

Awaz Foundation Pakistan



Centre for Development Services

Country Position Paper on
Universal Health Coverage
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Acronyms

BHU	Basic Health Units
DHQs	District Headquarter Hospitals
EPCHs	Essential Package of Health
NCDs	Non-Communicable Diseases
NGOs	Non-Governmental Organizations
PWDs	Persons with Disabilities
PHC	Primary Health Care
RHC	Rural Health Centers
SSP	Sehat Sahulat Program
SDGs	Sustainable Development Goals
THQ	Tehsil Headquarter Hospitals
UHC	Universal Health Coverage
UHC-P	Universal Health Coverage Partnership
WHO	World Health Organization

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Executive Summary:

The Country Position Paper on Universal Health Coverage highlights the complexities and challenges within Pakistan's healthcare system. Pakistan's healthcare system is structured as a dual entity, with both public and private sectors sharing responsibilities for healthcare delivery. However, the system faces significant hurdles, including rapid population growth, uneven distribution of healthcare professionals, inadequate funding, and limited access to quality healthcare services. Rural areas, in particular, suffer from inadequate facilities, unhygienic conditions, and a lack of essential resources.

In terms of progress, Pakistan has made efforts to enhance its healthcare infrastructure, with a focus on primary, secondary, and tertiary care levels. Despite these improvements, the healthcare system faces challenges stemming from the population's high demand for services, leading to the growth of the private healthcare sector. Pakistan's health ranking remains a concern, with a Lancet Study placing it at 154th out of 195 countries in terms of healthcare quality and accessibility. This is partly attributed to low budget allocation to the health sector due to economic challenges and a rapidly growing population.

Universal Health Coverage (UHC) is recognized as a pivotal goal for Pakistan, with the potential to address these challenges. UHC aligns with various Sustainable Development Goals (SDGs) by reducing disparities in healthcare access, eliminating poverty, promoting gender equality, enhancing productivity, and fostering sustainable communities.

Despite Pakistan's extensive healthcare challenges, more than half of the population lacks access to basic healthcare services. This issue is exacerbated in rural areas, among marginalized communities, conflict-affected regions, and minority groups. Maternal and child mortality rates remain high, and breast cancer incidence is alarming, largely due to a lack of awareness and limited access to diagnostic facilities. People with Disabilities (PWDs) face exclusion and neglect, further hindering their access to healthcare services. The immunization process has improved but is still insufficient to prevent preventable diseases.

Pakistan has taken steps to advance UHC through policy frameworks at both provincial and national levels, aiming to provide equitable access to essential healthcare services. These initiatives include the National Health Vision 2016-2025, Pakistan Vision 2025, Health Sector Strategy 2015-2025, National Health Policy 2017, and provincial strategies. Health insurance policies and partnerships with non-governmental organizations (NGOs) are also being explored.

To overcome these challenges and achieve UHC, Pakistan must increase budget allocation for healthcare, expand access to remote and rural areas, establish monitoring and evaluation systems, strengthen primary healthcare, and implement comprehensive health insurance. Disease prevention, public awareness campaigns, and investment in medical education and research are also essential. Specialized healthcare centers for marginalized groups, improved maternal and child care, sexual and reproductive healthcare, and nutrition-sensitive programs are vital components of the UHC strategy.

In conclusion, Universal Health Coverage offers a transformative opportunity for Pakistan's healthcare system, fostering socio-economic development and improving the well-being of its citizens. Collaboration with international partners and collective efforts are essential to achieving UHC's vision of accessible, affordable, and quality healthcare services for all, regardless of their background or location.

Country Position Paper on Universal Health Coverage

1. Introduction

Definition and Importance of Universal Health Coverage (UHC)

According to World Health Organization, Universal Health Coverage (UHC) refers to a healthcare system where all individuals and communities can access essential health service without facing any kind of hardships. It focuses on a broad range of services such as from preventive care to curative and their treatments. The importance of UHC lies in its potential to create a healthier environment. Everyone can access the essential healthcare services, regardless of the socioeconomic status, it leads to improved health outcomes, and increases life expectancy. UHC ensures that everyone receives the care that is needed. By making the UHC a goal to achieve, countries can make significant progress towards achieving the Sustainable Development Goals (SDGs) related to health and well-being, leaving no one behind.¹

Background of Pakistan's healthcare system and challenges

The healthcare delivery system in Pakistan is a dual structure comprising both public and private sectors. According to the constitution, healthcare is primarily the responsibility of provincial governments, except in federally administered areas. Traditionally, healthcare delivery has been a shared responsibility between the federal and provincial governments, with district authorities primarily responsible for implementation.

Service delivery in Pakistan is organized through a comprehensive approach which includes preventive, primitive, curative, and rehabilitative services. The curative and rehabilitative services are provided at secondary and tertiary care facilities. While preventive and primitive services are mainly offered through different national programs.

Certain government and semi government organizations, such as the armed forces, Sui Gas, WAPDA, and Employee Social Security Institution, offer health services to their employees and their dependents through their own systems. According to World Health Organization (WHO), these collectively cover approximately 10% of the population.

Despite all the extensive health infrastructure, the healthcare delivery system in Pakistan faces several key issues. These issues include high population growth, an uneven distribution of health professionals, a deficient healthcare workforce, insufficient funding, and limited access to quality healthcare services.²

There are many other challenges faced by the Pakistani Healthcare System such as the shortage of hospitals, doctors, paramedical staff, and nurses. Another challenge is the expensive medications that people cannot afford. And due to the depreciating economy,

¹ World Health Organization (WHO).

https://www.who.int/health-topics/universal-health-coverage#tab=tab_1

² World Health Organization (WHO)

<https://www.emro.who.int/pak/programmes/service-delivery.html>

there is also a shortage of medicines and healthcare needs in the market. Other challenges include the lack of resources, for example the long distance of healthcare facilities from rural areas and the lack of transportation make it hard for the local people to access to these services. There also is a lack of human resources, lack of health education, and lack of openness.³

The hospitals in rural regions and small villages are in a very bad shape. The hospitals there are unhygienic, they lack security, and patient care, the basic needs such as supply of water, power, and fuel are in low supply, and the medicines and consumables are also frequently in low supply. Because of high corruption the ambulances are sometimes unavailable and leaving patients to fend for themselves.

The people living in cities and urban areas have access to hygienic healthcare facilities and are aware about the procedures of vaccines to prevent diseases and other healthcare problems. Whereas the people living in rural areas are not aware or given any information about the vaccines, treatments, precautions, preventions, etc. of many health issues.

