SHORT ROUNDDUP OF HEALTH INFRASTRUCTURE IN PAKISTAN

2000-2015

Source: Based on Pakistan Economic Survey 2015-2016

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Section 1: Abstract

Pakistan was unable to meet its Millennium Development Goals (MDGs) on health and “ranks 149 in 188 countries in the first global assessment of countries progress towards the UN health-related Sustainable Development Goals (SGDS).” The purpose of this paper is to analyze the current landscape of health facilities in Pakistan and the changes they have undergone over the past 15 years. Gallup Pakistan believes that for Pakistan to achieve the SDGs on health and make progress, health targets need to be set wisely. Without health infrastructure statistics, these goals cannot be achieved. Using supply side health facilities statistics, we aim to provide policy makers on health issues required empirical understanding of evolution of health ecosystem.

The salient findings from the study are as follows:

1. In the past 15 years there has been a 14% increase in the total health infrastructure.

2. A 14% decrease was seen in the maternal and child health centers. While we hypothesize that this decrease can be attributed to the increase in the Lady Health Workers (LHWs), the infant and maternal mortality rates did not reach the said targets. The maternal mortality rate in 2015 was 178 per 100,000 live births and the infant mortality rate was 66 per 1000 live births.

3. The population per bed in Pakistan is currently 1613, the ratio being large compared to other countries.

4. Thirdly it is observed that the tertiary care units in Pakistan are overburdened. In 2015 the number of hospitals in Pakistan was 1167 while the total population was 191.71 million. The number of hospitals grew by 33% over the last 15 years while the population grew by 37% which shows that an insufficiency exists.

5. The health facilities grew more under the democratic regime compared to the military regime.

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Section 2: Current Status of Health Facilities and Medical and Paramedic Personnel in Pakistan

Health Facilities: 118869 hospital beds in Pakistan

In 2015 the number of hospitals was 1167, dispensaries 5695, BHUs sub health centres 5464, maternity and child health centres 733, rural health centres 675, TB centres 339, total beds 118869 and population per bed was 1613.

Medical and Paramedic Personnel in Pakistan: Approximately 184711 registered doctors in Pakistan

In 2015, the number of registered doctors in Pakistan was 184711, dentist 16652, nurses 94766, midwives 34668 and lady health workers was 16488.
Section 3: Progress and Annual Changes in the Health Facilities

Overview: 14073 total health facilities in Pakistan

The total health facilities have increases by 14% over the last 15 years.

![Total Health Facilities Graph](image)

* Total health facilities include hospital, dispensaries, BHUs sub health centres, maternity and child health centres, rural health centres and TB centres

Progress: 14% decrease in the maternal and child health centres in the last 15 years

Keeping 2000 as the base year we measure the progress in the number of health facilities. From 2000 to 2015, there has been a 33% increase in the number hospitals, a 23% increase in the number of dispensaries, a 6% increase in the number of BHUs sub health centres, a 27% increase in the number of rural health centres and a 24% increase in the number of TB centres. While we see an increase in the number of most health facilities, the number of maternity and child health centres have observed a 14% decrease. A 27% increase has been seen in the number of total beds and the population per bed has increased by 11%.
One of the focal finding was the 14% decrease in maternal and child health centers in Pakistan from 2000 to 2015. While the decrease is striking we hypothesize that the decrease is due to the increase in the number of lady health workers (LHWs) who provide basic healthcare facilities. The number of registered LHWs has increased by 202% over the last 15 years.

Source: Pakistan Economic Survey 2015-2016
Annual Changes

Hospitals increased by 11% between 2011 and 2012

The numbers of hospitals in Pakistan have experienced an increasing trend. From 2000 to 2001, there has been a 4% increase after which the number of hospitals remained constant till 2003. From 2003 to 2011 the annual change remained insignificant, fluctuating between 0 and 2%. The most notable change in the number of hospitals was of 11% between 2011 and 2012. Between 2012 and 2015 the annual change remained small, increasing by 2% and 3%.

Source: Pakistan Economic Survey 2015-2016

Dispensaries increased by 5% between 2012 and 2013

The number of dispensaries decreased by 1% annually during the years 2000 and 2003. Between 2003 and 2010 the number increased annually by 1% with the exception of year 2006 where there was an annual increase of 2% and year 2009 where the number remained the same. The dispensaries increased by 4% between 2010 and 2011, 3% between 2011 and 2012, a significant 5% between 2012 and 2013 and 2% and 3% respectively during 2013 and 2015.
BHUs Sub Health Centres approximately decreased by 2% during 2013 and 2014

There has been a fluctuating trend in the number of basic health units annually, the numbers changing between -2 and 2% over the years.
Maternity and Child Health Centers decreased by 26% between 2011 and 2012

The number of maternity and child health centres varied across the years. The number increased by 3% during 2000 and 2001 followed by a 2% decrease in the next year. Between 2002 and 2003 there was a 5% increase while the annual change remained constant in the following years till 2010. Maternity and Child Health Centres observed a 6% decrease during the period 2010 and 2011 and a significant 26% decrease in the next year. In the period 2012 and 2013 and 2014 and 2015 there was a 9% increase, while there was a 2% decrease during 2013 and 2014.

