, Figueras & Chenet, 1998; Mc Donagh & Goodburn, 2001; Hardee & Smith, 2000)

1. Weak and inadequate resources to adequately meet the current demand for health care and the situation will worsen as the population increases and incomes increase.
2. It is clear from the Constitution that health care is a fundamental public right for all citizens, but since this care is provided to the public to date with minimal actual costs, people now believe that they have the right to free public care, a right that cannot be maintained on Long-term.
3. The data needed to make good management decisions, develop a financing policy, and manage a new financing system are not currently available in Iraq.

4. The Ministry of Health currently does not have the capacity, staff or funding to implement or manage the reform of perceived health care funding.
5. Common patient payments in the public sector are too low to raise funds or provide incentives to ensure appropriate use.
6. The hospital sector is hampered by the need for innovation and new equipment as a result of the neglect that has affected it over many years and for many reasons, in addition to the fact that hospital managers do not have sufficient authority over staff or budgetary flexibility, and most hospital managers are professional doctors. But they don't have any administrative training.
7. The health sector financing system does not provide any incentives to reward work, performance and productivity. This is particularly true for doctors whose salaries do not reflect the amount or quality of service they provide in the public sector. .
8. The private sector is expanding rapidly without relying on regulatory guidance or strategic investment process

Development of the Self-Financing System

The self-financing system for hospitals means that hospitals adopt a self-financing method in covering their financial expenses in order to provide a medical service with a high level of efficiency and performance. Hospitals that apply the self-financing system have moral character and financial and administrative independence and are represented by their manager or authorized. This type of hospital is often administered by a board of directors headed by the director of the hospital and the membership of four people, and determines how to select the members of the board of directors in the hospital, the progress of the work, and how to make decisions in it with instructions issued by the Minister of Health after the approval of the opinion body in the hospital (Driant & Li, 2012).

Methodology

Funding for the health sector in Iraq depends mainly on government support, and it may be almost the only source that health institutions rely on to finance their other service investments, which means that The allocations of the Iraqi Ministry of Health are unable to keep up with the local demand for health services, due to the increased demand for health sector services, as well as the exceptional financial conditions that Iraq has gone through due to the double shock the Iraqi economy has been represented by the low global oil prices and the war on terrorism and its high cost, as This has led to a decrease in the quantity and quality of performance and a decrease in the level of services provided by government health institutions in general, and the main problem of the study is the link between improving government health services and government financial revenues, making them dependent on more variable Sadah international and political, hence the problem of the study consisted in

the following question: What is the role of self-financing in improving the quality of services provided in the Iraqi government health sector?

The main question can be answered by analyzing the reality of health sector financing in Iraq, and examining and analyzing recent trends in health sector financing in some developed countries in this field.

The study assumes that finding self-financing channels in Iraqi government hospitals leads to improving the quality of health services, raising the level of performance in this sector, increasing its competitiveness and reducing levels of corruption.

The researcher used a number of local, Arab and foreign sources related to the subject of the study to enrich the theoretical aspect as well as assigning the practical side and reaching the results. He also used a questionnaire form as a main tool to access information and data related to the field of study.

The sample of the study population was represented by workers in the government health sector (doctors - administrators - nurses) and also from a number of service seekers (audited patients and sleepers). The private nursing home hospital / Medical City Department established in (1982) was chosen as one of the major hospitals that depend On government funding and on self-financing at the same time, and as a non-profit service organization that provides services for different age groups and includes various medical specialties, as well as a group of professors of the financial and banking sciences with finance-related specialists, the number of community members The study (38) is an individual

Results

The questionnaire is one of the tools for collecting information about phenomena and facts associated with a particular reality. The questionnaire is based on the numbers of a set of questions through a purpose-designed form sent to a number of respondents. This part of this chapter seeks to present the results of the field study of the results of the survey and descriptive analysis of the survey axes conducted by the researchers, and analyze them using the tools of descriptive statistics (computational medium, relative weight) to estimate the compatibility of the answers of the sample members, in order to draw a picture or frame General preference of respondents and their general orientations with regard to search variables, through the Triple Lockhart scale of options, which is an ordeal measure, and the numbers that are included in the statistical program (Spss), that weights (totally agree = 3, agree = 2, do not agree = 1), through which the arithmetic medium is determined (weighted average) of the scale of determining the length of the period first and is equal to the sum of 2 by 3, as 2 represents the number of distances (from 1 to 2 first distance, and from 2 to 3

seconds) while the number (3) represents the number of choices, and when divided (2) by (3) the length of the period (class) and equals (0.66) and the distribution becomes according to For the following table:

