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Afghan Frustration at Poor Healthcare

By Abdol Wahed Faramarz

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Provision at both state and private hospitals remains inadequate, and those who can afford it go abroad for better treatment.

Afghans say the country's healthcare system is in disarray, with shortages of doctor and medical equipment, and poor standards of care in the hospitals.

For once, President Hamed Karzai seems to be in tune with the public mood. In a speech earlier this year, he said Afghanistan lacked qualified doctors.

“We can acquire equipment – we bought an MRI scanner for 150,000 dollars... but unfortunately no one is able to use it. That's a shame,” Karzai said.

The president said the government was talking to the Agha Khan Foundation and the Turkish authorities about setting up modern, properly equipped hospitals around the country.

It is not just state-run hospitals that are in trouble – the private facilities that sprang up around the country after the Taleban administration was ousted in 2001 suffer from many of the same problems. Lack of regulation means that staff there do not always have the proper qualifications.

“I know people who started out as nurses and now work as specialist doctors in private hospitals,” Ahmad Nazir, a resident of Kabul’s Taimani district, told IWPR.

After spending a year going from one hospital to another in search of treatment for a stomach complaint, Ahmad Nazir said his confidence in Afghan healthcare was “less than two per cent”.

Fortunately for him, he was among those able to go abroad to Pakistan, India and Iran in search of better treatment.

Although Afghan doctors had diagnosed cardiac disease, Ahmad Nazir said, “When I went to India and a doctor gave me a complete check-up, he said I had a stomach complaint. I took medicine for two days and everything was fixed.

The destruction of Afghanistan’s healthcare infrastructure dates from 1992, when the pro-Moscow government was overthrown and the country descended into civil war. Hospitals were looted and many doctors fled abroad.

Taleban control from 1996 onwards brought greater stability but little was done to improve provision, while the restrictions placed on women made accessing healthcare more difficult for them.

Figures cited by health ministry spokesman Gholam Sakhi Kargar Nur Oghli show there are 23 hospitals in the capital and in the provinces, and 68 district-level hospitals, employing a total of 5,500 doctors and 2,900 nurses. In addition, there are 180 private hospitals, though Kargar did not have accurate figures for staffing levels there, or for doctors in private practice.

Health minister Soraya Dalil has repeatedly spoken of the progress achieved since 2001, insisting that 80 per cent of the population have access to health services.

Such claims are disputed by Nilofar Ibrahimi of the Afghan parliament’s health committee.

“The minister’s statements are mendacious,” Ibrahimi said. “I come from Tagab district in Badakhshan province. The district has a population of 50,000, yet there’s only one nurse, one doctor, one pharmacist and one vaccine nurse in the district clinic. How can they provide for 50,000 people.”

Health ministry spokesman Nur Oghli says the main obstacle is a massive funding shortfall. Afghans spend an average of 44 US dollars a year on healthcare, of which the government covers only a quarter of this sum, using foreign donor money.

In addition to the scarcity of resources and qualified staff, Afghans in state hospitals are routinely asked for bribes, or ignored while others get preferential treatment.

Hakim, a resident of Urozgan province in central Afghanistan, said his brother was left unattended in a Kabul hospital for six days.

“I saw how ethnic issues played out at the hospital. Some patients would be admitted, operated on and treated within a matter of hours, but when I spoke to [staff about my brother], they told me to wait to the end of the day or until the next day. I ended up staying 20 days there,” he said.

Dr Mohammad Ayub from the Wazir Akbar Khan hospital in Kabul denied that government hospitals discriminated against certain patients when prioritising cases.

“The main problem is the lack of medical instruments. Without instruments, we are unable to diagnose certain kinds of illness, and that means some patients have to wait longer, or we have to send them abroad,” he said.

Abdullah Fahim, an advisor at the health ministry, insisted the authorities took stiff action when wrongdoing was uncovered.

“When we discover breaches of the medical code of conduct in [state] hospitals, we take legal action against those responsible. We take these cases very seriously,” he said.

In the private sector, patients say charges are applied in an arbitrary and unfair manner.

When Kabul resident Mohammad Daud paid 600 dollars to a private hospital for his brother’s appendectomy, he discovered that someone else was being charged 800 dollars for the same operation.

Health ministry officials say they have received complaints about private hospitals including negligence – sometimes resulting in the patient’s death – low-quality medicines, and extortionate fees.

Nur Oghli said a special roving team had been set up to look into such allegations, adding, “We have closed some sections of a number of hospitals that didn’t meet healthcare standards or were acting illegally, in contravention of standards and health regulations.”

Private health practitioners say the sector is not covered by a comprehensive regulatory framework, so they can more or less charge whatever they like.

Mohammad Hashem Wahaj, director of the Wahaj private hospital, said the only regulations in place dated from the Taleban era.

Nur Oghli confirmed that the regulations were 15 years old and completely unsuited to the current situation. He said health officials had drafted new regulations but the justice ministry had rejected them.

He said it was hard to set a fixed fee framework for medical treatment, but hospitals had been instructed to post up their prices at the reception desk so that prospective patients were aware of what treatment would cost them.