



Sources for sick child care in Pakistan

One in a series of analyses by SHOPS Plus

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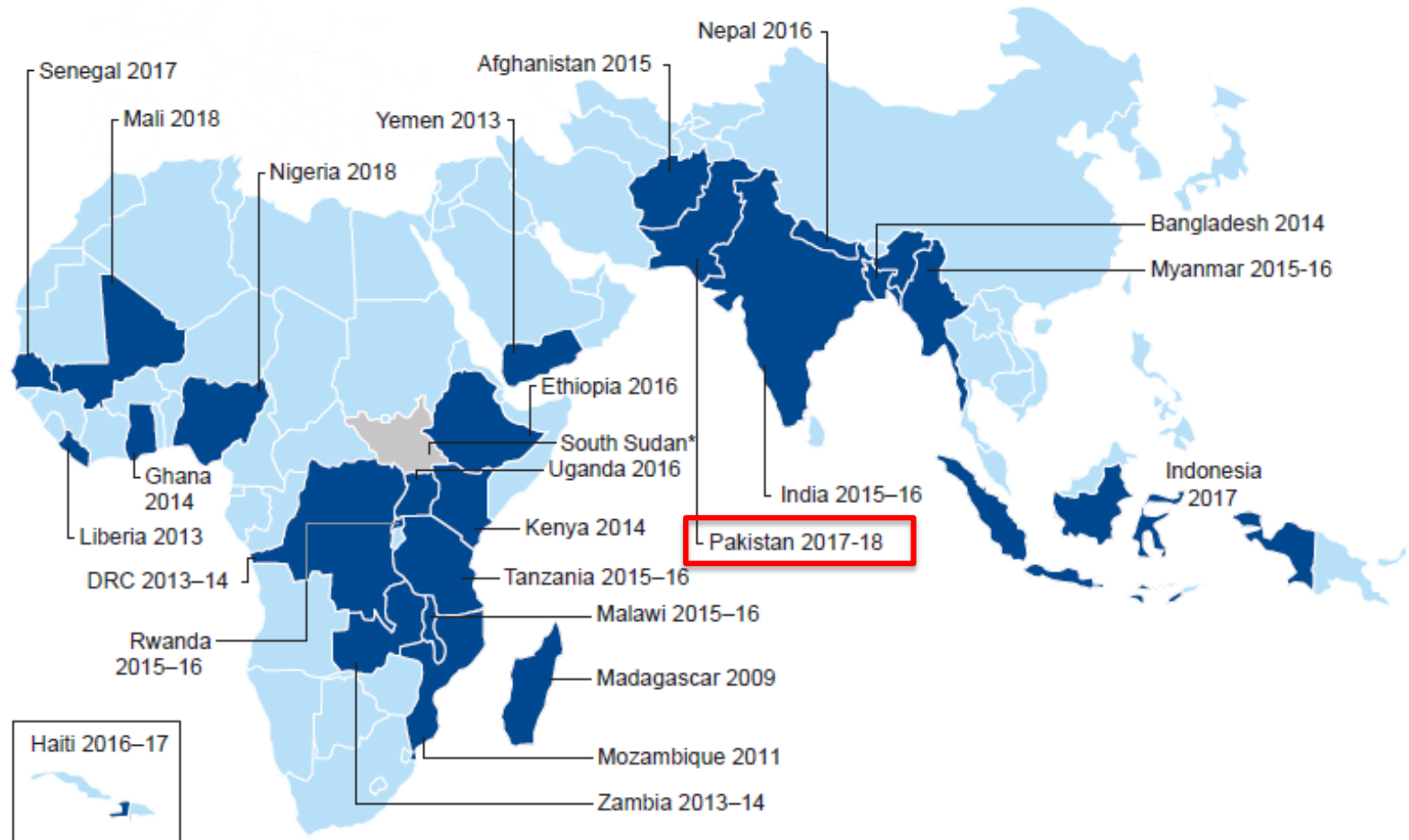
Purpose of this analysis

- Understand whether and where Pakistani caregivers seek advice and treatment for their sick children
- Examine differences in care-seeking patterns by illness and socioeconomic levels, and within public and private sectors
- Share data in a usable format
- **Inform policies and programs to prevent child deaths**





Demographic and Health Survey (DHS) data analyzed from 24 priority countries



*No DHS data are available for South Sudan.