Table 1: Likert scale paragraphs

Level	Weighted mean
I do not agree	From 1 to 1.65
Agree	From 1.66 to 2.31
Strongly agree	From 2.32 to 3

The relative weight of the arithmetic average of answers was calculated by the following equation: Relative weight= (average arithmetic) / (maximum grade).

Paragraphs that received a consensus at the level (i.e. no agreement) were deleted, and paragraphs that received a relative weight of less than (80%) were deleted. On both levels (I agree, I strongly agree) in order to have a solid and precise building vision in its construction. The questionnaire contained two axes, the first axis contained two dimensions, as the first dimension contained an survey of the methods of direct government financing, which included after deletion and amendment (12 question), while the second dimension contained an survey of the methods of indirect government financing, which included after deletion and amendment (7 questions).

While the second axis included 3 dimensions, the first dimension included an investigation of the methods of self-financing, which included after deletion and amendment (10 questions), and the second dimension included a survey on the methods of community participation in the financing of government hospitals, if it includes after deletion and amendment (12 question), and the third count included an survey on ways to address the problems of financial waste, which included after deletion and amendment (4 questions), and the following is a description of each axis and its dimensions.

First: Presentation and analysis of the results of the first axis survey in its dimensions, direct government funding, and indirect government funding:

The survey is a form through which information is collected by a set of specific questions about a phenomenon of the number of respondents, and this dimension includes a survey prepared by researchers with the aim of finding out the methods of direct government funding to be followed in government hospitals, By asking a series of questions about the sources of direct government funding, Table (2) shows the results of the first dimension survey of the first axis, which was related to direct government funding.

Table 2: Results of the Direct Government Finance Survey

No.	Direct Government Finance	Arithmetic mean	Relative weight	Result
1	Improving administrative and accounting systems in hospitals and developing them according to performance quality standards.	2.71	%90.3	S. Agree
2	Re-planning the health sector on the basis of realistic data and data in accordance with the requirements of present and future development and the labor market.	2.64	%88	S. Agree
3	Conditional funding should be directed to hospitals, by monitoring the amount of government funding according to the density of the population areas in which the hospitals are located	2.64	%88	S. Agree
4	Conditional hospital funding must be directed, by monitoring the amount of government funding in accordance with the principle of size and capacity of hospitals in terms of infrastructure and facilities and their carrying capacity.	2.57	85.6	S. Agree
5	This should be directed towards conditional hospital financing, by monitoring the amount of government funding in accordance with the principle of hospital competitiveness, in terms of service provision and taking into account performance standards in terms of degrees of achieving goals	2.29	%99.1	Agree
6	Allow the private sector to invest in the infrastructure of government hospitals.	2.14	%92.6	Agree
7	Giving the hospitals full freedom to dispose of the allocated government funds, provided that they reach the goals previously set for them.	2.14	%92.6	Agree
8	More government control over public hospital expenditures.	2.14	%92.6	Agree
9	Seeking towards conditional financing, by monitoring the amount of government funding according to the amount of hospital operating expenses.	2	%86.5	Agree
10	Work hard to reduce the bias of current	2	%86.5	Agree

	expenditures at the expense of investment expenditures.			
11	The government encourages expansion in opening non-profit hospitals in order to reduce pressure on government hospitals.	1.93	%83.5	Agree
12	The trend towards conditional hospital financing, by monitoring the amount of government funding according to the amount of its investment expenditures.	1.86	%80.5	Agree

From table (2) it is clear that the first question, which was guaranteed (improving administrative and accounting systems in hospitals and developing them according to performance quality standards) obtained the highest mathematical medium, which was 2.71, and a relative weight of 90.3%, with a result (strongly agreeable), while the 12th question and For which its content (the trend towards conditional hospital financing, by monitoring the amount of government funding according to the amount of its investment expenditures) was lower in the calculation of (1.86), with a relative weight of (80.5%) Result (Agree).