Progress of Pakistan in Health

The healthcare system of Pakistan consists of Public and Private sectors. The public sector healthcare system in Pakistan is made to provide healthcare through a three-tiered delivery system and a range of public health interventions. First level is the Basic Health Units (BHU) and Rural Health Centers (RHCs) which form the bases and foundation of primary healthcare model. The secondary care level includes Tehsil Headquarter Hospitals (THQs) and District Headquarter Hospitals (DHQs). And lastly, the tertiary care level consists of teaching hospitals that offer specialized medical services.

According to the World Health Organization (WHO) the public health activities in the country have shown growth in physical infrastructure and workforce. The national health infrastructure comprises 1201 hospitals, 5518 Basic Health Units, 683 Rural Health Centers, 5802 Dispensaries, 731 Maternity and Child Health Centers, and 347 TB centers. The total availability of beds in these health facilities is estimated at 123,395. Moreover, more than 95,000 Lady Health Workers are actively providing primary healthcare services to the community through health houses.

Aside from this, because of the rising population pressure on the health sector, there has been a rise in demand for healthcare services, while the capacity of the public health facilities remains limited. The private sector has stepped in to fulfill the rising demand for medical services. And because of the rising population there has been a considerable increase in the number of private sector private hospitals, clinics, and diagnostic labs.

Majority of the private sector hospitals operate under a partnership model of organization. Along with this, the clinics have emerged as major providers of patient care across Pakistan, with majority of these clinics being operated as sole proprietorships. This has helped to meet

³ Ali, A., Ahmad, F., Danish, S. H., Zahid, N., Israr, N., & Farooq, S. (2021). Healthcare System of Pakistan: Strengths and Weaknesses. *Advances in Research*, 22(2), 45–49. <https://doi.org/10.9734/air/2021/v22i230297>

the healthcare needs of the population and take this burden off the public healthcare system.⁴

According to the Lancet Study, Pakistan ranks 154th among the 195 countries in terms of quality and accessibility of healthcare. According to this study, Pakistan has improved in health sector since 1990. There is an improvement in the quality of health, but at a very slow rate.⁵ The constant low and unsatisfactory performance of the health sector is due to the low budget allocation to the health sector by the government. This low budget allocation to health sector is due to the external economic and non-economic challenges faced by Pakistan. These challenges include natural calamities, institutional, administrative and political instabilities, lack of capacity and willingness to carry out large scale projects, weak commitments, and global recessions etc.⁶ Aside from the improvements in the essential health services for child mortality and nutrition over time, the state of health sector of Pakistan is very slow and bleak. The overpopulation and still rising population of Pakistan makes it even harder to focus on health sector more.

According to the United Nations (UN) World Population Prospects, Pakistan has become the fifth most populous country in the world, with a current population around 231.4 million. Projections indicate that Pakistan's population is expected to reach 262.96 million by the year 2030 and is further anticipated to increase to 338.01 million by the year 2050. These projections highlight the significant demographic growth and the challenges it may pose for the country in terms of healthcare, infrastructure, and resource management.⁷ It is a source of great concern and is an indication of the lack of long-term goals and visions in public health policies.⁸

2. Link of UHC with SDGs

Universal Health Coverage (UHC) is a comprehensive approach to healthcare that ensures all people can access essential medical services without facing financial hardships. It is closely connected to the Sustainable Development Goals (SDGs), a set of global objectives aimed at creating a better and

⁴ World Health Organization (WHO)

<https://www.emro.who.int/pak/programmes/service-delivery.html>

⁵ Desk, W. (2018). Lancet study places Pakistan on 154th position in healthcare. Daily Times.

<https://dailytimes.com.pk/244079/lancet-study-places-pakistan-on-154th-position-in-healthcare/>

⁶ Country Cooperation Strategy at a glance. World Health Organization.

<https://apps.who.int/iris/rest/bitstreams/608185/retrieve#:~:text=HEALTH%20SITUATION,geographical%20area%20of%20malaria%20endemicity.>

⁷ UNODC

<https://www.unodc.org/pakistan/en/country-profile-pakistan.html>

⁸ Zaidi SA, Bigdeli M, Langlois EV, *et al* Health systems changes after decentralisation: progress, challenges and dynamics in Pakistan *BMJ Global Health* 2019;**4**: e001013. <https://gh.bmj.com/content/4/1/e001013>

more sustainable world UHC directly aligns with Goal 3 of the SDGs, which focuses on promoting good health and well-being for everyone. By providing access to quality healthcare services, UHC plays a vital role in improving health outcomes and reducing disparities in healthcare access among different populations.⁹

Moreover, UHC indirectly contributes to other SDGs. For example, by protecting individuals and families from high healthcare costs, UHC supports Goal 1 of eliminating poverty. By addressing the specific health needs of women and girls, UHC contributes to Goal 5 of achieving gender equality. Additionally, UHC promotes a healthier workforce, leading to increased productivity and economic growth, supporting Goal 8. UHC's role in building sustainable communities is aligned with Goal 11, as it enhances the health and well-being of urban populations. Furthermore, through partnerships among governments, organizations, and stakeholders, UHC exemplifies Goal 17's emphasis on cooperation and collaboration to achieve the SDGs.

3. Current Health Status in Pakistan

Who Lack Healthcare Facilities?

The World Health Organization (WHO) estimates that more than half of Pakistan's population lacks access to basic healthcare services. This is due to the high morbidity rates among the children, pregnant women, and elderly people. Along with this, there are few hospitals and clinics in rural areas which mostly lack significant medical tools and resources. Firstly, the rural areas of Pakistan face a shortage of healthcare facilities and services. There is also a lack of proper infrastructure such as roads and transportations and the local people have limited or no access to the hospitals or clinics. Secondly, the marginalized and underprivileged communities such as people living in slumps, informal settlements and remote areas often lack quality health facilities and services. These marginalized people often face financial barriers, discrimination, and social inequalities, which restrict their access to the healthcare services. Thirdly, the regions and people affected by the conflict and insecurity may face difficulties in accessing the healthcare facilities and medical services. Most of the remote and tribal areas in Pakistan are geographically isolated which makes it difficult to access the healthcare facilities and there is limited availability of healthcare professionals and supplies, which contribute to the lack of health services in these areas. Moreover, the minority groups in Pakistan such as, religious, and ethnic minorities may face discrimination and a limited access to the healthcare facilities. The lack of financial resources can prevent these marginalized and minority groups from seeking timely and necessary medical attention. Similarly, the women and children of these marginalized and minority groups, underprivileged communities and in rural areas, may face some challenges in accessing healthcare. And because of the inadequate maternal and child health services, there

