

January 2020

The Growing Demand for Specialized Medical Treatment by Patients Abroad: Challenges and Opportunities for Health

Summary

According to the Zambia Development Agency's Health Sector Profile¹, Zambia does not have adequate hospital centres with the capacity to treat cases that need specialized treatment and lack specialist diagnostic and treatment centres to treat cardio-vascular, liver, renal and cancer diseases. Consequently, this has seen over 150 Zambian patients each year require and seek specialized treatment for these diseases in countries such as South Africa, United Kingdom, India and United States of America where the Government of Zambia and individual patients spend more than \$10,000 per treatment.

There are no set criteria on selection for patients seeking specialized medical treatments abroad however it is generally understood that in emergency situations senior public servants have access to specialized medical treatments abroad. Health financing is an important component of sustaining the health system in Zambia and ensuring the production, delivery, and consumption of health services. Further, it increases the coverage of the poor against financial risks and promotes equity amongst the citizenry.

The Government of Zambia has affirmed the importance of the health sector given its growing health budget in absolute terms and the demand for specialized treatment abroad. According to the National Health Strategic Plan (2017 – 2021)², Government allocation to the health sector in nominal terms is supposed to be however the share of the health sector budget to national budget has been decreasing over the years. The NHSP highlights that the proportion of the Ministry of Health budget to the national budget was 9.9% in 2014, 9.6% in 2015 and 8.3% in 2016.

The increase in the financial resources towards to the health sector is largely due to additional donor support. A significant number of the cooperating partners are committed to providing funds and technical assistance to the health sector. However, most of the assistance is directed to more disease specific programs such as malaria and HIV/AIDS thus neglecting the provision of specialized treatment and increasing the demand of specialized treatment abroad.

Human resource for health (HRH) is essential to the delivery of services in the health sector. An appropriately trained, skilled, and well-motivated workforce is cardinal for the efficient delivery of health services. Trained specialists would be able to administer treatment to patients seeking specialized medical treatment abroad. Currently the NHSP asserts that the country is lacking in specialized personnel who can also manage modern equipment for specialized treatment. It is imperative that the government prioritize and invest in HRH and ensure that there is an adequate number of adequately specialized, trained and skilled workers equitably distributed in health facilities across the country.

The 2015 Mid-Term Review report reveals that Zambia's epidemiological profile was characterized by the high prevalence and impact of preventable and treatable communicable diseases, particularly malaria, HIV and AIDs, sexually transmitted infections and TB. Further, there is a growing burden of non-communicable disease (NCD), including mental health problems, cancer diseases, trauma, sickle cell anemia, diabetes mellitus, hypertension, and cardiovascular diseases (CVDs), chronic respiratory disorders, blindness and eye refractive defects, oral health problems, and maternal and child health problems. These non communicable diseases need specialized treatment of which can not be found in Zambia forcing many to seek specialized treatment abroad.

Detailed Analysis

The health care system in Zambia is notably an important sector for ensuring a healthy citizenry and is classified into three major categories.

- First Level comprising of health posts, rural health centers and district hospitals. This is where primary health care and preventative services are provided.
- Second level comprising the provincial and general hospitals, which provide the curative care
- Tertiary level comprising central hospital and the University teaching hospital³.

According to the Zambia Development Agency⁴ Health Sector Profile, Zambia's disease burden varies according to climates with the most prominent diseases being HIV/AIDS, malaria, diarrhea, skin diseases and Respiratory tract infections and malnutrition. Zambia has also recently experienced a rise in non-communicable diseases, namely: cancer, cardiac, diabetes and renal disease. The new wave of disease has come with its own new challenges for the health sector in Zambia and unfortunately the ill-equipped public health facilities often lack capacity to handle these cases thereby causing the Ministry of Health and individual patients to seek treatment abroad.

Indeed, according to the ZDA Health Sector Profile,⁵ Zambia does not have adequate hospital centres with the capacity to treat cases that need specialized treatment and lack specialist diagnostic and treatment centres to treat cardio-vascular, liver, renal and cancer diseases. Consequently, this has seen over 150 Zambian patients each year require and seek specialized treatment for these diseases in countries such as South Africa, United Kingdom, India and United States of America where the Government of Zambia and individual patients spend more than \$10,000 per treatment.

The adequacy of the policy and legal framework governing specialized medical treatments abroad

Currently in the National Health Strategic Plan (2017) the Government subsidizes a portion of the cost of health incurred by the patient locally and only patients that can afford to cover their costs are able to access specialized treatment abroad. The implications of this are that the middle and the low-income bracket of the population cannot access this treatment abroad.

The Government does not have specific policies governing specialized treatment abroad however it is generally understood that in emergency situations senior public servants have access to medical treatments abroad.

The reasons why Zambians are seeking specialized treatments abroad

The state of the health care system does not afford the patients with adequate specialized treatment domestically due to the lack of adequate equipment at each level of service delivery. Further hospitals do not have suitable systems that see to it that the equipment is properly maintained. This is mainly due to the lack of satisfactory budget allocation, maintenance personnel and a lack of well-equipped maintenance facilities.⁶

The use of centralized specialized centers inhibits low income and rural populations from accessing specialized health care services in Zambia. And additionally, the current health care workforce is inadequately staffed, work with no or outdated equipment and lacks sufficient practical knowledge to provide quality service delivery. The lack of confidence in the Zambian health system has placed a demand on specialized treatment abroad for many Zambians as most public hospitals, particularly those in the rural areas are in a dilapidated state owing to long periods underinvestment and low levels of staffing to attend to the high numbers of patients have led to the increase of patients referred for specialized treatment abroad.