Pakistan 2017-18 DHS data: Interviews with mothers of young children

Mothers of children five years old or younger were asked:

- Whether their children had experienced fever, symptoms of acute respiratory infection (ARI), or diarrhea in the past two weeks
 - If yes, asked whether they had sought advice or treatment from any source
 - If yes, asked where they had sought advice or treatment





This analysis will tell you:

1. What percentage of children in Pakistan experience fever, ARI symptoms, and/or diarrhea?
2. What percentage of caregivers seek advice or treatment outside the home for children with these illnesses?
3. Among those who seek out-of-home care, what are the sources?
 - a) Public, private, other
 - b) Clinical vs. non-clinical
4. How do patterns of care-seeking vary by:
 - a) Illness: fever, ARI, diarrhea
 - b) Countries within the Asia region
 - c) Wealth quintile: poorest and wealthiest Pakistanis



How frequently do children in
Pakistan experience fever,
ARI symptoms, and/or
diarrhea?

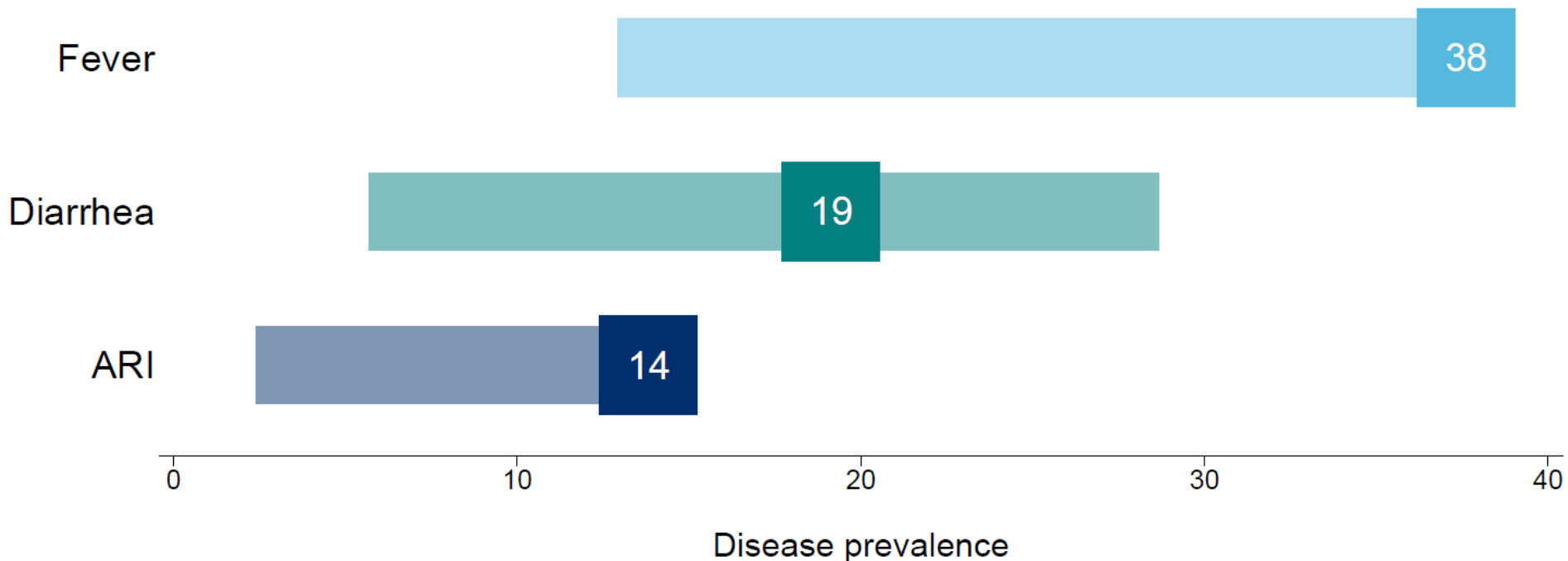




Child illness prevalence in Pakistan is high compared to among most of its neighbors

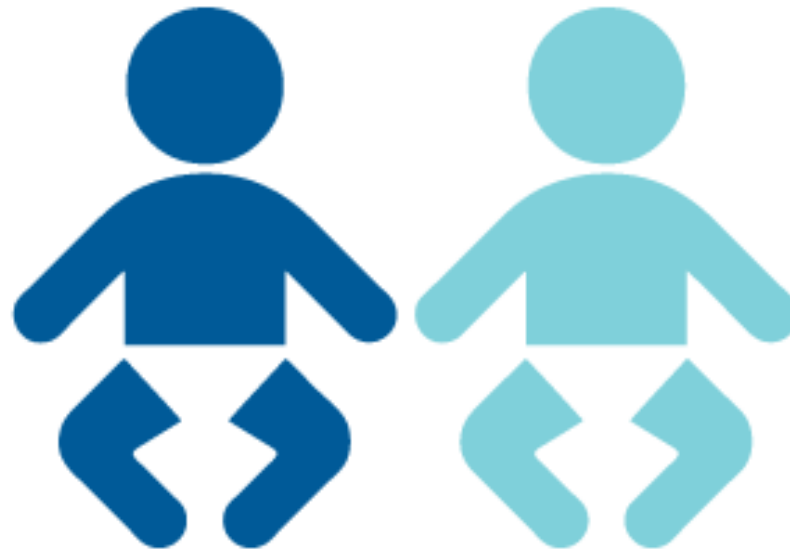
Bars show **range** across Asian USAID priority countries; squares show **Pakistan**

Illness prevalence: Pakistan and Asia





1 out of 2 children in Pakistan experienced fever, ARI symptoms, and/or diarrhea in the last 2 weeks.