Table 3 presents the survey of the second dimension of the first axis, which concerns indirect government funding.

Table 3: Results of the indirect government finance survey

No.	indirect government finance	Arithmetic mean	Relative weight	Result
1	Improve hospital spending efficiency, and put in place effective policies and standards to offset the lack of resources	2.71	%90.3	S. Agree
2	Activating health insurance and making it compulsory for state employees in exchange for sums collected from them	2.43	%81	S. Agree
3	Improving the distribution of financial resources to restore the balance between current and investment expenditures in the health sector.	2.21	%95.6	Agree
4	Cancellation of customs and taxes on all hospital imports.	2.21	%95.6	Agree
5	Allocating part of the income of the Ministry of Endowments for hospitals	2.14	%92.6	Agree
6	Imposing fees on the profits of private commercial companies for hospitals	2.07	%89.6	Agree
7	Imposing fees on some non-consumable goods	2	%86.5	Agree

	such as cigarettes, perfumes and some luxury goods to finance hospitals.			
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It should be noted from table 3 that the first question, which was guaranteed (improving the efficiency of hospital spending, and establishing effective standards and policies to compensate for the lack of resources) achieved the highest mathematical medium of (2.71) and a relative weight of (90.3%) as a result (strongly agrees).

The seventh question, which was guaranteed (charging fees for some non-consumer goods such as cigarettes, perfumes and some luxury goods to finance hospitals) achieved the lowest mathematical average of (2) and a relative weight of (86.5%) as a result (Agree). In general, there is a general agreement between the answers presented in the survey concerning this axis.

Second: Presentation and analysis of the results of the survey of the second axis in its three dimensions: self-financing, community participation and financial waste:

A series of questions were asked to the intended experts, which concerned self-financing and sources of self-financing, which should be adopted in the financing of Iraqi government hospitals and table 4 explains the results of this dimension survey.

Table 4: Results of self-financing survey

No.	Self-financing	Arithmetic mean	Relative weight	Result
1	Using new technology to provide medical services	2.71	%90.3	Strongly Agree
2	Rehabilitation and training of all members of the medical team (pharmacists, doctors, nurses,).	2.57	%85.6	Strongly Agree
3	Increase in spending on scientific research in the health sector, due to its financial return.	2.50	%83.3	Strongly Agree
4	Establishing specialized committees to carry out further studies to identify and benefit from the experiences of developed countries in the field of health sector financing.	2.43	%81	Strongly Agree
5	Investing the human resources to associate the hospital name with the names of famous doctors working in it	2.21	%95.6	Agree
6	Depositing health sector funds in banks and linking them as a deposit in return for monthly interest, and withdrawing the hospitals	2.21	%95.6	Agree

	'financial needs from the bank in installments and as needed.			
7	Activating the model of producing hospitals, by converting their medical units into production and service units (medical services, drug products, environmental services, commercial services).	2.21	%95.6	Agree
8	Establishing suitable hotel rooms in hospitals for high fees.	2.07	%89.6	Agree
9	Establishing local centers to commercialize medical services at commercial prices to attract more service seekers who are able to pay fees for luxury medical services.	2.07	%89.6	Agree
10	Putting part of the movable and immovable funds for the development and management of hospital investments, on the basis of pure commercial investment.	2	%86.5	Agree

From table 4, we note that the first question, which was guaranteed (the use of modern technology in the provision of medical services), received the highest computational average of (2.71) and a relative weight of (90.3%) With a result (strongly agree). The tenth question, which was guaranteed (placing a certain amount of transferred and immovable funds for the development and management of hospital investments on purely commercial investment bases), received the lowest computational average of (2) and a relative weight of 86.5%). Result (Agree).

Table 5 shows the results of the second dimension of the second axis, which is concerned with community participation.

