

Digital Health: Pakistan's Missing Link to Equitable Rehabilitation Access

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Introduction

The World Health Organization's (WHO) most recent Rehabilitation 2030 Initiative urges to uplift rehabilitation as an essential health service and key element of Universal Health Coverage (UHC). This initiative emphasizes the accessibility of rehabilitation to all people at every stage of their life course and integration of rehabilitation into all levels of healthcare. One in three people may need rehabilitation services in their lifetime. In low and middle income countries (LMICs), only less than 50% of people in need of rehabilitation can avail the necessary care, which limits quality of life and increases disability.¹ Although the country is in high need, rehabilitation is still neglected in terms of accessibility, funding and systematic integration. I am writing this letter to highlight this critical issue and make the case for incorporation of rehabilitation into national policy. In Pakistan, the need for rehabilitation is extensive as the proportion of persons with disabilities is 9.64 Per cent constituting approximately 25 million.² Despite this distressing figure, rehabilitation still lacks due representation in planning, funding and services provision.

The Rehabilitation in Pakistan is hampered by complex structural, financial, and awareness related barriers that are further multiplied by lack of assistive technology.³ The provision of rehabilitation services by the private health sector remain financially out of reach for majority of the population while government sector lack adequate staff and specialized equipment. The public awareness, availability of rehabilitation services to only big cities and trained human

resource are few of the systemic gaps to be addressed. Pakistan has formally agreed to the disability rights and equitable access to services through the UN convention on the rights of persons with disabilities (CRPD-2006) and disability and rehabilitation policy framework (2019-2023).⁴ However, its implementation is still slow and incomplete.

Digital health facilitates access to rehabilitation services by reducing geographical inequalities. With the increasing use of mobile phones and the internet in Pakistan, digital rehabilitation can be quickly up scaled to provincial and rural areas. Furthermore, digital solutions foster continuity of care for patients with chronic conditions by reducing travel costs, and the burden on hospitals. Innovations in digital health including assistive technology (AT), Tele assessments and tele rehabilitation offers best opportunity to close these gaps speedily and cost effectively. Therefore, a coherent national action plan should be made to unite health authorities, rehabilitation service providers and civil society around a shared vision for digital rehabilitation. This strategy should include digital referral channels for the community, integration with national health management information system, and alignment of rehabilitation data streams with AT registries that advocate the principles of equitable access and non-discrimination for the persons with disabilities.⁵

Standardization is the key for both quality and safety. Digital skills and ethical standards for tele-rehabilitation should be developed by a national regulatory authority that regulates training centers and professionals by issuing licensure. Public education is essential to change social

attitudes. Digital advertisement campaigns through electronic and social media should be done to raise awareness about significance and use of tele-rehabilitation platforms. The development and expansion of digital platforms, digital training of workforce and digital rehabilitation technology innovation is only possible with the allocation of dedicated budget. Therefore, a designated fund shall be allotted for digital integration and rehabilitation.

At present, Pakistan's healthcare system is at critical stage in its development. The current health service model is unable to meet the country's need of over 25 million people needing rehabilitation. Therefore, digital health offers robust, scalable and rights-based solution to fill these gaps in rehabilitation system. Perhaps, "Pakistan can meet its commitments to the WHO Rehabilitation Policy 2030 and UN CRPD by establishing a national accreditation body for digital rehabilitation, allocating dedicated budget for digital up skilling of work force and increasing access to digital assistive technology. The digital health in Pakistan is not merely an upgrade to the existing system but also presents as a missing link to achieve equitable, accessible and dignified rehabilitation for all.

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