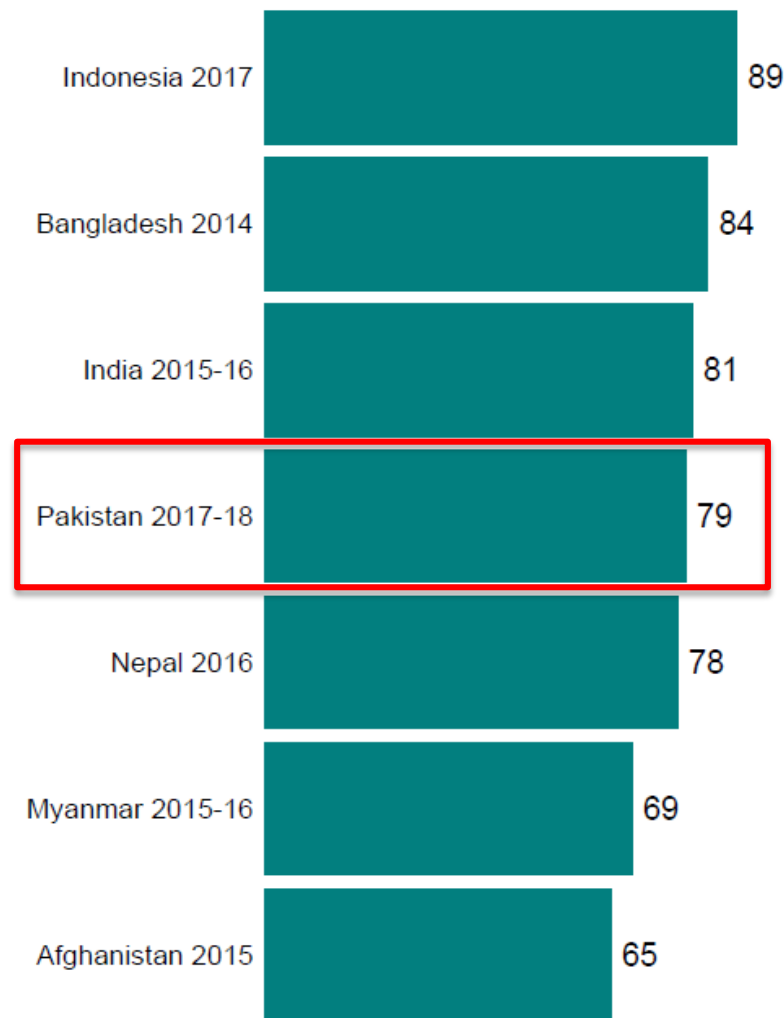


How frequently is out-of-home
care sought for Pakistani
children with these illnesses?





