

Nepal's woeful healthcare system

Unheard stories of Nepali doctors

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Dr Bivek Singh (Rathore)

The Institute of Medicine (IOM) was the first medical college in Nepal to train doctors in the country. Before the establishment of the IOM, the health care system was predominantly ruled by paramedics and limited number of doctors who were trained in foreign nations.

Today the ratio of government to private medical colleges in Nepal is 1: 4.

There are four government medical colleges, 16 private medical colleges and 1 Army medical college, accounting for 21 medical colleges established over the last five decades to produce MBBS doctors. Two new medical colleges have received the green signal from the prime minister to commence their MBBS course. Five medical colleges are in the pipeline, and at this pace, the country will have 25 plus medical colleges in the next few years. In a nutshell, Nepal is adding one medical college to its territory every two years.

Although the number of doctors who can be trained in each batch by a medical college is determined by several factors, on average, the intake of a medical college is 75 students a year, producing around 1,500 plus doctors in the country.

Apart from them, many students fly abroad to countries like China, Bangladesh, Russia, Egypt, India and Pakistan to study medicine, resulting in a turnover of 2,000-2,500 doctors annually in the country. After graduation, MBBS students appear for their licensure examination, which is taken by the Nepal Medical Council, but the average pass rate is around 50 per cent, which cuts down the yearly production of licensed MBBS doctors to around 1,200.

Even with the production of a good number of doctors, the country lacks standard health care. Doctors are often blamed for the pathetic health services in Nepal. There is one doctor for every 850 people in the Kathmandu Valley, but in the rural areas, there is just one doctor for every 150,000 people. This discrepancy in the doctor-patient ratio raises several questions about the government's health policies and their implementation. Out of the 1,200 fresh doctors who are ready to join Nepal's healthcare system every year, the government is able to recruit only 100-200 doctors. The distressing working environment, political pressure and the contract system are not able to attract young doctors. Majority of the government vacancies for doctors are still not fulfilled, putting undue burden on the limited workforce that is providing healthcare in the government hospitals. Most MBBS doctors in the capital work more than 72 hours per week to earn a monthly salary of around Rs 40,000. Even specialist doctors are not happy with their monthly salaries and working hours. This toxic working environment has created physical and mental stress on the doctors.

Every month, the nation encounters violence against doctors, and in most cases, it is settled by the hospitals providing compensation. The poor pay and hectic working hours have resulted in increasing depression among the doctors. In the last 18 months, six doctors have committed suicide. Nepal Medical Association (NMA), the association of doctors established with the goal of securing doctors' rights and creating a better working environment, has a membership of 12,000 doctors, or 30 per cent of the total registered doctors.

A weak NMA has failed to secure the professional rights due to several reasons. MBBS graduates after receiving their license invest several years trying to seek entry for their postgraduate training. The mismatch in the production of undergraduates and postgraduates has left many MBBS jobless, creating an underpaid work environment.

Medical research is still in its infantile stage, and academicians don't see a secure future in Nepal. The number of doctors flying abroad after their graduation is increasing every year. For a short duration, Nepali doctors prefer the Maldives and Dubai, whereas the United States is the most sought-after destination for settling after their graduation, followed by the United Kingdom.

With the weakening of the government hospitals, the number of private hospitals /nursing homes/ health care centres has been mushrooming, but still they are unable to serve the basic demands of the working doctors.

Nepalese Doctors Lounge (NEDOL) was a virtual lounge started during the COVID pandemic to help doctors with their academic and professional development, and now it is a registered non-profit organisation. Its virtual lounge has 11,400 doctors.

In a poll conducted by NEDOL, 37 doctors reported that they had not been paid for several months, and only 20 per cent have chosen a legal route to ensure their professional earnings. Most of these private hospitals are run by local businessmen and local politicians, and there is no effective quality control from the government.

Lack of public awareness, political turmoil, corruption, lack of proper governing policies, unmanaged health care system and a failed national health insurance system are a few reasons hindering the delivery of quality health care in Nepal. The country should focus more on offering suitable jobs for doctors produced with standard salary. The national policy should focus on timely recruitment of medical doctors and ensure them the deserved facilities and a good working environment.

The national insurance policy needs to be revisited, monitored and modified as per the report of the past years.

Medical researchers and academics seek the attention of policymakers so that we can strengthen the quality of care for the public. If the same trend continues, the country will soon face a healthcare crisis. Politicians and policymakers should focus more on the quality of medical education and training instead of thoughtlessly increasing the number of medical colleges in the country.

Dr Singh is founder, NEDOL

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