

A comparative study on the Health Resources Indicators of the Ministry of Health, Kingdom of Saudi Arabia

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ABSTRACT

This research paper aims on the Health Resources Indicators of Ministry of Health, Kingdom of Saudi Arabia for the years for the years 2006, 2011 and 2016. **Objectives:** To compare the health resources indicators of the Kingdom of Saudi Arabia for the years 2006, 2011 and 2016. **Research Methods:** It is a descriptive and comparative research study in which historical data was analysed (Library Research). **Significance of Research:** There is a growing demand of healthcare services in the Kingdom of Saudi Arabia and the Saudi Arabian General Investment Authority has identified healthcare as a priority sectors for investment and nationalization for employment. **Research Design:** The health resources indicators of the Ministry of Health, Kingdom of Saudi Arabia for the years 2006, 2011 and 2016 were compared and analysed by using the rates or percentages. **Study Population:** This research is limited to the health resources indicators of Ministry of Health, Kingdom of Saudi Arabia for the years 2006, 2011 and 2016. **Data Collections:** The data were collected from the annual reports of Ministry of Health, Kingdom of Saudi Arabia for the years 2006, 2011 and 2016, relevant published journals, articles, research papers, academic literature and web portals. **Conclusion:** Overall, there is an increase in the Physicians by 38.73%, Dentists by 88.84%, Pharmacists by 118.84%, Nurses by 61.02%, Allied Health personnel by 77.89%, Private hospital beds rate by 3.77% rates per 10,000 populations as compared with the year 2006. However, there is a decrease in the Hospital beds by 3.04%, Health Centers by 13.58%, Governmental hospital beds 25.84% rates per 10,000 populations as compared with the year 2006. Hence, there are good opportunities for employment of Saudi staff as Physicians, Dentists, Pharmacists, Nurses and Allied health personnel in the private healthcare services and have investment opportunities in the Saudi healthcare industry.

1. Introduction

In Saudi Arabia, the Ministry of Health was founded in the year 1950.¹ In the year 1925, Saudi Arabia's first public health department was established in Makkah.² The department was responsible for building hospitals and healthcare centres and issuing and enforcing regulations to provide the necessary standards for practicing medicine and pharmacology. A public health council was also established to address the growing need for healthcare services and it was the highest-level supervisory board, overseeing all aspects of the country's healthcare services. Then, these healthcare institutions were transformed into a ministerial body in 1950.³ Abdullah bin Faisal Al Saud was the first health minister.⁴ The ministry is based in Riyadh.⁵ Healthcare services in Saudi Arabia are provided by several public and private agencies. However, the ministry is the major planner and provider of these services.⁶ Public expectations and increasing financial pressures are requiring health services to adopt new approaches to the management of their resources.

Saudi Arabia is a high-income country with a per capita GDP of US\$ 22 713.4 in 2010 and an equally high human development index ranking, 56 in 2011.⁷ The extensive health care system divided among three tiers of care and caters for a population of approximately 27 million (2010). The Ministry of Health is the main provider of health care services. Health has featured in the national 5-year development plans since 1970,

and is seen as a key part of overall development in the country. Saudi Arabia is on track to achieve the Millennium Development Goals (MDG) targets. The development plans indicates that there is an extensive progress has been made in economic development. As a result of the strong economy, the country has rapidly expanded health, education and social services infrastructure.

Although the Ministry of Health has demonstrated its strength in developing strategic directions for service delivery and for various promotive, preventive, curative and rehabilitative health care programmes, more concentrated efforts are required to create a national health workforce. In addition to managing, planning and formulating health policies, supervising health programmes and monitoring health services in the private sector, the Ministry of Health is responsible for advising other government agencies and the private sector on ways to achieve the government's health objectives.⁸

A programme was recently developed by the Ministry of Health in partnership with other national and international agencies to reform service delivery in line with the national strategy. The new delivery model is organized into five tiers: primary health care centers, district hospitals, general hospitals, central hospitals and medical cities. Primary care centers serve a gate keeping function for referrals to general and specialized hospitals. Citizens can generally only access the primary care centers in their areas of residence.⁹

The Ministry of Health is promoting quality assurance and improvement through use of standard operating procedures and accreditation of health care facilities. Efforts are being made to improve patient safety in both public and private health facilities. The cost of health services in the private sector is perceived as high and results in out-of-pocket expenditures, particularly for workers in the public sector, which are not covered by supplementary private health insurance. Until recently, foreign workers were not allowed to use Ministry of Health facilities except for emergencies.

Saudi Arabia is undergoing epidemiological and demographic transition, represented by a growing burden of chronic and non-communicable diseases and ageing population, while public expectations for quality care services are expanding. Urbanization is increasing and unhealthy lifestyles, represented by unhealthy eating habits, tobacco consumption and limited physical activity, are on the rise. The new strategies for primary health care and for service delivery are patient-centered, focus on health promotion and protection and put emphasis on social determinants of health. Coordination between the Ministry of Health and related sectors is paving the way to advocate for health in all policies, and such coordination is stronger at sub-national level. Human resource development aimed at gradually replacing the expatriate population is among national priorities in health development plans.¹⁰

2. Review of Literature

Saudi Arabia relies heavily on an expatriate population to provide its sizeable health workforce, which leads to a great deal of turnover and instability in the health care system. The nursing workforce in Saudi Arabia relies primarily on expatriates who are recruited from different countries.¹¹

