

Learn from China

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THE Sino-Pakistan friendship has stood the test of time. Although the China-Pakistan Economic Corridor that has been underpinned with 51 agreements and MOUs has been generating controversy in abundance, one cannot blame the Chinese. We have the innate capacity of not doing the groundwork for any project we launch. Inevitably, it sparks a dispute.

One positive outcome of the flurry of activity that has come in the wake of the economic corridor is the move by the medical associations of the two countries to set up a 'medical corridor'. This collaboration resulted in a joint MedCong that was held in Karachi in early January. It was attended by an impressive 40-member Chinese delegation led by Prof Keqin Rao, vice president and secretary general of the Chinese Medical Association.

To the credit of the medical community in Karachi, no controversy surrounded the moot that was well organised. Forty scientific sessions were held simultaneously over three days. It left the Chinese pleased and Dr Rao observed that there was a lot of potential for exchange of medical technology between the two countries.

A Pak-China medical corridor can benefit many.

Pakistan, especially the policymakers, could learn a lot from the Chinese experience. China's public healthcare system is certainly way above ours. Considering the size of the country and its huge population of 1.3 billion, China has definitely done better in providing full health cover to its people than we have. According to Dr Rao, 98 pc of the population is within 15 minutes' walking distance from a health facility.

I was curious to find out more. China has moved on from the basic structure which was launched under Mao soon after the revolution in 1949 when the barefoot doctors (basic health workers) formed the cornerstone of public healthcare.

China has enjoyed three major advantages. First, its fast-growing economy generated substantial resources to allow its policymakers to invest a respectable amount in public health. Today, China allocates 5.6pc of GDP to health. Compare that to Pakistan's measly 2.8 pc (more than half being the private sector's contribution).

Secondly, China has not totally abandoned its three-decade-old communist tradition of equity and full health coverage for its population. Now a transition is taking place from a planned economy to a market economy. The old ideals still exist. The poor have not been relegated to the backwaters with no social protection at all. Reforms are under way to address the inequalities between the rural and urban areas.

Thirdly, China's traditional indigenous health system has not been given up. The government continues to recognise it and sponsors it on equal terms with Western medicine.

Combined with the Chinese ethos of rigorous self-discipline, these factors have enabled the state to sustain a system that has produced vital indicators in the health field that would do any Asian country proud.

A comparison between China and Pakistan is an eye-opener. China's infant mortality rate is eight per 1,000 live births, Pakistan's is 69. The maternal mortality rate in China is 20 per 100,000, Pakistan's is 178. Child malnutrition in China stands at 9.4pc, in Pakistan it is 45pc. Life expectancy in China is 75.8 years, in Pakistan it is 66.7. According to the UNDP's Human Development Index, China is ahead of many countries grouped with it in the high human development category.

Foreigners who have lived in China point to the 'questionable' quality of healthcare provided by public-sector medical facilities. On the other hand, they found private hospitals as good — but also as expensive — as similar institutions elsewhere.

Dr Rao told me that health facilities exist all over the country — every village has a primary health unit — but he admitted for more advanced treatment using higher technology one has to travel to a town/city hospital. Many of these are beyond the reach of the common man in a small village not simply in terms of distance but also the fees charged.

Healthcare is financed from the government's revenues, medical insurance, private insurance, and out-of-pocket payment by patients. The multiple options available fuel inequities.

If in spite of these inadequacies and imperfections, China has managed to keep its population healthy it is worth exploring its health strategy.

The fact is, as Dr Rao confirmed. China places a lot of emphasis on preventive measures such as ante-natal care (99pc deliveries take place in hospitals), immunisation of children, nutrition and sanitation. In Pakistan, we are too focused on curative measures mostly at the tertiary level while neglecting the state of our hygiene and nutrition.

Human development after all is an integrated and holistic process. For a person to enjoy good health it is important that the quality of his life should be reasonably satisfactory in terms of food, shelter, environment and social well-being. And if people are also provided good education that creates the awareness in them that they can take many preventive measures themselves.

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