

## Current Challenges for Health system in Pakistan

Dr Filza Afaq

Health system in Pakistan has progressed slowly and steadily since creation of Pakistan. Despite this, there are still areas which are challenging and need urgent attention.

We started our journey with meagre resources in health sector and by the grace of Almighty, were able to increase number of health facilities from 292 hospitals to 1201 hospitals in public sector. From two medical colleges to 118, from 2298 physicians in 1950, to 245987 registered doctors in 2020.

Unfortunately, 11000 doctors are unemployed. It is estimated that more than 25000 are working abroad, resulting in doctor-patient ratio of 1:1200 which is not sufficient to cater for health needs of our population according to international standard. We rank 154th among 194 countries in terms of quality and accessibility of health care. More than 50% individuals do not have access to basic primary health care services.

Medical profession has always been considered sacred due to its direct and intimate interaction with human-beings. In our society in the post-partition era, doctors were considered angels in disguise as they sacrificed for the love of humanity, contributed physically, financially and spiritually to the well-being of individuals and society. However with time, things changed on the part of society and doctors both.

Doctors especially young with increasing financial burden due to inadequate monetary benefits, lack of proper service structure, were forced to think of their profession as a non-profitable business demanding self-sacrifice, with much less worldly attraction than other professions. This resulted in outflow of our young medical graduates to countries with better opportunities of learning and financial stability. Pakistan produces 32879 doctors per year, out of which 40% fresh graduates are said to leave profession, (females being a large part) or they go abroad (Brain-drain).

Health is a basic human right and its provision to public is among the important responsibilities of a state. Despite this, our health budget has been <1% of the total or around 1.

Even in public hospitals, outdoor patients have to pay for their investigations and buy the drugs themselves after discharge whereas, price of drugs has increased manifold, and people in far-fetched areas and even in periphery of large cities, are dependent on quacks for provision of health care resulting in spread of diseases like Hepatitis C, which is reported to be up till 22.72% in urban slum areas.

After the prevalence of communicable diseases and malnutrition, we are facing a new challenge of non-communicable diseases, which are increasing day by day. In a study carried in urban slums, pre-diabetes was found to be 17% in females, 64.8 % were over-weight or obese. High Cholesterol level was found in 49.3% females, which is alarming.

Increase in number of hospitals in public sector has not kept pace with increase in population, resulting in excessive burden on health professionals in government institutions which leads to medical practice which is not at par with the international standards, decrease in empathy, vigilance and patient care is seen, and unfortunately, lesser respect for doctors in society.

Individual exceptions are also present of course.

Assessment methods in Pakistan for undergraduates and post graduates are mostly summative which is unable to evaluate certain areas especially professionalism. Most of the time is spent on imparting knowledge, lesser on teaching skills and very little on incorporating ethical values.

Work-place based assessment, a structured curriculum and structured training program is highly needed in our teaching institutions.

According to a research, 40% female doctors leave their jobs or switch to part time jobs within six years of graduation, mostly due to family matters. After introduction of open merit in our admission procedure, this drop-out matters a lot. Work-life balance is more difficult to achieve for female doctors as most of the responsibilities of home and children lie with them. All over the world it is being realized that facilitating employees to achieve this balance can increase their productivity at work place. Facility of 24/7 day care should be provided to decrease dropout of female doctors. Flexible working hours, easier re-entry into service are other necessary actions to be taken.

Recent floods in Pakistan are the worst form of disaster since creation of Pakistan. Even said to be one of the worst flood related calamities in the world. More than 33 million people have been affected, many have died including young children, women. Most of them have lost shelter, safe drinking water and are left with meagre basic needs. Health facilities and schools in the affected areas are destroyed. People are living surrounded by stagnant water around them which is leading to spread of epidemics. Unfortunately, these areas are

mostly those with people who were already under-privileged and were facing malnutrition in women and children. All this is a great toll on our health system which is not possible to overcome by any single organization. Although people from all over Pakistan and outside are donating generously, even going to these areas physically, it is not possible to overcome the effects by any single organization. The rehabilitation phase will also require a lot of resources and long duration.

In this scenario, dedicated medical professionals all over the country have regained their status of healers by the will of Allah, reaching far flung areas, working day and night to save lives, to uplift their brothers and sisters physically, mentally, socially and spiritually.

Measures for epidemic control, vector control, medical aid, nutritional supplements and many other issues need attention. The affected people are also having psychological issues which have to be addressed properly in order to enable them to stand up again with hope, determination to restart their lives with the help of their country fellows.

### Suggestions:

- It is suggested that Proper service structure and job security should be provided for health professionals.
- More opportunities for doctors pursuing post-graduation is need of the time.
- Health budget should be prioritized.
- Training should be patient centered from the beginning.

- More focus should be on professional ethics.
- Approach to the patient and decision making should be emphasized.
- Skill training should be done on manikins to minimize patient harm.
- Private practice should be within ethical norms.
- There should be improvement in minimum service delivery standards in all public and private hospitals.
- There should be more emphasis on preventive aspects of diseases, which is more cost effective for people and society and can prevent a lot of disability and improve productivity.
- Facility of 24/7 day care should be provided to decrease dropout of female doctors. Flexible working hours, easier re-entry into service are other necessary actions to be taken.
- A central guidance and provision system should be urgently established for the flood affectees.
- Medical professional bodies should be autonomous and free of any political pressure.

Policy makers for health and education should be technical people.

Although much has been documented in past, it has to be implemented.

### Reference :

1. Internet
2. Self-research