Pakistan has a high care-seeking level, similar to some of its neighbors



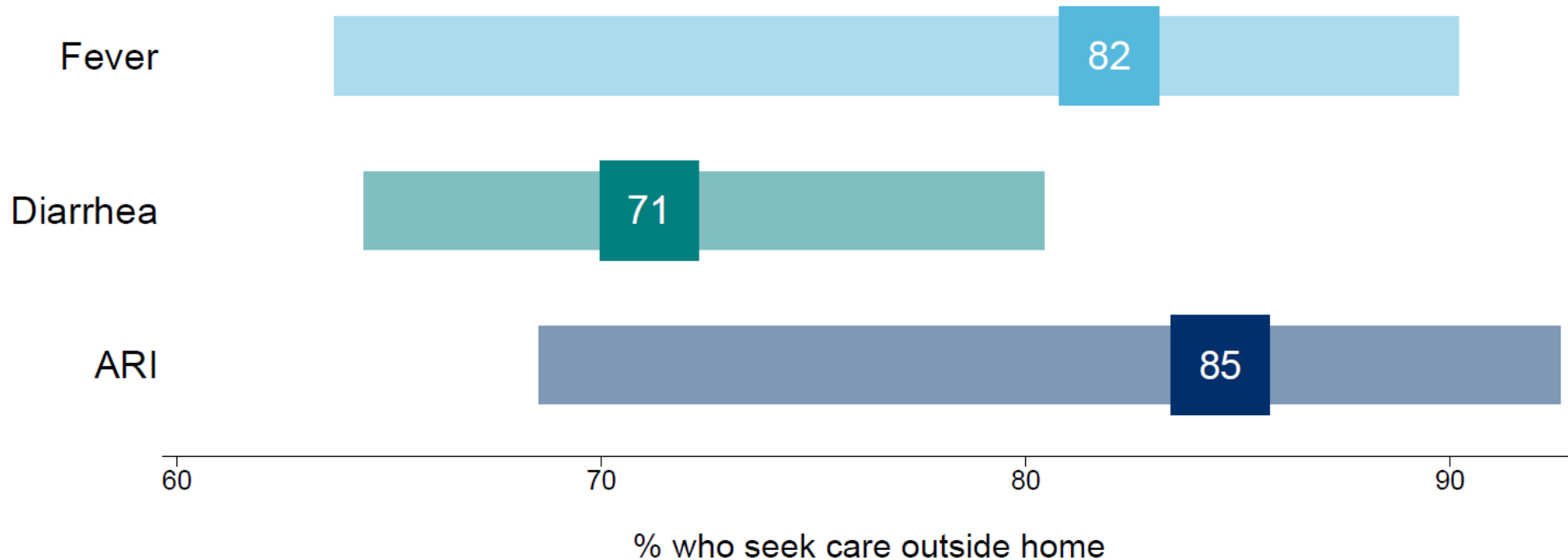
% of caregivers who seek treatment for children with any of the three illnesses in each of the Asian USAID priority countries analyzed



Pakistan's care-seeking levels are fairly high relative to the regional range

Bars show **range** across Asian USAID priority countries; squares show **Pakistan**.

Caregivers who seek care outside the home: Pakistan and Asian priority countries





Among Pakistanis who seek
out-of-home care, what are the
sources?

Public, private, other



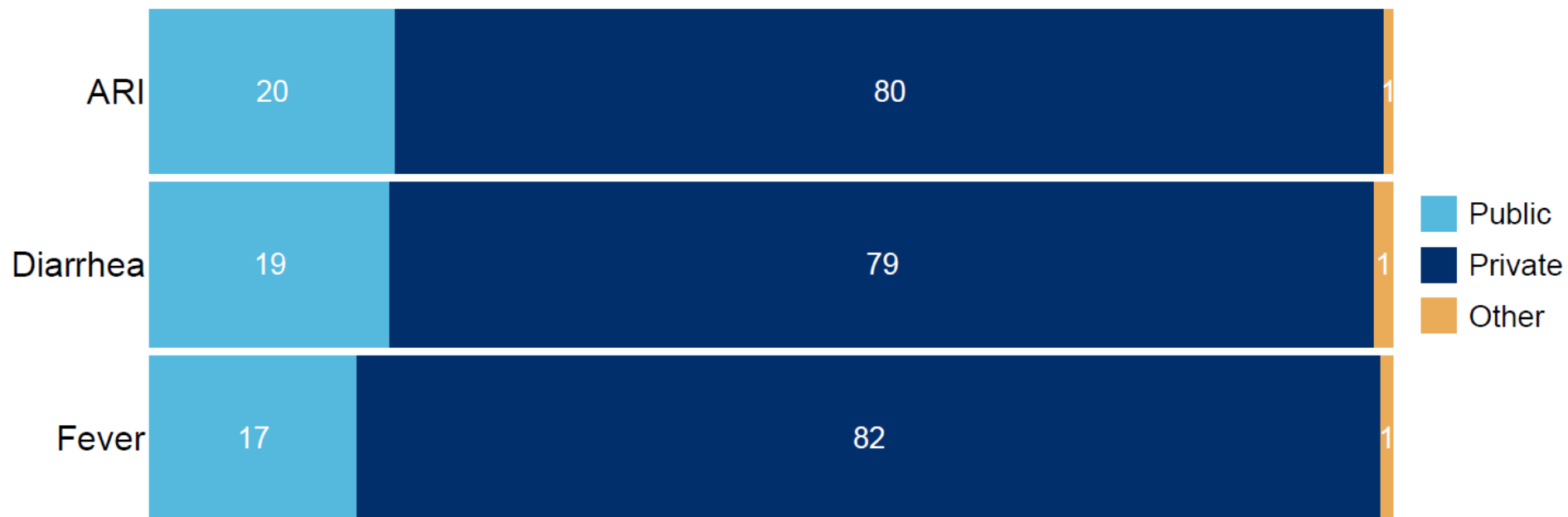


Sources of care

Public sector	Private sector	Other
<ul style="list-style-type: none">• Hospitals, rural health centers, mother-child health centers, basic health units• Lady health workers and community midwives	<ul style="list-style-type: none">• Private clinics, hospitals, and doctors• Pharmacies, shops, medical stores, compounders, and dispensaries	<ul style="list-style-type: none">• Traditional healers (<i>hakim</i>), homeopaths, traditional birth attendants



