ARC Journal of Nursing and Healthcare

Volume 5, Issue 3, 2019, PP 17-22 ISSN No. (Online) 2455-4324

DOI: http://dx.doi.org/10.20431/2455-4324.0503003

www.arcjournals.org



Health Care Utilization in Dubai 2008-2017, Growth Profile and Future Projections

Hamid Yahya Hussain¹, Nazar Salim*², Massoumeh Zadeh³, Amna Al Mehairi³, Shila Sajan ³

¹ Research Studies and data analysis dept. strategies and corporate development-Dubai Health Authority
² In-Service Education Department, Dubai hospital, Dubai Health Authority, Dubai, United Arab Emirate.

³ Dubai hospital, Dubai Health Authority, Dubai, United Arab Emirates

*Corresponding Author: Nezar Ahmed Salim, Education Department, Dubai hospital, Dubai Health Authority, Dubai, United Arab Emirate. Email: Nezar_dubai30@yahoo.com

Abstract

Background: With increasing demands, long waiting list, and limited operating hours at public hospitals, and with the flexibility and soft handling of the patients in private care, the private sector attracts significant investments. Moreover, due to applying health insurance law in Dubai and the expansion in health care expenses coverage, the growth of health care services at the private sector has remarkably increase demand on private investments in the healthcare industry.

Objectives: To study the Growth of health care services pattern in Emirate of Dubai during the last 10 years, to study the expected demands on the health care services in the coming years

Methodology: Retrospective Records review for Dubai annual statistical report for the year 2017 review has been carried out, all secondary data collected along almost one-decade duration (10 years) related to outpatient visits and inpatient visits at Dubai Health authority facilities, Dubai health care city facilities, ministry of Health facilities in Dubai and private sector facilities in Dubai. All data has been collected based on systematic data collection procedures and methodology. The data covered all age groups of the population, all genders, nationalities, ethnicities, and races. Data cleaning, data ordering, coding, entry, analysis and interpretation has been carried out as per standard procedures of data management.

Results: The study shows that the number of outpatient attendees at Dubai Health Authorities facilities during the year 2008 was 1.39 million continuously increase and showed 1.92 million during 2013 and reached up to 2.26 million during 2017. while it was 3.43 million patient at private sector and Dubai Health care city facilities during 2008 increased up to 6.35 million during 2013 and reached up to 8.74 million 2017, as for ministry of Health facilities outpatient attendees 0.46 million increased up to .52 million in 2013. The shows that about 85658 patient has been admitted to all Dubai Health authority facilities in 2008 increased up to 149124 patient in 2014 and about 72256 patients admitted as an inpatient in private sector facilities as well as Dubai health care city facilities reached up to 191444 patients in 2015 and 220425 in 2017

Conclusion: Over the last Ten years, the demand for inpatient and outpatient services in Dubai continued to cause pressure on healthcare delivery system. Although led by public policies and vision, the health sectors were driven remarkably by the private health delivery market completely. The health care services kept relying on private sector participation to shoulder increasing demand. The public sector in health care industry in Dubai revealed significant difficulties due to saturated capacity, long queues, and limited opening hours at public hospitals, the efficiency and higher quality in private care, by comparison, have propelled private investment in the sector. The study concluded that both outpatients and inpatients trends in Dubai Emirate during the years 2008-2017 has been steadily and significantly increasing on annual based and the demand for health care services almost tripled during the last 10 years. That means, if the growth rate stay in the same rate and style for the coming 10 years, we have to be prepared enough to meet the triple of current capacity in terms of human resources, material, equipment, policies, facilities and other logistics.

Keywords: Health Care, growth, future projections Dubai

1. Introduction

Physicians usually practicing both part time in and outpatient care, as per office-based care delivery, or outpatient care is as significant and important as inpatient care. Health care, particularly of Inpatient service provider, will be directed toward serious ailments and trauma that require one or more days of overnight stay over the last Ten years. The demand on inpatient and outpatient services will continue to coerce healthcare delivery system. Due to significant population growth, extended life expectancy, and an up raising of the incidence of NCDs, the health market will keep relying on private sector participation, capacity and flexibility of response to shoulder increasing demand, as well as, soft handling of patients.

For many reasons like, increasing demands on services, elongation of waiting time before receiving, and limited operating hours at public hospitals, the flexibility and soft handling of a patient at private care in private care attract significant investment in the private sector. Moreover, by applying health insurance law in Dubai and expanding in health care expenses coverage, the growing health care services at private sector have been remarkably grown and increase demand on private investment in the healthcare sector. During the last decade 2008-2017, population health status and health services provided by different parties have improved noticeably in relevant quantity and quality.