⁹ Neelson. S. (2023). Universal Health Coverage as a Sustainable Development Goal. The World Bank. [https://datatopics.worldbank.org/world-development-indicators/stories/universal-health-coverage-as-a-sustainable-development-goal.html#:~:text=Beyond%20health%20and%20wellbeing%2C%20UHC,on%20health%20\(target%203.8\).](https://datatopics.worldbank.org/world-development-indicators/stories/universal-health-coverage-as-a-sustainable-development-goal.html#:~:text=Beyond%20health%20and%20wellbeing%2C%20UHC,on%20health%20(target%203.8).)

is a higher maternal and child mortality rates. Lastly, the patients with special health needs and PWDs may have to travel long distances to access the required healthcare facilities and may face discrimination and specific challenges, which prevents them from getting the healthcare services that they need. Efforts have been made by the Pakistani government and other different organizations to improve the health accessibility across the country. However, commitment and targeted interventions is needed to reach those who lack health facilities and services, which is hard due to the challenges faced by the healthcare facilities.

Healthcare Status of Urban areas

Urban areas have a much better access to healthcare facilities and services compared to the rural areas. The overall situation of the healthcare services in the urban areas is better than the healthcare status of rural areas in Pakistan. However, there are some significant disparities in healthcare provision in urban areas, specifically between affluent and underprivileged neighborhoods.

The healthcare facilities such as hospitals, clinics, and medical centers in urban areas are in a higher concentration compared to the rural areas. The healthcare professionals such as doctors, nurses and specialists are attracted to the urban centers which is why the medical talent allows for better medical care and access to quality healthcare. Along with this, the private healthcare sector in urban areas offer premium medical services and facilities but this can also result in higher healthcare costs for patients. Moreover, the urban areas have better healthcare infrastructure, road networks, transportation systems, and access to essential utilities compared to the status of infrastructure of rural areas in Pakistan.

Despite all the better healthcare facilities in urban areas, there are some disparities in access to healthcare services. Such as, low-income neighborhoods and underprivileged areas may face difficulties in accessing the quality healthcare due to financial constraints and inadequate healthcare facilities. There is also a chance that the healthcare facilities may be overburdened and leading to longer waiting times and compromised patient care due to the highly populated urban centers. Furthermore, due to the population density and environmental issues the urban areas can be more susceptible to disease outbreaks. And controlling infectious diseases and ensuring environmental healthcare becomes very important in such setting.¹⁰

Healthcare Status of Rural and Remote Areas

The healthcare in rural areas lacks quality, accessibility, and affordability as well. One reason for the challenge of accessibility is the large distances in rural areas compared to in urban areas, which then also involves the transportation costs, medicines costs, and high expense of doctors, communication difficulties, and the transportation time for patients. The

¹⁰ Azad. A. (2023). Urban Healthcare. DAWN.
<https://www.dawn.com/news/1737185>

infrastructure of the hospitals and other health clinics are less economical in rural areas.¹¹ These places are unhygienic, with little to no availability of essential utilities and tools such as power, water, medicines, and proper beds for patients etc. Moreover, the well-qualified medical doctors and students prefer to stay study and stay in urban areas because of the availability of greater opportunities in career and financial and social promotions in urban areas compared to rural areas. The medical facilities and the staff are scarce in rural areas. And so, when special and advanced medical treatment is necessary, or when there is a death and life situation the villagers travel long distances to get to the required treatment. The solution to these problems can be found in figuring out different techniques for ensuring better health and improved standard of living.¹²

Health Situation of Vulnerable Groups

Women

Half of the population of Pakistan consists of women. Due to the culture in Pakistan, these women are kept backwards, and they are unable to participate in various fields. Many women are deprived from quality health services which are mainly caused due to poverty, unavailability of education and awareness, lack of food, gender inequality, and the violence on women. Many women die due to maternal mortality, which refers to the death of women due to complications in pregnancy or during childbirth. According to the 2019 World Population Report, 178 women out of every 100,000 die while giving birth. This is mainly due to limited access to quality healthcare services, high rates of poverty, poor education, and cultural barriers.¹³

Moreover, Pakistan has the highest rate of breast cancer in all of Asia. According to the Pakistan Medical Association, around 83,000 cases of breast cancer are reported every year, and approximately 40,000 women die from breast cancer in Pakistan. Numerous factors contribute to the elevated incidence of breast cancer in Pakistan, with key factors being the lack of awareness, limited access to diagnostic facilities, and cultural barriers. A significant portion of women remain unaware of the early signs and symptoms of breast cancer, often leading to late-stage diagnosis. Additionally, the absence of dedicated breast cancer facilities in hospitals further hinders women's access to timely and specialized treatment. Along with this, the cultural norms, and societal taboos around the topic of breast cancer exacerbate the issue. Women may feel hesitant or reluctant to seek medical help due to the stigma

¹¹ Country Cooperation Strategy at a glance. World Health Organization. <https://apps.who.int/iris/rest/bitstreams/608185/retrieve#:~:text=HEALTH%20SITUATION,geographical%20area%20of%20malaria%20endemicity>.

¹² (2013). Healthcare in Rural Areas. DAWN. <https://www.dawn.com/news/788900/healthcare-in-rural-areas>

¹³ Samo, S. (2023). Status of Women's Health in Pakistan. The Authentic Post. <https://theauthenticpost.com/status-of-womens-health-in-pakistan/>

associated with the disease in Pakistani culture. Addressing these multifaceted challenges is crucial to improving women's healthcare in the country.¹⁴¹⁵

PWDs

The overall number of People With Disabilities PWDs vary between 3.3 million and 27 million. PWDs face exclusion, discrimination, and neglect. They are unable to participate and be a part of any activity in the society. Similarly, they face many difficulties in education, economic participation, availability of clinical resources and such. In developing countries, such as Pakistan, the health sector is not the first priority, and the governments allocate less budget for the healthcare.¹⁶ And because of this most people with disabilities depend on their families for treatment. And from these PWDs, about 62% of men and 87% of women are dependent on their families and relatives. In Pakistan, persons with disabilities (PWDs) face significant challenges in accessing health services due to barriers in the environment. These barriers include transportation, the infrastructure and condition of buildings, waiting areas, washrooms, examination tables, and beds. As a result, this marginalized section of society lacks adequate access to reproductive health services and has limited knowledge about the preventive measures for dangerous diseases and illness such as tuberculosis, hepatitis, and HIV/AIDS.¹⁷