Table 5: Results of the community participation survey

No.	Community participation	Arithmetic mean	Relative weight	Result
1	Community involvement in following up on community participation funds	2.64	%88	Strongly Agree
2	Spreading awareness among members of society about the need for endowment, and that it is not limited to building mosques only, but there are many priorities for endowment work that society needs, including financing the health sector	2.57	%85.6	Strongly Agree

3	Work to deepen the concept of community participation within the community values and ethics system.	2.57	%85.6	Strongly Agree
4	Using audio-visual media to spread awareness that financing the health sector it is not only the jurisdiction of the government	2.50	%83.3	Strongly Agree
5	Develop laws and legislations that allow for a fair return on investment in the field of hospitals.	2.50	%83.3	Strongly Agree
6	Presenting and clarifying the health sector's problems to the community, and developing a synergistic popular scenario and ensuring that the community is part of the solution, not part of the problem.	2.43	%81	Strongly Agree
7	Urging business owners, doctors, and community elders to donate to hospitals in exchange for giving their names to lecture halls, library suites, scientific awards, and other incentives.	2.29	%99.1	Agree
8	Preparing a clearly defined future map that defines the roles assigned to society so that it can participate seriously in the development of hospitals.	2.29	%99.1	Agree
9	Establish a specialized department to dispose of social support funds, operating in a scientific methodology and away from bureaucratic and routine restrictions, and enjoying independence and transparency and coordinating efforts between community participation and government effort in the interest of public hospitals.	2.21	%95.6	Agree
10	Issuing bonds to support government hospitals with sums of money or subscribing to projects for building hospitals and health centers	2.21	%95.6	Agree
11	Inviting universities and scientific institutes to pay attention to the teaching of the endowment and its study in order to serve its mission and advance its role in society.	2.14	%92.6	Agree
12	Allowing localities to participate not only in financing, but also in management, supervision	2	%86.5	Agree

	and control processes. Activating the role of community participation in supervising and controlling the quality of the health sector.			
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We note from table 5 that the first question, which was guaranteed (involving the community in the follow-up of community participation funds), received the highest computational average of (2.64) and a relative weight of (88%). With a result (strongly agree), the 12th question received the lowest computational average of (2) and relative weight (86.5%) Result (AGREE). Table 6 shows the results of the latest survey on the dimension of financial waste.

Table 6: Results of the financial waste survey

No.	Financial waste	Arithmetic mean	Relative weight	The result
1	Reducing waste in the cost of medical staff by activating an effective incentive system, to ensure that the effort is consistent with the return	2.21	%95.6	agree
2	Treatment of sagging in the administrative apparatus relative to the medical staff.	2.14	%92.6	agree
3	Benefiting from local grants and loans in accordance with tight controls allowing them to benefit from them, and in a manner that does not contradict the goals of society	2.07	%89.6	agree
4	Setting strict scholarship policies outside the country, and confining them to the rare medical specialties that meet the necessary health sector development requirements.	2	%86.5	agree

We note from table 6 that the first question, which was guaranteed (reducing waste in the cost of medical staff through the activation of an effective incentive system, to ensure the voltage is compatible with the return), received the highest computational average of (2.21) and a relative weight of (95%) Result (AGREE). The fourth (last) question, which was guaranteed (the establishment of strict policies for overseas activities, limited to rare medical specialties that meet the necessary health sector development requirements.) Received the lowest mathematical average of (2) and relative weight (86.5%). Result (AGREE). In the final result, through tables (2), (3), (4), (5) and (6) it can be confirmed that there is a great consensus in

the survey's answers, i.e. that the survey achieved its goal of obtaining consensus in approving its paragraphs with a result exceeding (80%).