Source: Pakistan Economic Survey 2015-2016

Rural Health Centers increased by 11% between 2011 and 2012

Rural Health Centers have experienced an increase over the years. In the initial years till 2002, there has been a 2% increase respectively, after which the change remained approximately constant till 2011, increasing by 1% to 2% alternatively. The most notable increase was of 11% during 2011 and 2012. In the following years the number increased insignificantly.
TB Centers increased by 13% between 2010 and 2011

Across the years the change in the number of TB centres varied. The most significant change occurred during 2010 and 2011 where the number of TB centres increased by 13% followed by a 6% decrease in the next year. Between 2001 and 2002 the number of TB centres increased by 5%. In the other years the change remained small, increasing by 1 to 2%. 

Source: Pakistan Economic Survey 2015-2016
Total Beds increased by 6% between 2012 and 2013

There has been a general increase in the number of total beds over the years. The greatest increase in the number of beds was of 6% during the year 2012 and 2013.

![Total Beds](image_url)

Source: Pakistan Economic Survey 2015-2016

Population per Bed increased by 7% between 2009 and 2010

Population per bed experienced fluctuating trends annually. The most notable increase was of 7% between 2009 and 2010. During the period 2000 and 2001 and 2010 and 2013 the population per bed decreased annually while in other periods the change was around 1 to 2%.

![Population per Bed](image_url)

Source: Pakistan Economic Survey 2015-2016
Section 4: Categorization of Health Facilities and Growth Trends in Past 15 years

Primary Health Facilities increased by 5% in 2013 compared to 2012

The primary health facility comprises of dispensaries and maternity and child health centres. We observe a fluctuating trend in the number of primary facilities over the years. The number of primary health units increased to some extent from 2000 to 2001, after which we see a decrease in 2002. From 2002 till 2011 the number of primary units increased every year however the percentage increase remained small. The primary units decreased in 2012 and then significantly increased in 2013, after which the increase remained small till 2015.

Source: Pakistan Economic Survey 2015-2016

Secondary Health Facilities increased at a fluctuating rate of 1% to 2% over the last 15 years

Secondary health facility comprises of BHUs sub health centres and rural health centres. From 2000 to 2013 the number of secondary health units increased at a rate fluctuating between 0 and 2% after which it decreased by 2% and then increased at a constant rate.
Tertiary Health Facility increased by 11% during the year 2011 and 2012

The tertiary health facility comprises of hospitals. Over the years the number of hospitals has increased however the percentage change greatly varied. The most significant increase in the number of hospitals was during the year 2011 and 2012.

Source: Pakistan Economic Survey 2015-2016
Specialized Health Facility increased by 13% during the year 2010 and 2011

Specialized health facility comprises of TB Centres. The percentage change in the number of specialized centres have remained constant over the years with the exception of three years; 2002 where they increased by 5% compared to 2004, 2011 where they increased by 13% compared to 2010 and 2012 where the number decreased by 6% compared to 2011.

Source: Pakistan Economic Survey 2015-2016

Beds: In 2013 total beds increased by 6% and population per bed decreased by 4%

The number of beds and the population per bed has been moving in opposite directions. For the years where the total number of bed increases, the population per bed decreases and vice versa.
SHORT RUNDUP OF
HEALTH INFRASTRUCTURE IN PAKISTAN - 2000-2015

Source: Pakistan Economic Survey 2015-2016
Section 5: Growth of Health Facilities under Different Regimes

The number of hospitals increased by 8% during the military regimes and increased by 23% in the democratic regimes. Dispensaries on the other hand increased by 3% during the military regime and by 19% in the democratic regime. The growth in the number of basic health units has been similar in the two regimes; growing at 3%. While maternity and child health centres increased by 6% in the military regime, they decreased by 19% in the democratic regime. Rural health centres increased by 6% under the military rule while they increased by 20% under the democratic rule. Under the military regime the TB centres increased by 7% while they increased by 16% in the democratic regime. Total beds increased by 10% under the military rule and by 15% in the democratic rule. The population per bed increased by 8% in the military regime and increased by 2% in the democratic regime.

Source: Pakistan Economic Survey 2015-2016

From the analysis above we conclude that health services increased under both the regimes. However the increase was greater under the democratic rule as compared to the military rule, maternity and child health centres being an exception.
Section 6: Policy Recommendations

Firstly, it is recommended that investments be made in the maternal and child healthcare. By doing so not only will we be able to reach the SDGs, but it will also have positive economic returns. A healthy and nourished mother and child will result in less spending on healthcare and resultanty worker productivity will increase in future which will translate into economic gains.

The population per bed in Pakistan is currently 1613. Comparing Pakistan to other countries we observe that this ratio is large; US has a population per bed ratio of 350, Japan 85, Brazil 500 and India 1050. In order to cater to the health needs of the growing population and achieve the health development goals it is recommended that more investment be made in hospital beds.

Although we see an overall 14% increase in the number of total health facilities, the increase is not sufficient to provide adequate health services to the population at large. Moreover the primary and secondary health units being providers of basic healthcare lack the facilities of specialized care and are unable to cope with the needs of the growing population. With approximately 40% of the population living below the poverty line it is evident that costly private health facilities are out of reach of the poor, meaning that the already overburdened health units will be further pressurized. Therefore we recommend that the share of health budget should be increased and more tertiary care units should be established to increase coverage of health facilities.

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2 (2015 Global health care outlook Common goals, competing priorities, 2015)
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