Children

About 25% of deaths of children can be prevented through vaccinations, and more can be saved through quality maternal and newborn healthcare. The immunization process in Pakistan has improved since 2012-2013 from 54% to 66% in 2017-2018. However, still every year about 91,000 children in Pakistan die from pneumonia and 53,300 children die from diarrhea. And there still is a long process to go through to get this situation better. The factors that impact and cause the child health inequalities are poverty, lack of knowledge,

¹⁴ Mahmud, K. Farooq, H. (2020). HEALTH STATUS OF WOMEN IN PAKISTAN: A RESEARCH STUDY FROM SAIDPUR VILLAGE OF FEDERAL CAPITAL AREA OF ISLAMABAD, PAKISTAN. *Gomal Journal of Medical Sciences*. Vol 18, No 4. <https://www.gjms.com.pk/index.php/journal/article/view/911>

¹⁵ UN Women. <https://data.unwomen.org/country/pakistan>

¹⁶ Moving from the Margins mainstreaming Persons with Disabilities in Pakistan. British Council. https://www.britishcouncil.pk/sites/default/files/mainstreaming_persons_with_disabilities_0.pdf

¹⁷ Hussain, S., Alam, A., & Ullah, S. (2022). Challenges to Persons with Disabilities in Pakistan: A Review of Literature. *Journal of Social Sciences Review*, 2(3), 35-42. <https://ojs.jssr.org.pk/index.php/jssr/article/download/46/43>

illiteracy, awareness about the importance of child healthcare, inadequate provision of health services, and poor infrastructure.¹⁸

Elderly

Most of the elderly people have illness such as diabetes, heart diseases, kidney problems, and hypertension etc. The elderly people are also vulnerable to different disabilities, nutritional challenges, and depression etc. And because of this, the availability of a Care Giver is a must for them. The healthcare system in Pakistan is very weak and neglects the elderly population. There is a lack of residential and rehabilitation facilities for the older people, which is why it is a great challenge for the weak infrastructure of health system to deal with these problems. The healthcare providers are not experts in their training to deal with healthcare issues with the elderly people. These caregivers are not fully trained about how they should deal with different elderly patients with different health problems. There is a pressing need for comprehensive training programs and courses aimed at enhancing the knowledge and skills of healthcare providers to effectively address the common health issues among the elderly population. The primary healthcare system, being vital component of the overall healthcare system, requires strengthening to cater to a diverse range of curatives, preventive, and rehabilitative services tailored specifically for disabled elderly individuals. By investing in such training and strengthening measures better healthcare outcomes can be ensured.¹⁹

4. Inclusive and Equitable Healthcare for Vulnerable Populations

Ensuring healthcare services for marginalized and vulnerable communities

Pakistan has made significant strides in advancing towards SDG 3 by setting clear targets and timelines. Recent legislative initiatives have been put in place to ensure accessible and affordable healthcare coverage for the entire population, alongside efforts to enhance the monitoring system for healthcare policies, ensuring their effectiveness. To support these endeavors, there has been an increase in the federal budget allocation for healthcare during the 2020-2021 period, although the proportion of health expenditure as a percentage of the overall budget remains a challenge.

In 2018, a landmark development occurred when the Parliament passed the transgender person Protection of Rights Act, which provides essential protection to transgender individuals, recognizing them as a particularly vulnerable group at risk of marginalization. It is considered one of the most progressive legal instruments globally, as it ensures transgender individuals' legal identity registration, granting them access to vital healthcare

¹⁸UNICEF.

<https://www.unicef.org/pakistan/health#:~:text=Each%20year%20about%2091%2C000%20children,maternal%20and%20newborn%20health%20care.>

¹⁹ Qidwai, W., Ashfaq, T. (2011). Elderly patients and their health in Pakistan: current status, issues, challenges, and opportunities. *Journal of Liaquat University of Medical and Health Sciences*, 10(3).
http://ecommons.aku.edu/pakistan_fhs_mc_fam_med/68

services and psychological support. These positive steps show Pakistan's commitment to improving healthcare access and inclusivity for all its citizens, including vulnerable groups, and signify significant progress towards achieving SDG 3 and fostering a more equitable society.²⁰

5. Policy Frameworks to support UHC

Pakistan has made efforts to advance Universal Health Coverage (UHC) through policy frameworks at both the provincial and national levels. These frameworks aim to provide equitable access to essential healthcare services for all citizens. Here are some of the key policy initiatives supporting UHC in Pakistan.^{21,22}

- I. National Health Vision 2016-2025: This policy document outlines the vision for health in Pakistan and sets the strategic direction for health sector development. It emphasizes improving access to quality healthcare services, especially for vulnerable populations, and aims to strengthen primary healthcare services.
- II. Pakistan Vision 2025: This is a national development plan that includes health as one of its priority areas. It focuses on achieving UHC by increasing financial protection, improving health service coverage, and enhancing the quality of healthcare services.
- III. Health Sector Strategy 2015-2025: This policy framework lays out the strategic priorities and interventions for the health sector in Pakistan. It aims to improve health outcomes, reduce health disparities, and enhance the responsiveness of the health system to people's needs.
- IV. National Health Policy 2017: This policy framework outlines the government's commitment to achieving UHC and outlines strategies to improve health services, ensure financial protection, and promote health equity.
- V. Punjab Health Sector Strategy 2018-2023: Punjab is the largest province in Pakistan and has its health sector strategy that aligns with the national goals. This framework focuses on improving health services delivery, strengthening primary healthcare, and enhancing health governance and management.

²⁰ (2022). Pakistan improves access to healthcare for vulnerable and marginalized communities. Inter Parliamentary Union. <https://www.ipu.org/news/case-studies/2022-07/pakistan-improves-access-healthcare-vulnerable-and-marginalized-communities>

²¹ Balakrishnan. S, Caffrey. M. (2022). Policy Brief for Pakistan. UNICEF. <https://www.unicef.org/rosa/media/18181/file/Pakistan%20Country%20Profile.pdf>

²² Health Policy Khyber Pakhtunkhwa. Department of Health Khyber Pakhtunkhwa. <https://healthkp.gov.pk/public/uploads/downloads-41.pdf>

- VI. Sindh Health Sector Strategy 2020-2025: Similarly, the province of Sindh has its health sector strategy that aims to improve access to quality healthcare services, especially in underserved areas, and ensure financial risk protection for the population.
- VII. Khyber Pakhtunkhwa Health Sector Strategy 2019-2023: The province of Khyber Pakhtunkhwa has its health sector strategy that emphasizes the strengthening of primary healthcare services, improving healthcare infrastructure, and enhancing governance and accountability in the health sector.
- VIII. Balochistan Health Sector Strategy 2016-2020: Balochistan, the largest province in terms of land area, has its health sector strategy that focuses on improving healthcare service delivery, enhancing health workforce capacity, and ensuring the availability of essential medicines.
- IX. Health Insurance Policy: Pakistan has been exploring health insurance as a means to achieve UHC. Various pilot projects have been initiated in different provinces to expand health insurance coverage and provide financial protection to citizens.
- X. Ehsaas Program: Ehsaas is a comprehensive social protection program launched by the government of Pakistan. It includes initiatives to improve access to healthcare services for vulnerable populations through health insurance and financial support for medical expenses.