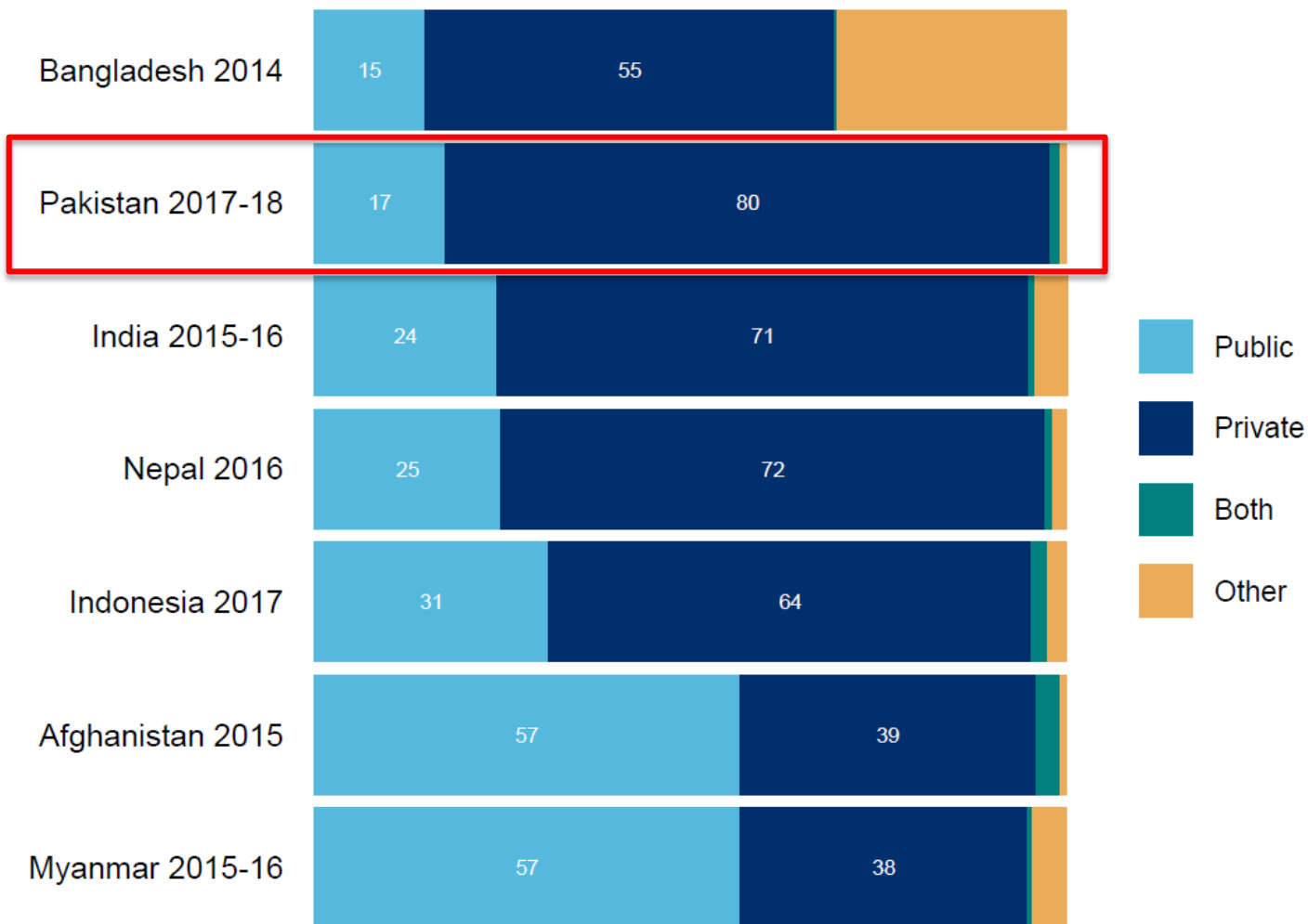
The **private** sector is dominant in Pakistan, across illnesses



Source among Pakistanis who seek sick child care outside the home



Pakistan has the **highest private** sector use among all Asian USAID priority countries





Among caregivers who seek sick child care outside the home, **80%** seek treatment or advice from private sector sources and **17%** from public sector sources.