As referred to World Health Organization (WHO) [2], the UAE health care system achieved good progress in terms of response, population access, coverage, quality, Governance, and outcomes out of 190-health system worldwide Not only that, but Sometimes it comes similar or better than many other international health care systems such as Canada (ranked 30), Australia (32), New Zealand (41), the United Arab Emirates (27), Qatar (44) and Kuwait (45). In spite of that, health care system in UAE as well as in Dubai kept encountering the number of significant difficulties that necessitate new health system vision, mission, values, and strategic plans and operational policies.

The outlines of the structural development of health care system in Dubai is currently urged to revise priorities and emphasis on private, semigovernment as well as the public sector through a continuous reshaping of health care delivery, reconsidering socio-economical contexts, effective targeting procedures and sustainable reviewing of the key opportunities and challenges. The review must highlight any demographic changes, economic developments, and population transitions. [3, 4]

The national income should be sufficient to achieve major advances in health care, currently, the majority of people depend on modern medicine on the contrary of the 30 years back where traditional medicine was significantly

applied. The prevalence of NCD remains high especially CVD, Diabetes mellitus and the incidence of epidemic diseases stayed high among the population [5, 6]. Since then, substantial improvements in health care have been achieved in Dubai Health care system. This study will inspect the trends and developments of Dubai healthcare sector, highlight its current situation, and forecast its emerging opportunities and challenges through 2025. [7-9].

2. OBJECTIVES

To study the Growth of health care services pattern in Emirate of Dubai during the last 10 years

To study the expected demands on the health care services in the coming years

3. METHODOLOGY

Retrospective Records review for Dubai annual statistical report for the year 2017 review has been carried out, all secondary data collected along almost one decade duration (10 years) related to outpatient visits and inpatient visits at Dubai Health authority facilities, Dubai health care city facilities, ministry of Health facilities in Dubai and private sector facilities in Dubai. All data has been collected based on systematic data collection procedures and methodology. The data covered all age groups of population, all genders, nationalities, ethnicities, and races. Data cleaning, data ordering, coding, entry, analysis and interpretation has been carried out as per standard procedures of data management.

4. RESULTS

Figure no (1) shows that the number of outpatient attendees at Dubai Health Authorities facilities during the year 2008 was 1.39 million continuously increase and showed 1.92 million during 2013 and reached up to 2.26 million during 2017, while it was 3.43 million patient at private sector and Dubai Health care city facilities during 2008 increased up to 6.35 million during 2013 and reached up to 8.74 million 2017, as for ministry of Health facilities outpatient attendees 0.46 million increased up to .52 million in 2013. Figure (2) shows that about 85658 patient has been admitted to all Dubai Health authority facilities in 2008 increased up to 149124 patient in 2014 and about 72256 patients admitted as an inpatient in private sector facilities as well as Dubai health care city facilities reached up to 191444 patients in 2015 and 220425 in 2017.

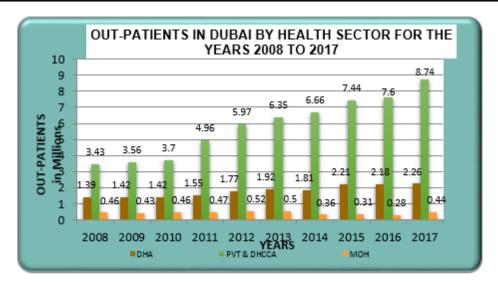


Figure 1. Outpatient attendees in Emirate of Dubai for the years 2008-2017

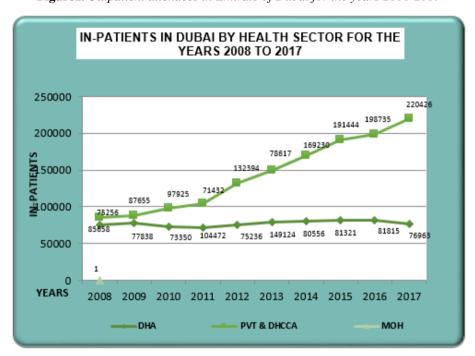


Figure 2. Inpatients attendees at Emirate of Dubai for the years 2008-2017

5. DISCUSSIONS

The current study revealed that the demand for health care services in the emirate of Dubai had tripled comparing 2008 to 2018, reflecting tremendous increase for health care services by the population. These remarkable findings may be linked to many factors like population growth, extended life expectancies and heavily investing in the health care industry. The demand for healthcare services anticipated to continue to rise over the upcoming ten years, backed again by rapid population growth specially by in migration, longer life expectancy due to improving of quality of life, a larger aging segment, and the prevalence of long-term non-

communicable diseases. The government needs to start initiatives to enhance public health-care delivery systems and to encourage private sector expansion and investments in main player of the three tiers medical care: primary, secondary and tertiary. Nevertheless, the government efforts must be divided between providing healthcare services for all three tiers, while greater revenue drivers for the private sector will still be in secondary and tertiary care. Health insurance platform should continue to act as a catalyst in propelling private sector participation forward.