6. Role of other sectors in achieving UHC in Pakistan

The role of different stakeholders in achieving Universal Health Coverage (UHC) in Pakistan is vital for creating an effective and equitable healthcare system. Here's how each group contributes to UHC:

- I. Civil society organizations, including NGOs and community groups, play a crucial role in advocating for UHC and promoting health awareness. They mobilize communities, raise public awareness about health issues, and work to ensure that vulnerable populations have access to healthcare services.
- II. Academic institutions and researchers contribute by conducting studies and research on health systems, public health, and healthcare policies. Their evidence-based findings help policymakers make informed decisions and improve the overall effectiveness of the healthcare system.
- III. The private sector, including private healthcare providers and pharmaceutical companies, can complement public healthcare services by offering additional medical facilities and services. They contribute to expanding healthcare access, particularly in areas with limited public resources.
- IV. International organizations, donor countries, and development partners offer technical expertise, financial support, and capacity-building initiatives to strengthen the healthcare

system in Pakistan. They collaborate with the government to implement UHC-related programs and projects.

- V. The media plays a critical role in disseminating health-related information and raising awareness about health issues and UHC. Through news coverage and public service announcements, the media educates the public about preventive measures, health campaigns, and government health policies.
- VI. The government has a central role in achieving UHC by formulating and implementing policies that prioritize health services for all citizens. They must allocate sufficient resources, develop health infrastructure, and ensure affordable access to healthcare services.
- VII. Doctors, nurses, and other healthcare workers are essential for delivering quality healthcare services to the population. They provide medical treatment, preventive care, and health education to promote well-being.
- VIII. Communities play a vital role in UHC by participating in health programs, understanding health information, and seeking healthcare when needed. Encouraging community involvement and participation helps in tailoring health services to local needs.
- IX. Monitoring and evaluating the effectiveness of UHC initiatives are crucial to identify gaps and make improvements. Stakeholders can work together to assess the impact of UHC programs and modify strategies based on feedback.
- X. Advocacy groups and think tanks play a role in influencing policy decisions related to UHC. They advocate for increased healthcare funding, equitable access to services, and better health outcomes.

7. Covid 19

Public and Community Response

When the news about COVID-19 first emerged, there was a varied response from the community. While some people paid attention to the information and took the virus seriously, others were skeptical and considered it to be fake or a part of some propaganda. This skepticism and misinformation about the virus spread not only within local communities but also worldwide. This spread of false information, posed significant challenges for governments and health agencies trying to tackle the pandemic. Efforts to control the spread of the virus, such as implementing lockdowns, social distancing, and promoting mask-wearing, faced resistance from some individuals who believed that the virus was not a real threat. This damaged the effectiveness of measures taken to prevent the spread of the virus and protect public health. The government had to intensify the public awareness campaigns to provide accurate information about the COVID-19, its symptoms, preventive measures, and the importance of following public health guidelines. The government and health agencies also collaborated with the media and social media platforms to ensure that credible information about the virus was available. Overall, addressing the

spread of the misinformation about the COVID-19 was crucial in gaining public trust, and enabling strategies to control the spread of the pandemic.²³

Government's Initiatives to Tackle the Pandemic

Some initiatives that were taken by the government of Pakistan to handle the pandemic were:²⁴

- Immediate Response to Contain Disease Spread:

When COVID-19 emerged in Pakistan, the government took quick actions to control its spread. They set up emergency operation centers and traced how the disease was spreading. This helped them identify areas where the virus was spreading and isolate people who were in close contact with COVID-19 patients. They also closely monitored people who had recently traveled from other countries, as neighboring countries had many cases.

- Containment Measures:

To control the virus from entering the country, the government decided to control its borders. Many Pakistani students and pilgrims were coming from China, Iran, and Europe, so the government set up quarantine houses near borders and airports. This allowed them to isolate people coming into Pakistan for a short time to check if they were infected before they moved freely in the community.

- Quarantine Houses:

After controlling the borders, the government needed to deal with people stuck at the borders. They quarantined these individuals at specific locations and tested them or waited for two weeks to ensure they were not infected before they could go home. This was a big task for the government, as many people arrived from Iran and were housed in quarantine shelters.

- Country-Wide Lockdown:

To limit the virus's spread within the country, the government-imposed lockdowns in major cities. They closed public spaces like parks, schools, and offices and allowed only essential shops like grocery stores and pharmacies to remain open. This was a tough decision, and they also closed prayers at mosques, including Friday prayers, which faced opposition.

²³ Akhtar H, Afridi M, Akhtar S, Ahmad H, Ali S, Khalid S, Awan SM, Jahangiri S, Khader YS. Pakistan's Response to COVID-19: Overcoming National and International Hypes to Fight the Pandemic. *JMIR Public Health Surveill.* 2021 May 19;7(5):e28517. doi: 10.2196/28517. PMID: 33877048; PMCID: PMC8136406.

²⁴ Akhtar H, Afridi M, Akhtar S, Ahmad H, Ali S, Khalid S, Awan SM, Jahangiri S, Khader YS. Pakistan's Response to COVID-19: Overcoming National and International Hypes to Fight the Pandemic. *JMIR Public Health Surveill.* 2021 May 19;7(5):e28517. doi: 10.2196/28517. PMID: 33877048; PMCID: PMC8136406.

- Cordoning Off Areas:

When COVID-19 cases started increasing in certain areas, the government sealed off those places to prevent the virus from spreading further. This helped control the infection and allowed authorities to trace contacts and conduct more testing.

- Testing and Contact Tracing:

Initially, testing capacity in Pakistan was limited, so they focused on testing priority cases and relied on quarantine and isolation strategies. Contact tracing, however, proved effective in limiting the spread. Gradually, testing capacity increased, and more tests were conducted daily to understand the virus's spread.

- Awareness Campaigns and SOPs:

The government launched awareness campaigns to inform the public about COVID-19 risks and symptoms. They also created guidelines for the public to follow in public areas, like wearing masks, social distancing, and maintaining hygiene. Those who didn't follow the guidelines faced disciplinary action.