■ Public source ■ Private source ■ Both ■ Other



Sources of care: Clinical versus non-clinical





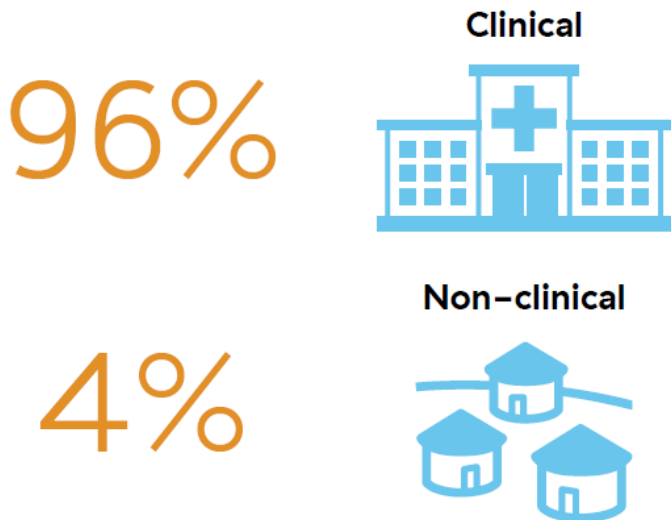
Sources of care: Clinical and non-clinical

	Public sector	Private sector
Clinical	<ul style="list-style-type: none">• Hospitals, rural health centers, mother-child health centers, basic health units	<ul style="list-style-type: none">• Private clinics, hospitals, and doctors
Non-clinical	<ul style="list-style-type: none">• Lady health workers• Community midwives	<ul style="list-style-type: none">• Pharmacies, shops, medical stores, compounders, and dispensaries

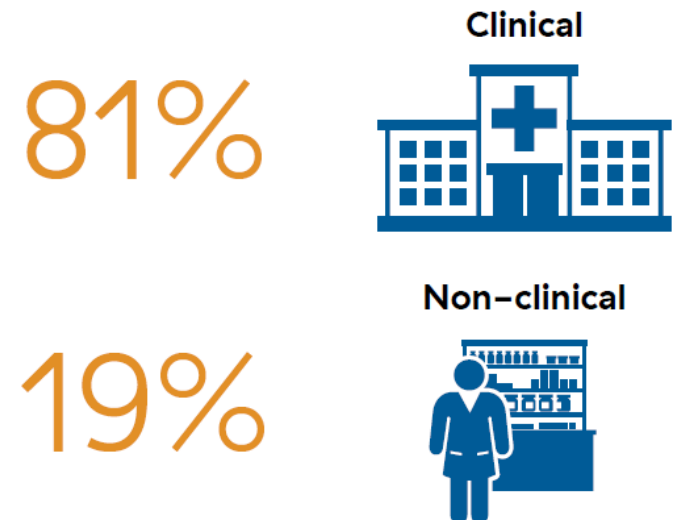


Nearly all **public** sector users and most **private** sector users rely on clinical sources

Public sector:

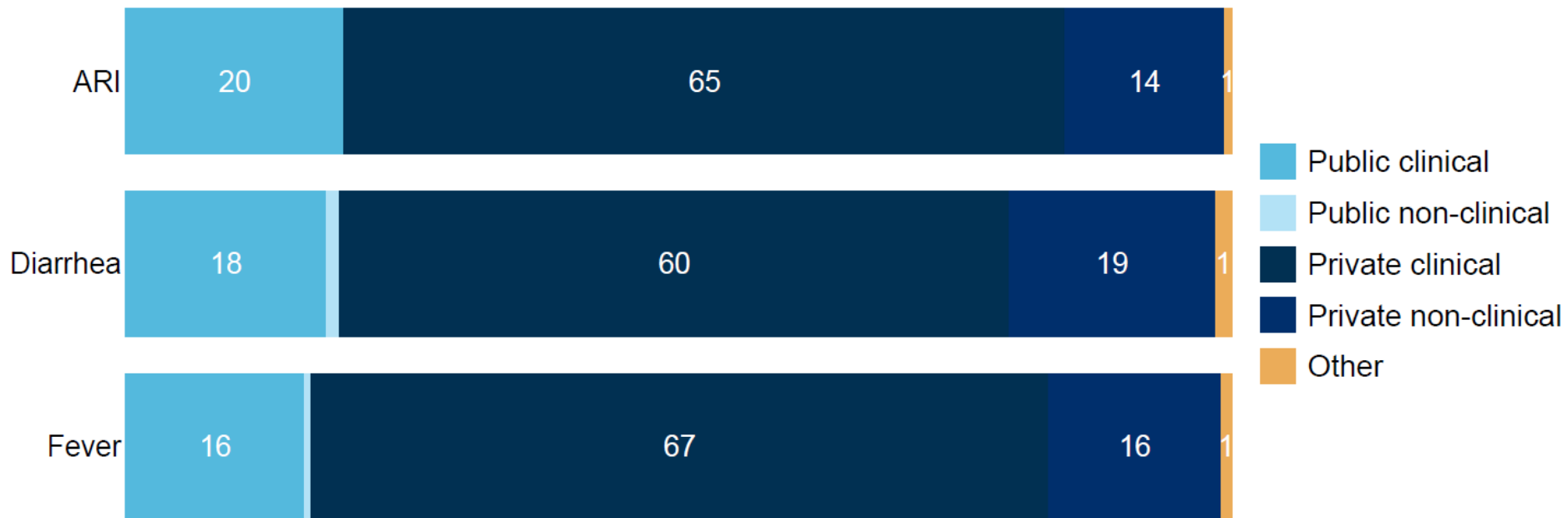


Private sector:





