

# Review of: "[Commentary] Decentralization — “The Fundamental Challenge in the Pakistan Is the Decentralization of Health Care”"

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This editorial aims to highlight the selective policies to effect change in the robust culture of healthcare organizations. Although the author has mentioned that Pakistan's healthcare system consists of public, private, and non-profit providers, she has also explained that the decentralization of the health system has particularly affected the three areas of workforce planning, data availability, planning responsibility, and implementation of planning decisions because decentralizing health systems means moving decision-making away from central control and closer to the end users of health services. Moreover, (Islam, 2002), viewed decentralization reform as an opportunity to improve the health system. Hence, decentralization of the health system in Pakistan could potentially bring a lot of benefits to the healthcare system in Pakistan. Nevertheless, she does not further describe how public, private, and non-profit providers in Pakistan's healthcare system are able to achieve decentralization of the health system.

In addition, she has also explained that general principles of capacity building for health sector reform would need to include a long-time frame for the natural development of deep knowledge over time, as well as a situational analysis of key constraints and existing capacity to make optimal use of available resources and capacities that are still not present in the system. Hence, any later phases of reform should be delayed until sufficient efforts have been undertaken for capacity building, establishing a long-time frame for the natural development of deep knowledge over time, and performing a situational analysis. However, she does not explain how public, private, and non-profit providers in Pakistan's healthcare system are able to succeed in the capacity building for health sector reform.

Finally, she has mentioned that it might be difficult to combine efficiency with decentralization measures in order to achieve the goals of decentralization, since many countries may see differences in health care between their provinces as a result of divergent political agendas, uneven policy directives, and different worldviews. Hence, additional research is usually necessary to examine the intricate connections between the various reform tracers' dimensions. However, she has also emphasized in the abstract of this editorial that a very important development in the Constitution of Pakistan is the 18th Amendment of 2010, which enables provincial governments to review and address gaps in the human, administrative, managerial, and financial resources of the health sector. This is because this 18th amendment has significantly proved that provincial autonomy is not efficiently being put to use in the healthcare sector. Therefore, although the author seems to advocate the importance of provincial autonomy in the healthcare sector, she has also stressed that many countries may see differences in health care between their provinces. This is why she would need to

clearly explain in this manuscript how the provincial governments are able to achieve decentralization of the health system while ensuring that provincial autonomy has been fully exercised within the healthcare sector.