- Economic Measures:

To support people facing economic hardships during the pandemic, the government launched relief schemes and cash assistance programs.

- Production of Ventilators:

To address the shortage of ventilators, the National Radio and Telecommunication Corporation produced its first locally made ventilators.

Through these measures and actions, Pakistan attempted to control the spread of COVID-19 and manage its impact on the healthcare system and the economy.

Lessons

During the COVID-19 pandemic, Pakistan learned several important lessons that have shaped its response to the crisis and may inform future preparedness for similar situations. By learning from these experiences, Pakistan aims to strengthen its healthcare system, improve preparedness for future health crises, and enhance its capacity to protect the health and well-being of its citizens.²⁵

²⁵ Akhtar H, Afridi M, Akhtar S, Ahmad H, Ali S, Khalid S, Awan SM, Jahangiri S, Khader YS. Pakistan's Response to COVID-19: Overcoming National and International Hypes to Fight the Pandemic. *JMIR Public Health Surveill.* 2021 May 19;7(5):e28517. doi: 10.2196/28517. PMID: 33877048; PMCID: PMC8136406.

First, the pandemic highlighted the significance of being prepared for public health emergencies. Pakistan realized the need to have a robust and well-coordinated healthcare system that can rapidly respond to crises, including having adequate medical supplies, equipment, and healthcare professionals.

The pandemic also exposed the weaknesses in Pakistan's healthcare infrastructure, particularly in terms of capacity and accessibility. The country learned the importance of investing in healthcare facilities, improving medical services, and expanding healthcare coverage, especially in remote and underserved areas. The availability of accurate and real-time data proved crucial in decision-making during the pandemic. Pakistan understood the need for improved data management systems and information sharing to monitor the situation, track infections, and formulate effective strategies.

Second, the pandemic necessitated cooperation between various sectors and stakeholders. Pakistan realized the importance of coordinated efforts between the government, healthcare institutions, NGOs, and the private sector to effectively combat the spread of the virus. The pandemic demonstrated the importance of global cooperation in tackling a worldwide health crisis. Pakistan learned the value of collaborating with international organizations and other countries to access resources, knowledge, and expertise.

Third, the pandemic also underscored the importance of emphasizing preventive measures, such as wearing masks, practicing good hand hygiene, and maintaining social distancing. Pakistan learned that prioritizing public health and promoting awareness are key to limiting the spread of infectious diseases. The pandemic highlighted existing disparities in healthcare access, with vulnerable populations facing greater challenges. Pakistan recognized the need to address these disparities to ensure that healthcare services are accessible to all, regardless of socioeconomic status or geographic location.

The rapidly evolving nature of the pandemic required Pakistan to be adaptable and flexible in its response. The country learned to adjust its strategies and policies based on changing circumstances and new information about the virus.

Moreover, the pandemic showed how clear and effective communication with the public is vital during a health crisis. Pakistan realized the importance of transparent communication to build trust, disseminate accurate information, and encourage compliance with public health measures. The pandemic had significant economic implications, with many people facing financial hardships. Pakistan learned the importance of providing social support and implementing economic measures to assist those affected by the crisis.

Lastly, the pandemic emphasized the importance of research and innovation in developing vaccines, treatments, and diagnostic tools. Pakistan learned the significance of investing in research and supporting scientific advancements to combat health challenges effectively.

8. Sehat Sahulat Program (SSP)

The Government of Pakistan formed the Sehat Sahulat Program to ensure that the underprivileged citizens in the country can also access the medical healthcare. It is a social health protection initiative that ensures that the country's most vulnerable population can get the financial support and can easily access the quality healthcare services.²⁶ This program targets the individuals that are living below the poverty lines and the marginalized communities, including women, children, the elderly, and PWDs. Under this program the eligible people receive a health insurance card that ensures them a free medical treatment at public and private healthcare. This insurance also covers the cost of inpatient care, surgeries, diagnostic tests, and emergency treatments. More of these programs and packages are needed for the improvement of healthcare system in Pakistan.²⁷

8. Essential Package of Health (EPCHS)

The Essential Package of Health Services (EPHS) in Pakistan is a comprehensive set of healthcare services aimed at achieving Universal Health Coverage (UHC). It encompasses a range of essential healthcare interventions that are intended to be accessible to all citizens, irrespective of their ability to pay. The EPHS focuses on strengthening primary healthcare services as the foundation of the health system, emphasizing preventive measures, maternal and child health, family planning, and immunizations. It ensures the availability and affordability of essential medicines and provides access to emergency care, including ambulance services and trauma care. Addressing the burden of infectious diseases and non-communicable diseases (NCDs) is a crucial aspect of the package, along with mental health services. Reproductive health services, health promotion, education, and rehabilitation services are also included. The EPHS is regularly updated to adapt to evolving health needs and aims to provide financial protection to individuals and families from high healthcare costs. Its implementation may vary at the provincial level, aligning with regional priorities and resources.²⁸

10. Pakistan's Commitment to Universal Health Coverage

- **Universal Health Coverage Partnership (UHC-P)**

As stated by the World Health Organization, Pakistan has a population of more than 212 million people. The challenges that are faced by the health system are social, economic, political, and

²⁶ Sehat Sahulat Programme. <https://www.pmhealthprogram.gov.pk/about-us/>

²⁷ Hasan SS, Mustafa ZU, Kow CS, Merchant HA. "Sehat Sahulat Program": A Leap into the Universal Health Coverage in Pakistan. *Int J Environ Res Public Health*. 2022 Jun 7;19(12):6998. doi: 10.3390/ijerph19126998. PMID: 35742247; PMCID: PMC9223125. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC9223125/>

²⁸Essential Package of Health Services. World Health Organization (WHO). <https://phkh.nhsrhc.pk/sites/default/files/2020-10/Essential%20Package%20of%20Health%20Services%20with%20Localized%20Evidence%20Pakistan%20WHO%202020.pdf>

cross-border which constantly causes a disturbance in the health system. Since 2018, the UHC Partnership (UHC-P) has been actively engaged in enhancing health service delivery and promoting performance accountability in Pakistan. One of the key initiatives has been the development of national quality policy for health services, aimed at improving the overall quality of healthcare provided. The UHC-P designed plans to address the workforce challenges and ensure a more equitable and efficient distribution of healthcare professionals across different regions. The UHC-P will continue its dedicated support to Pakistan focusing on crucial areas that directly impact the healthcare system. One of its primary objectives is to enhance resource allocation at various levels of healthcare, ensuring that funding is equally distributed to meet the diverse healthcare needs of the population. Along with this, the UHC-P is actively involved in assisting Pakistan in developing a health financing strategy. This strategy aims to establish sustainable funding mechanisms that will increase the availability of resources and enhance financial protection for the citizens that are seeking healthcare services. UHC-P is also working diligently to promote and strengthen primary healthcare. The focus on primary healthcare is essential to building a strong foundation for the overall health system. Overall, the UHC-P remains committed to supporting Pakistan's efforts in achieving UHC. The UHC-P aims to bring meaningful improvements in healthcare accessibility, quality, and financial protection for all citizens.²⁹

Ongoing collaborations with international organizations to support UHC implementation.