By illness: *Little variation* in clinical vs. non-clinical sources of care



Source among Pakistanis who seek sick child care outside the home



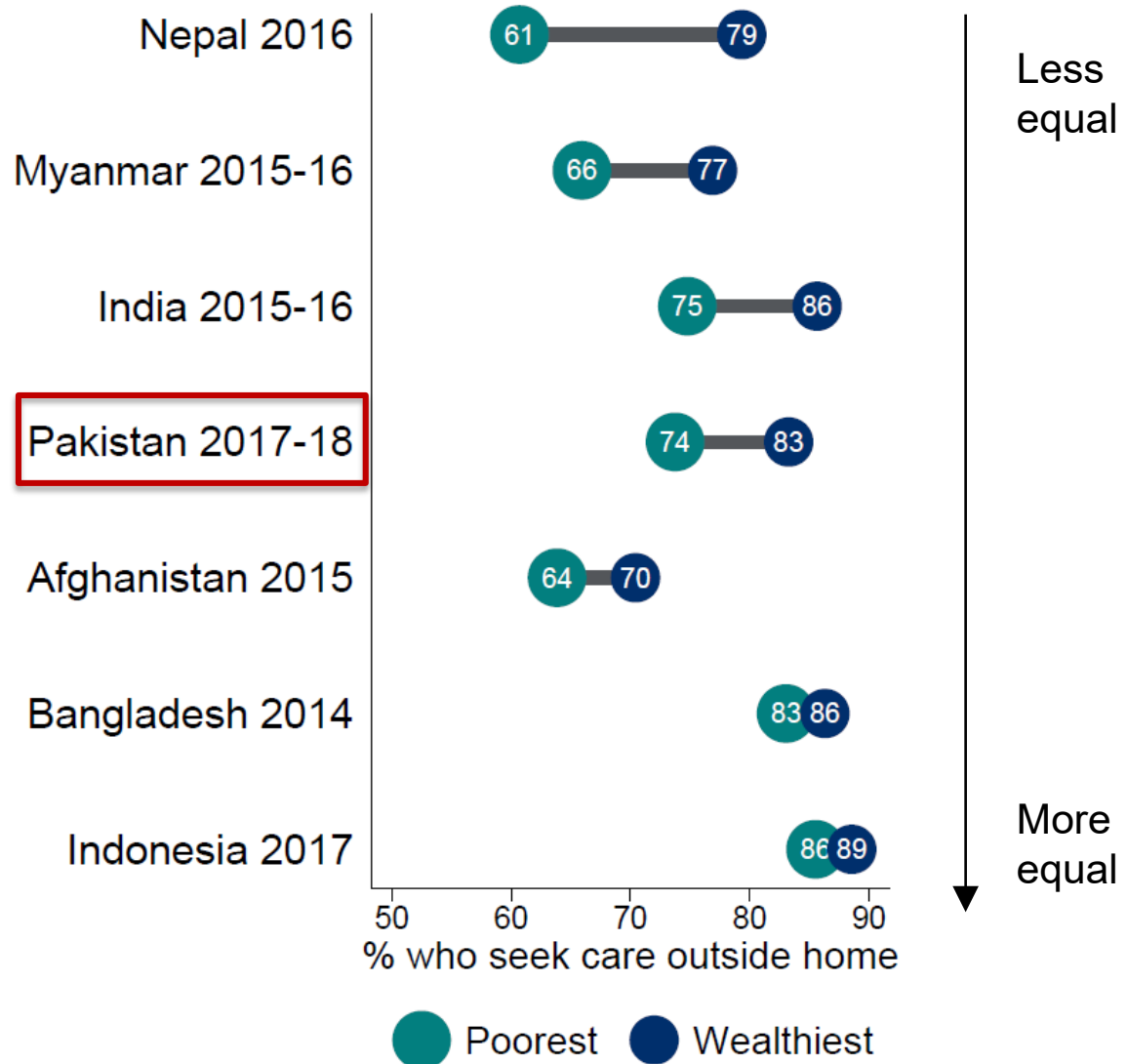
How do patterns of care-seeking vary between the poorest and wealthiest Pakistanis?