Such results found to be in some way similar to the other outcomes by Saudi health care system performance during the last decades, which believe similarly that the demand for healthcare services will keep rising rise over the upcoming five years, driven by continuous population growth, expanding aging segment, and the increasing prevalence's of long-term non-communicable diseases. In similar approach, Saudi government efforts divided between providing healthcare services at primary, secondary and tertiary level, focusing more at primary health care module, private investment showed more appetite in secondary and tertiary care, and anticipated all comprehensive health insurance scheme will act as a catalyst in propelling private sector participation forward.

The expansion of health services provided by Dubai health care system in general with all its providers (Private sector, Public sector, Semigovernmental sector) along the last decade is having some similarity as well with Oman health care system and the services provided, showing that Oman health care system is the secondfastest growth in the region attributed to rapidly rising population, the roll-out of mandatory insurance during the year and rising cost of care. Further. treatment of non-communicable diseases and preventive care measures are accounting for a large portion of the healthcare expenditure.

Consequently, current healthcare expenditure on outpatient and inpatient services in Oman is projected to grow at an annualized average rate of 10 percent to \$1.5 billion and \$2.3 billion, respectively, by 2022. Expenditure on other healthcare services is expected to grow at a compounded annual average rate of 6.6 percent during the projected years. [10-13]

Furthermore, the Saudi health system keeps going forward, the rising demand for hospitals and beds will require the Kingdom to invest an estimated total of SR23.3 billion between 2010 and 2015. An increment of 23,290 beds in both the public and private sectors will put the Kingdom at a feasible ratio of 2.5 hospital beds per 1,000 population, just below the current global average ratio of 2.7. The private sector's investment share will amount to a total of SR9.6 billion by 2015, equivalent to an annual outlay of approximately SR1.6 billion. The success factors for private operators, beyond growth in key financial indicators, include the ability to sustain

highly skilled medical workforce through profit sharing schemes, contractual relationships with large companies, and alliances with institutions or medical equipment providers that can offer private hospitals access to the latest machinery.

Nevertheless, the Challenges facing health sector in Dubai has special nature and linked to highly capital-intensive nature of the industry acting as a barrier to entry, the lack of domestic talent and a large reliance on foreign labor, as well as rising cost of medical care restricting margins. [14-16]

Demands for health care service in Emirate of Dubai are expected to upraise in the next decade due to many factors like the rapidly growing prevalence of lifestyle diseases and aging population are prompting investments in long-term and post-acute care rehabilitation (LTPAC), specialized clinics and home healthcare providers, as well as the vast economic and business development. [17-25]

The present study extrapolated that, if the population growth rate keeps in the same rate or higher for the coming 10 years, the extended life expectancy, modern life style as determinant for health, the health system mandated to be prepared enough to meet the triple fold needs of current capacity as of 10 years a head from now, as related to of qualified man power, technology based material, equipment, policies, facilities and other logistics.

6. CONCLUSION

Over the last ten years, the demand for inpatient and outpatient services in Dubai continued to pressurize healthcare delivery system. Although led by public policies and vision, the health sectors were driven remarkably by the private health delivery market completely. The health care services kept relying on private sector participation to shoulder increasing demand. The public sector in health care industry in Dubai revealed significant difficulties due to saturated capacity, long queues, and limited opening hours at public hospitals, the efficiency and higher quality in private care, by comparison, have propelled private investment in the sector. The study concluded that both outpatients and inpatients trends in Dubai Emirate during the years 2008-2017 has been steadily and significantly increasing on annual based and the demand for health care services almost tripled

during the last 10 years. That means, if the growth rate keeps in the same rate and style for the coming 10 years, we have to be prepared enough to meet the triple of current capacity as of 10 years a head from now in terms of human resources, material, equipment, policies, facilities and other logistics.

7. RECOMMENDATION

Comprehensive health system and the government responding plan for the coming 10 years demand needs to be set up at strategy level including expansion at infrastructure, recruiting qualified workforce and fortuning advanced health-related technologies.