All UN partner agencies have demonstrated their support for the Government of Pakistan in the implementation of the UHC Benefit Package. In a joint statement, they have renewed their commitment to fostering an approach to Primary Healthcare (PHC) for UHC, in alignment with the SDG-3 Global Action Plan and Regional Health Alliance. The UN partner agencies have collectively pledged to collaborate closely to establish a sustainable PHC model.

This model is based on three pillars: Primary care and public health functions as a base of integrated health services, multi-sectoral policy and action, and Empowered people and communities.

The key priorities of the federal and provincial governments of Pakistan are to strengthen Primary Healthcare (PHC) and the health financing reforms. This is also the strategic priority in the National Health Vision 2016-2025 and provincial health strategies. The government of Pakistan made 6 key reforms for the implementation of the UHC Benefit Package. These reforms are made for effective and efficient delivery. As per World Health Organization (WHO), the reforms include:³⁰

I. District governance strengthening.

²⁹ Universal Health Coverage Partnership. World Health Organization (WHO). <https://extranet.who.int/uhcpartnership/country-profile/pakistan>

³⁰ UN partner agencies reaffirm support to Government of Pakistan in implementing UHC Benefit Package. World Health Organization (WHO). <https://www.emro.who.int/pak/pakistan-news/un-partner-agencies-reaffirm-support-to-government-of-pakistan-in-implementing-uhc-benefit-package.html>

- II. Achieving a progressive increase and diversification of UHC financing, prioritizing the community and primary levels.
- III. Strengthening human resources for health.
- IV. Ensuring the supply of essential commodities.
- V. Ensuring equitable and resilient access to health services; and
- VI. Improving health care quality in both the public and private sectors, by implementing accountability and performance frameworks and strengthening the role of the health commission.

11. Challenges and Obstacles in achieving UHC

Major obstacles and challenges that Pakistan faces in achieving UHC

The major obstacles and challenges faced by Pakistan makes it hard to achieve the Universal Health Coverage (UHC). Some of these challenges include:

- I. Pakistan's healthcare system depends on the funding of the government, and the allocated budget for healthcare is often limited. Due to this, there is insufficient funding to cover the rising costs of medical equipment and essential medicines. These financial constraints make it difficult to expand the healthcare services and negatively impacts the quality of care.
- II. With limited health insurance coverage and government subsidies, a significant portion of healthcare expenses is made directly by individuals and families. This high out-of-pocket spending can push people into poverty, as medical costs can be expensive low-income individuals and those living in rural areas. Many people may avoid seeking healthcare due to the fear of financial burden, leading to delayed or inadequate treatment.
- III. Pakistan's healthcare infrastructure faces multiple challenges, particularly in rural and underserved areas. There is a shortage of hospitals, clinics, and medical centers, resulting in limited access to healthcare services for a significant portion of the population. Additionally, existing healthcare facilities often lack proper equipment and resources, damaging the provision of quality healthcare.
- IV. Pakistan faces a shortage of trained healthcare professionals, including doctors, nurses, and other medical staff. Many healthcare professionals choose to work in urban areas or move abroad for better opportunities, leading to an imbalance in the distribution of healthcare services across the country. The shortage of healthcare professionals contributes to overworked medical staff and compromises the quality of care provided.
 - I. Pakistan's diverse geography presents challenges in delivering healthcare services to remote and hard-to-reach areas, such as mountainous regions and tribal territories. The lack of proper transportation infrastructure and geographic barriers make it difficult for healthcare providers to reach these communities, resulting in limited access to medical care. The limited to no healthcare facilities in the tribal and isolated areas makes it difficult for the local people to get the required healthcare services and medical needs.
 - II. Disparities in healthcare access exist between urban and rural areas, as well as among different socioeconomic groups. Urban areas generally have better access to healthcare facilities, specialized services, and qualified medical professionals. On the other hand, rural,

and underserved areas face significant challenges in accessing essential healthcare services, there is lack of resources, medical professionals, clinics, hospitals, and in some places lack of medicines and essential medical needs.

- III. Pakistan's healthcare system is fragmented, with a mix of public and private healthcare providers operating independently. These providers may have their own separate clinics, hospitals, and medical facilities. The lack of coordination and integration between different levels of healthcare delivery can result in inefficient use of resources. This fragmentation also contributes to disparities in the quality of care provided. This can lead to several problems such as, duplication of services, inconsistent quality, lack of continuity. Inefficiencies, difficulty in information sharing, and safety issues.
- IV. The absence of authentic health information systems in Pakistan makes it challenging to collect and analyze accurate data related to healthcare services, patient outcomes, and disease trends. The lack of comprehensive data changes evidence-based decision-making and makes it difficult to track and monitor progress towards UHC goals.
- V. The allocation of healthcare resources is not always optimized, leading to inefficiencies and disparities in resource distribution. Some regions may receive disproportionate resources compared to others, resulting in unequal access to healthcare services.
- VI. Limited health literacy among the population can lead to misunderstandings about health and healthcare. This lack of awareness can result in delayed or inappropriate seeking of medical attention and poor adherence to treatment plans, hindering the effectiveness of healthcare interventions.
- VII. Historically, Pakistan's healthcare system has primarily focused on treating illnesses rather than preventing them. A greater emphasis on preventive healthcare, including health promotion, disease prevention, and early detection, can help reduce the burden of diseases and improve overall health outcomes. Lack of awareness about the diseases and prevention methods can cause people to refuse vaccinations and other medical treatments.
- VIII. Political instability and governance issues can impact the consistent implementation of healthcare policies and reforms. Frequent changes in leadership, political instability, and lack of sustained commitment to healthcare can hinder progress towards achieving UHC. As the policy regarding healthcare made by one government is changed by the other government, leading to unstable healthcare system.
- IX. Only around 2% of Pakistan's GDP is spent on the healthcare services which results in the population spending their own resources for their healthcare. The major challenges that are faced by Pakistan because of this small portion of GDP on healthcare include the high maternal and child mortality rates, the increase of contagious and non-contagious diseases, poor infrastructure, and poorly governed health systems, low funded, corruption, low health literacy rates, and lack of accountability.
- X. Along with this, there are also external challenges like terrorism and natural calamities such as floods and earthquakes.³¹ Some other major challenges include lack of resources, poor