Pakistan has a moderate socioeconomic disparity in care-seeking levels

● Wealthiest
● Poorest





The **private** sector is dominant across income levels

Pakistan 2017-18

Q1
Q5



Source among those who seek care outside the home

Q1 = poorest

Q5 = wealthiest



Public



Private



Both



Other

The private sector is the primary source across income levels:

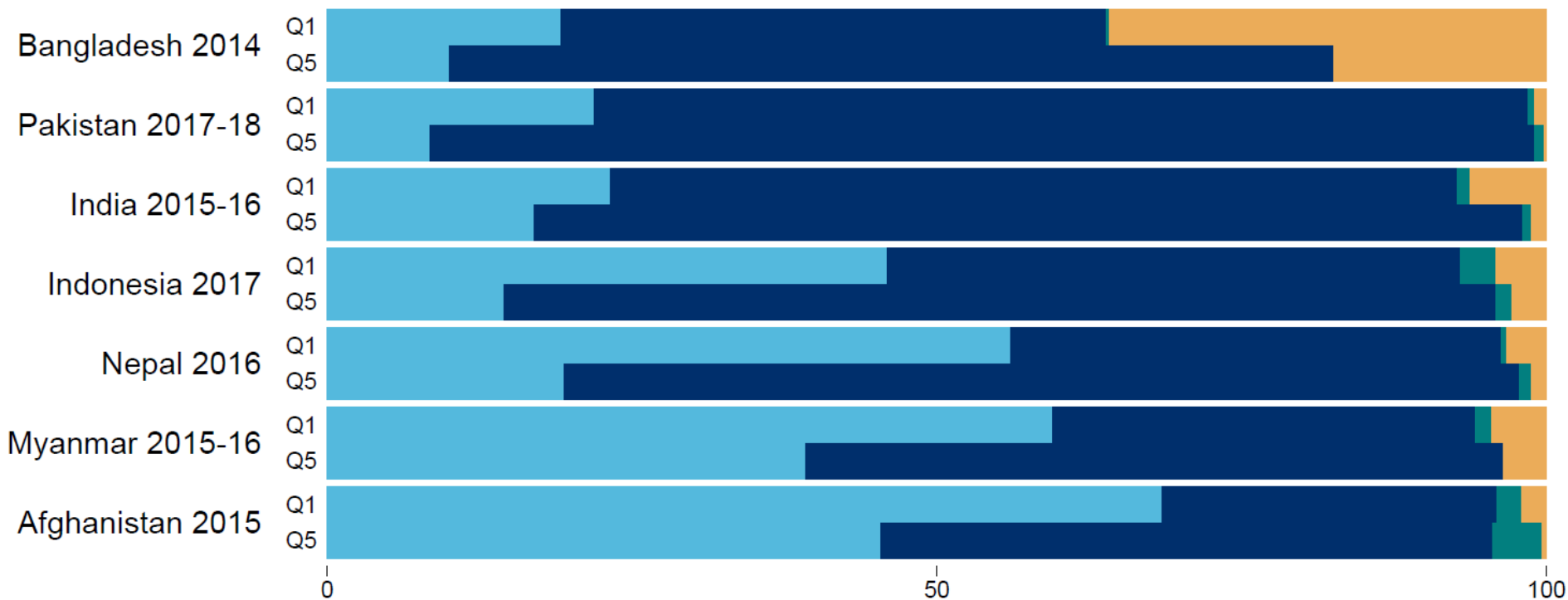
- 91% of wealthiest and 77% of poorest care-seekers use private sector

Use of the public sector is higher among the poorest than the wealthiest:

- 22% of poorest and 8% of wealthiest care-seekers use public sector



Pakistan has the **highest level of private sector use** among the poorest and wealthiest care-seekers



Source among those who seek care outside the home

Q1 = poorest

Q5 = wealthiest





Summary

- **1 out of 2** children experienced a treatable illness in the past two weeks
- **79%** of caregivers seek treatment outside the home
 - **80%** use the private sector
 - **17%** use the public sector
- **Private sector** is primary source
 - Pakistan has the highest use of the private sector among all Asian USAID priority countries
- The private sector remains dominants across SES
 - **91%** of wealthiest and **77%** of poorest caregivers use the private sector
 - **22%** of poorest and **8%** of wealthiest use the public sector
- Clinical sources are dominant across sectors
 - Private sector: **81%** used clinical sources
 - Public sector: **96%** used clinical sources



Acknowledgements

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Sustaining Health Outcomes through the Private Sector (SHOPS) Plus is USAID's flagship initiative in private sector health. The project seeks to harness the full potential of the private sector and catalyze public-private engagement to improve health outcomes in family planning, HIV/AIDS, maternal and child health, and other health areas. SHOPS Plus supports the achievement of US government health priorities and improves the equity and quality of the total health system.



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