Applied Conclusions

1. Medical institutions are extraordinary organizations that combine the provision of hotel services with medical services distributed between preventive, therapeutic, educational, training and technical services, in addition to their needs for specialized equipment and equipment that need new means and sources of funding to achieve their objectives with The urgent need for a successful financial management to invest and exploit these funds optimally.
2. The analysis of the reality of funding for government hospitals has shown that government funding is unable to meet the needs of government medical institutions due to the lack of inputs on the one hand, and poor planning for additional sources other than government funding on the other.
3. The process of processing by planning, dividing and managing these funds is inefficient, effective and random, and the outcomes of this system are unfair distribution and access to their channels in the processing process and at the wrong time."
4. 3. The failure of administrative and accounting systems in the government health sector to develop monitor and find other outlets and sources of non-governmental financing.
5. Weak resources and lack of funding have made it difficult for the health sector to be re planned on a realistic basis in accordance with the requirements of future development, the labor market and the needs of society.
6. The failure of government legislation to allow the private sector to invest in the infrastructure of government hospitals, and weak government control over the quality of services and prices of the private health sector.
7. Failure to activate optional and compulsory health insurance for state employees in exchange for amounts that can support the issue of self-financing.
8. Poor participation of community and other ministries in supporting funding for the government health sector.
9. High rates of financial waste in the government health sector for many reasons, including the high cost of medical staff and the sagging administrative apparatus relative to the medical staff and financial corruption, in addition to the wrong policies in the scholarship outside the country for non-rare specialties.

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REFERENCES

- Al-Awda, Ibrahim Salman (1998). "An Exploratory Study of the Most Important Alternatives to Non-Governmental Resources for Saudi Universities," Unpublished Master Thesis, College of Education, King Saud University, Riyadh, Saudi Arabia.
- Al-Zaidi, Hamza Mahmoud, (2001) Bank Credit and Credit Analysis Department, Dar Al-Warraq, Amman, Jordan.
- Cassels, A. (1995). Health sector reform: key issues in less developed countries. *Journal of International development*, 7(3), 329-347.
- Driant, J. C., & Li, M. (2012). The ongoing transformation of social housing finance in France: Towards a self-financing system?. *International Journal of Housing Policy*, 12(1), 91-103.
- Hardee, K., & Smith, J. (2000). Implementing reproductive health services in an era of health sector reform. POLICY Project.
- Khadija, Lahmar, (2005) The Role of the Financial System in Financing Economic Development, The Case of Algerian Banks - Reality and Prospects, Unpublished Master Thesis, Faculty of Economic Sciences, University of Algiers, Algeria.
- Lloyd-Sherlock, P. (2005). Health sector reform in Argentina: a cautionary tale. *Social science & medicine*, 60(8), 1893-1903.
- Maytham Sahib Ajam, (2001), Finance Theory, Zahran Publishing and Distribution House, Amman, Jordan.
- Mc Donagh, M., & Goodburn, E. (2001). Maternal health and health sector reform: opportunities and challenges. *Safe motherhood strategies: a review of the evidence*.
- McKee, M., Figueras, J., & Chenet, L. (1998). Health sector reform in the former Soviet Republics of Central Asia. *The International journal of health planning and management*, 13(2), 131-147.
- Mreza, M. D., Bachay, I. R., & Flayyih, H. H. (2018). The Role Higher Education Quality in Achieving Sustainable development: Field Study from the perspective of Iraqi Universities Instructors. In The annual second conference.
- Report Bollo. J, (2001)." human capital and growth, the American economic review volar meeting of the American Economic Association.<https://www.aeaweb.org/articles>



- Ross, A. (2014). Health Sector Reform in the Kurdistan Region - Iraq, Salah Funding, Primary Care, and Patient Safety, RAND Corporation under the Patronage of the Kurdistan Regional Government and the Ministry of Planning, Ministry of Health signed [html.contribute / giving / org.rand.www](http://html.contribute/giving/org.rand.www)).
- Stephen S. Tax (1997). Designing and implementing new services “The challenges of integrating service systems”, *Journal of Retailing*, Volume 73, Issue 1, Spring.
- Sharaf, H. K., Ishak, M. R., Sapuan, S. M., Yidris, N., & Fattahi, A. (2020). Experimental and numerical investigation of the mechanical behavior of full-scale wooden cross arm in the transmission towers in terms of load-deflection test. *Journal of Materials Research and Technology*, 9(4), 7937-7946.
- Tamimi, A. H., & Flayyih, H. H. (2017). The effects of Governance on the financial reporting quality of state-owned companies. In 8th international scientific conference, college of business and administrative.