³¹ Khan, N. Challenges in UHC in Pakistan. Affiliate at Global eHealth Academy University of Edinburgh. PEAH – Policies for Equitable Access to Health. <http://www.peah.it/2018/01/challenges-in-uhc-in-developing-countries->

Infrastructure, corruption, lack of educated health specialists, lack of public health insurance, high prices of imported products, and lack of awareness.³²

Potential strategies to overcome these challenges and ensure the successful implementation of UHC. Some strategies that can be used to overcome the challenges and ensure the implementation of UHC are to prioritize maximizing the population covered, increasing the range of services offered, and reducing the cost-sharing. Addressing these challenges requires a comprehensive and coordinated approach. This may include increasing public spending on healthcare, implementing policy reforms, strengthening primary healthcare services, investing in healthcare infrastructure, and improving healthcare education and training. Additionally, promoting health awareness and preventive measures can contribute to overcoming these challenges and progress towards achieving Universal Health Coverage in Pakistan. Other techniques and strategies that can be used are the increase in the percentage of health sector budget in the GDP, prioritize the availability of resources and essential services in the public health sector, policies should be made regarding packages for health that cannot be disturbed by the change in the political regimes, the reliance on the donors' funding should be decreased, and the accountability should be given to the board of service providers, managers, and policy makers in health system.³³

12. Conclusion

In conclusion, the Universal Health Coverage (UHC) is a goal that will transform Pakistan. It has a huge impact on the quality and accessibility of healthcare for the wellbeing of citizens of Pakistan. This will bring an overall socioeconomic development in the country. Pakistan has taken significant strides in its journey towards UHC, with the government implementing various initiatives and policies to expand healthcare coverage and improve health outcomes. However, there are also some challenges and obstacles that are present in the healthcare system which needs to be focused on to get a better healthcare system. These challenges include lack of resources, lack of awareness, poor infrastructure, high maternal and child mortality rates, corruption and many more. Some of these challenges can be solved by the UHC. As the benefits of UHC ranges from improved health outcomes and reduced poverty to enhanced economic productivity and social inclusivity. By ensuring that all citizens have access to essential healthcare services without facing any financial hardships, individuals can lead healthier and more productive lives. The different collaborations and partnerships will strengthen our health system and move towards a better and healthier environment

[likepakistan/#:~:text=case%20of%20Pakistan,Some%20of%20the%20major%20challenges%20faced%20by%20Pakistan%20include%20high,rates%2C%20along%20with%20ongoing%20challenges](#)

³² Usman, A. (2022). Major Challenges Faced by Health Sector in Pakistan. Marham. <https://www.marham.pk/healthblog/major-challenges-faced-by-health-sector-in-pakistan/>

³³ Shaikh, B.T., Ali, N. Universal health coverage in Pakistan: is the health system geared up to take on the challenge? *Global Health* **19**, 4 (2023). <https://doi.org/10.1186/s12992-023-00904-1>.

for the people. UHC can make it possible for every citizen to access, afford, and get quality healthcare services, regardless of their socioeconomic background or geographic location. Along with the UN partners and UHC-P, the support of the global community is needed to achieve the UHC. With the immense support of the international cooperation and the international communities, a better healthcare system can be obtained, fostering a healthier and happier nation for generations to come.

13. Recommendations

1.	Budget	There should be a higher allocation of percentage of the national budget to healthcare.	8.	Public-Private Partnership	Public-Private partnerships and collaborations should be encouraged to be able to lead a better healthcare system and the efficient use of resources. Government should be engaged with Non-Governmental Organizations (NGOs) and international agencies to mobilize resources and expertise.
2.	Rural Areas	The access to healthcare should be improved and the reach of healthcare services should be expanded to remote and rural areas. Mobile health clinics and telemedicine initiatives can be employed to reach the people in rural areas.	9.	Evaluation System	A monitoring and evaluation system should be formed to know the effectiveness of the healthcare system, identify areas of improvement, and ensure accountability in the healthcare system.

3.	Primary Healthcare	<p>First focus in development should be the strengthening of primary healthcare services such as primary health centers and clinics across the country, especially in rural areas.</p> <p>The government must take strong steps to ensure that people have access to high-quality healthcare.</p>	10.	Mother and Child Care	<p>Maternal and child health programs should be implemented and strengthened to reduce maternal and child mortality rates.</p> <p>Women's participation in healthcare decision making process should be encouraged and female education should be promoted to help them make informed decisions regarding their health and the health of their children.</p>
4.	Health Insurance	<p>A comprehensive health insurance system should be developed and implemented to provide financial protection to citizens.</p>	11.	Special Healthcare centers	<p>Special healthcare centers should be created for the healthcare needs of transgender individuals.</p> <p>Mental health support services should be offered to address the challenges faced by the transgender individuals that can include discrimination, and</p>

					<p>identity related issues.</p> <p>Special healthcare services should be provided for the people with disabilities and accessibility should be enhanced to healthcare facilities to accommodate the PWDs.</p> <p>Healthcare programs should be developed to address the specific medical needs of the elderly person.</p>
5.	Medical Education	<p>More investment should be done in the medical education, training, and research to produce more skilled healthcare professionals.</p> <p>Investment should be done in the medical research and development to support the technological advancement and healthcare practices in Pakistan.</p>	12.	Sexual and Reproductive Healthcare	<p>Access to sexual and reproductive health services and family planning, for transgender individuals and women should be ensured.</p>
6.	Disease Prevention	<p>The burden on healthcare system can be reduced by improving the public sanitation and hygiene to prevent the spread of diseases.</p>	13.	Malnutrition	<p>To prevent malnutrition, especially in children and pregnant women nutrition sensitive</p>

		<p>Widespread vaccination campaigns should be conducted to protect women, children, and PWDs from preventable diseases.</p> <p>Communities should be educated about the importance of immunization and vaccinations.</p>			<p>programs should be held and measures should be taken to improve food security and consumption of nutritious food.</p>
7.	Public Awareness	<p>Public awareness campaigns should be held to place greater emphasis on preventive healthcare.</p> <p>Training programs should be held to create awareness about the specific healthcare needs and challenges that are faced by transgender individuals.</p>	14.	Donations	<p>Small contributions and donations must be made collectively to have a sustainable impact on the public health issues in Pakistan.</p>