The government is continuing its efforts to develop a Saudi health workforce through the introduction of number of medical,

nursing and health schools. There are a total of 73 colleges for medicine, health and nursing as well as 4 health institutes in Saudi Arabia.⁸ Ministry of Health employees are also given opportunities to study and train abroad through government sponsored scholarships. However, to meet the demands of the continuously growing population, the government will continue to recruit expatriate health workers.¹²

It is evident that countries around the world are re-examining their approach to the provision of health care with the introduction of more radical solutions to the problems they face, including the recognition that health services must mobilise the resources available to them as efficiently and effectively as possible. At the centre of this resource issue are health care staff, both trained and untrained, who constitute the largest recurrent cost component of any health care service. This need for greater efficiency and effectiveness in the use of health human resources has in turn highlighted a requirement for improved management practice and more skilled managers within health systems as well as a need for a practical methodology to assess management performance.¹³

These indicators for the country as well as states will help in identifying areas that need policy and programmed interventions, setting near and far-term goals, and deciding priorities, besides understanding them in an integrated structure.

3. Data Analysis

The data was collected from the Ministry of Health, Statistical Year Books, Kingdom of Saudi Arabia for the years 2006, 2011 and 2016 and tabulated in order to compare by using the statistics. The Statistical Yearbook is like a mirror, reflecting the statistical activities and the various achievements of the health sectors in the Kingdom of Saudi Arabia throughout the year that made the Ministry of Health put the book accessible to readers.

Table Number 1- Health Resources Indicators (Rates per 10,000 Populations)

Sr. No.	Health Resources Indicators (Rates per 10,000 Population)	2006 ¹⁴	2011 ¹⁵	2016 ¹⁶
1	Physicians	20.4	24.4	28.3
2	Dentists	2.33	3.5	4.4
3	Pharmacists	3.61	5.1	7.9
4	Nurses	35.4	47.4	57
5	Allied Health personnel	19	27.8	33.8
6	Hospital beds, KSA	23	20.7	22.3
7	Health Centres	0.81	0.74	0.7
8	Governmental hospital beds rate	17.8	16	13.2
9	Private hospital beds rate	5.3	4.7	5.5

Table number 1 depicts the health resources' indicators of Saudi Arabia, Ministry of Health.

Table Number 2- Health Resources Indicators (Rates per 10,000 Populations) and Comparisons between the years

Sr. No.	Comparisons between the years	2006-2011	2011-2016	2006-2016
	Health Resources Indicators (Rates per 10,000 Population)			
1	Physicians	19.61%	15.98%	38.73%

2	Dentists	50.21%	25.71%	88.84%
3	Pharmacists	41.27%	54.90%	118.84%
4	Nurses	33.90%	20.25%	61.02%
5	Allied Health personnel	46.32%	21.58%	77.89%
6	Hospital beds, KSA	-10.00%	7.73%	-3.04%
7	Health Centers	-8.64%	-5.41%	-13.58%
8	Governmental hospital beds rate	-10.11%	-17.50%	-25.84%
9	Private hospital beds rate	-11.32%	17.02%	3.77%

Table number 2 depicts that there is an increase in the Physicians by 19.61% (2006-2011), 15.98% (2011-2016) and 38.73% (2006-2016); Dentists by 50.21% (2006-2011), 25.71% (2011-2016), and 88.84% (2006-2016); Pharmacists by 41.27% (2006-2011), 54.90% (2011-2016), and 118.84% (2006-2016); Nurses by 33.90% (2006-2011), 20.25%, (2011-2016), and 61.02% (2006-2016); Allied Health personnel by 46.32% (2006-2011), 21.58% (2011-2016), and 77.89% (2006-2016); Hospital beds by 7.73% (2011-2016) and has decreased by 10.00% (2006-2011) 3.04% (2006-2016); Health Centers has decreased by 8.64% (2006-2011), 5.41% (2011-2016) and 13.58% (2006-2016); Governmental hospital beds rate has decreased by 10.11% (2006-2011), 17.50% (2011-2016) and 25.84% (2006-2016); Private hospital beds rate has increased by 17.02% (2011-2016), and 3.77% (2006-2016) and has decreased by 11.32% (2006-2011).

4. Conclusion

Overall, there is an increase in the Physicians by 38.73%, Dentists by 88.84%, Pharmacists by 118.84%, Nurses by 61.02%, Allied Health personnel by 77.89%, Private hospital beds rate by 3.77% rates per 10,000 populations as compared with the year 2006.

However, there is a decrease in the Hospital beds by 3.04%, Health Centers by 13.58%, Governmental hospital beds 25.84% rates per 10,000 populations as compared with the year 2006.

Hence, there are good opportunities for employment of Saudi staff as Physicians, Dentists, Pharmacists, Nurses and Allied health personnel in the private healthcare services and have investment opportunities in the Saudi healthcare industry.

Limitations of the Study

This study is limited to the health resources' indicators of the Kingdom of Saudi Arabia, Ministry of Health for the years 2006, 2011 and 2016.

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Directions for future Research

In future, such research studies should be conducted to compare the improvement on an annual basis and to take appropriate decisions in the healthcare service industry.

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This research was self-financed by the author himself.

Implications of the Findings

There is no significant difference in the mean health resources' indicators level between the years 2006, 2011 and 2016 of the demographic indicators of Kingdom of Saudi Arabia.

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