The criteria of selection for patients seeking specialized medical treatments abroad

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The mode of financing specialized medical treatments abroad

The recently introduced National Health Insurance Act, 2018⁷ does not cover abroad treatment. Patients must employ health insurance companies to access treatment abroad. For those who are not able to access health insurance companies, they are compelled to use personal finances, loans or grants from family members and friends.

The contribution of the private sector in providing specialized treatment

The private sector contributes to service delivery via specialized hospitals and non-governmental run pharmaceuticals. Patients can access specialized treatment with the private sector. The costs are relatively expensive compared to public specialized centers. However, even in private sector hospitals treatment services at these centers is very limited to a specified few due to the lack of specialized healthcare personnel and the return of investment for operating these centers are quite low. Pharmacies mostly provide medication that is used for preventive and curative care. They have inadequate supply of specialized medication to meet the market demand.

The challenges facing the government in providing specialized treatment in public hospitals

Workforce deficiencies – Zambia does not have an adequate number of qualified specialized healthcare personnel. The number of graduates has increased over the past 5 years; however, they are mostly serving in primary and secondary healthcare. Further, education of healthcare personnel does not include specialized training. Healthcare professionals compelled to acquire the qualification abroad. Inutile equipment – Basic equipment (as classified by the SARA report of 2010 as adult scale, infant scale, stethoscope, thermometer, blood pressure apparatus and a light source of examinations) are readily available throughout all levels of the healthcare sector.

However, although efforts have been made to improve the quality and modernity of the equipment, specialized health centers are still lagging very behind to provide the service effectively.

Lack of adequate research and development – Several health research initiatives have been undertaken in the health sector in Zambia by both local and international researchers whose findings have contributed to policy decisions and programmes. However, there is still a significant need to improve dissemination and utilisation of research findings. The Government has approved the National Health Research Policy 2018-2021⁸ and in order to provide an enabling legal framework for the implementation of the National Health policy.

Institutional inefficiencies – Zambia's referral system slows the process as patients are discouraged from directly going to a specialized hospital and have to go through their health center, district or level 1 hospital and the general hospital. Additionally, specialized hospitals are in mostly in high income cities or provincial capitals which forces patients to incur more costs to access the specialized services. Medical Stores Limited is only entity authorized to delivery medication leading to strenuous delivery practices for OTC and specialized (prescription only) drugs.

The National Health Policy 2013 on increasing the workforce focuses on general healthcare staff and implicitly excludes specialized personnel. The medical curriculum needs to place more emphasis on specialization i.e. HNPs. Lastly, dependency on donor aid to run the health care sector. Working conditions for the current workforce need to be improved as the sector still experiences brain drain.

Strategies that the government has put in place to reduce on the demand for patients seeking specialized medical treatments abroad

Specialist Training Program

The government introduced the Specialist Training Program (SPT) that provide support to enable health practitioners to be specialist trained beyond the traditional university teaching hospital. Upon completion the trainees are admitted to the specialty community of practice as a specialist.⁹

The aims of the SPT are to increase the capacity of the health care system to provide high quality, appropriate training opportunities to facilitate the required educational experiences for specialists in training, to speed up the production of specialist health professionals who will offer high quality services in health care systems and to supplement the available specialist workforce in areas with staff shortage these are rural and remote locations.

Systematic upgrading of hospitals

The government has increased the number of specialized hospitals to reduce lead time it requires a patient to access a specialized facility, improve the quality of equipment used and have multilateral agreements to allow specialized personnel to assist and train local staff.¹⁰ The government has also introduced the construction of level 1 hospital to help decongest the University Teaching Hospital

Legal and regulatory Framework

Currently, the Zambian government is implementing the National Health Strategic Plan 2017- 2021 highlighting the strategic focus areas of health service delivery for a defined period of 2017 to 2021. The NHSP 2017-2021 is anchored on the National Health Policy of 2013 which was formulated with the focus on the vision 2030, taking into account national, regional and global health related policies and strategic frameworks.

The National Health policy 2013 has covered all diseases taking into account the diseases that require specialized treatment and public health interventions that are preventative the policy also reflects the World Health organization building blocks such as human resource, medical equipment, health information and health care financing. The National Health Policy is closely linked to the Zambian Constitution, which is the supreme Law of the land. The Constitution guarantees the right to life and right to health. It also guarantees other fundamental human, social and economic rights, which have direct and indirect impact on the population.¹¹

Recommendations

The following are some of our recommendations:

1. Enhance research and development in the health care sector that has a focus on specialized treatment with a follow through of integrating findings into the system.
2. Ensuring that all provinces localize treatments and have a specialized staff that is able to administer treatment before they are referred for abroad treatment.
3. Ensuring that a significant percentage in the budget is allocated to the health care system.
4. Enhance the investment in Infrastructure development.
5. Investment in modern equipment and specialist training for health professionals.

Endnotes

1. <https://ab-network.jp/wp-content/uploads/2014/07/Health-Sector-Profile.pdf>
2. <https://www.moh.gov.zm/docs/ZambiaNHSP.pdf>
3. <https://ab-network.jp/wp-content/uploads/2014/07/Health-Sector-Profile.pdf>
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Editor's Note

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