ETHICAL ISSUES

Standard ethical procedures applied throughout all stages of the study

REFERENCES

- [1] Gallagher EB. Modernization and health reform in Saudi Ara1. Bias, Chapter 4. In: Twaddle AC, ed. Health care reform around the world. London, Auburn House, 2002:181–197.
- [2] The world health report 2000. Health systems: improving per2. Performance. Geneva, Word Health Organization, 2000.
- [3] Key indicators.3. Central Department of Statistics and Information, Saudi Arabia [online database] (http://www.cdsi.gov.sa/english, accessed 27 June 2011).
- [4] World health statistics28. Geneva, World Health Organization, 2010.
- [5] Walston S, Al-Harbi Y, Al-Omar B. The changing face of health14. Care in Saudi Arabia. Annals of Saudi Medicine, 2008, 28:243–250.
- [6] Alharthi F et al. 15. Health over a century. Riyadh, Ministry of Health and ASBAR Centre for Studies Research and Communication, 1999.
- [7] Mufti MHS. 16. Healthcare development strategies in the Kingdom of Saudi Arabia. New York, Kluwer Academic/Plenum, 2000.
- [8] [New strategy for health services in Saudi Arabia]. 39. Al-Egtisadia Daily, 9 September 2009 [in Arabic].
- [9] Spectrum version 4.47. Policy Projection Modeling Tool. s.l: Glastonbury CT, USA: Futures Institute. (With support from USAID Health Policy Initiative, Bill & Melinda Foundation, United States Fund for UNICEF, UNAIDS, WHO, UNICEF, GHWA).
- [10] United Nations Development Program (UNDP). Human Development Report: Human.

- Development to eradicate poverty. New York, USA: United Nations Development Program (UNDP), 1997. HDR. 0-19-511996-7.
- [11] World Health Organization. The World Health Report 2000. Health Systems: Improving Performance. Geneva, Switzerland: World Health Organization, 2000. 92 4 256198X.
- [12] World Health Report 2008. Primary Health Care: Now More than Ever. WHO press? Geneva, Switzerland: World Health Organization, 2008. World Health Report. 978 9241563734
- [13] https://timesofoman.com/article/130792cited 01/02/2019.
- [14] The World Bank. How to Classify Countries. Countries and Lending groups. [Online]
- [15] World Bank, Washington DC, USA, January 15, 2013. [Cited: January 15, 2013.] http://data.worldbank.org/about/country-classifications/country-and-lendinggroups#High-income.
- [16] National Center for Statistics and Information. Major economic and social indicators. Monthly Statistical Bulletin. June 2013, Vol. 24, 6.
- [17] Statistical Advisory Committee, Ministry of National Economy. Sustainable Development Indicators. Muscat: Ministry of National Economy, Sultanate of Oman, 2006. Ministry of National Economy is now the National Center for Statistics.
- [18] World Health Organization. World Health Statistics. Geneva, Switzerland: World Health Organization, 2012. 978 92 4 156444 1.
- [19] World Economic Forum. The Global Competitiveness Report 2012-2013. Geneva, Switzerland: World Economic Forum, 2012. ISBN-13: 978-92-95044-35-7, ISBN-10: 92-95044-35-5.
- [20] World Economic Forum. The Travel & Tourism Competitiveness Report 2013: Reducing Barriers to Economic Growth and Job Creation. Geneva, Switzerland: World Economic Forum, 2013. ISBN-13: 978-92-95044-40-1.
- [21] World Health Organization. Everybody's Business: Strengthening Health Systems to Improve Health Outcomes: WHO's Framework for Action. WHO Document Production Services. Geneva, Switzerland: World Health Organization, 2007. 978 92 4 159607 7.
- [22] United Nations Children's Fund (UNICEF). The Progress of Nations: The Nations of The World Ranked According to their Achievements in Health, Nutrition, Education, and Family Planning and Progress of Women. New York, USA: UNICEF, 1993.
- [23] WHO Regional Office of Eastern Mediterranean and UNICEF. The Mortality and Health Transition in Oman: Pattern and Processes. [ed.] A G Hill, A Z Muyeed and J A Al-Lawati. Muscat: s.n., 2000.

- [24] Cordell, M. What about health care everywhere else? UN Dispatch. [Online] March 22, 2010. [Cited: December 12, 2011.] http://www.undispatch.com/what-about-health-careevery where-else.
- [25] United Nations Development Program (UNDP). The Real Wealth of Nations: Pathways to Human Development. New York, USA: United Nations Development Program (UNDP), 2010. HDR. 9780230284456 90101

Citation: Hamid Yahya Hussain, Nazar Salim, Massoumeh Zadeh, Amna Al Mehairi, Shila Sajan, Health Care Utilization in Dubai 2008-2017, Growth Profile and Future Projections. ARC Journal of Nursing and Healthcare. 2019; 5(3):17-22. doi: dx.doi.org/10.20431/2455-4324.0503003.

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