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Workshop 8

Healthcare Challenges in the Gulf Region

Workshop Directors

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Abstract

In recent years, the Gulf Corporation Council (GCC) countries have witnessed a paradigm shift in their standard of living, populations, life expectancy and higher rate of chronic diseases. Furthermore, the recent changes in political systems, epidemiological patterns, demographic transition, technological trends as well as health care systems requires the GCC states a systematic approach to address current and future challenges. The escalating healthcare cost is not sustainable using the current government-funded approach. Therefore, a healthcare reform is needed. In light of the above, one might ask the questions are the GCC healthcare systems ready for these challenges? If so, what are their policies and strategies? What is the role of private sector in addressing some of the challenges of the looming epidemic of cardiovascular diseases and cancer etc.? What is the expectation of customers, are they satisfied? Moreover, rapid developments in genomic medicine and medical technology remains a key force in building an effective healthcare delivery in a system that cannot always meet the challenges engendered by the rise of lifestyle ailments. An example of the scale of one of the healthcare problems in the GCC region is non-communicable diseases (NCDs). In the Sultanate of Oman, more than 75% of the disease burden is attributable to NCDs as the leading cause of death. The distribution of chronic diseases and related risk factors among the general population is similar to that of industrialized nations: 12% of the population has diabetes, 30% is overweight, 20% is obese, 41% has high cholesterol, and 21% has a metabolic syndrome (Al-Lawati et al, 2008). To address these and other NCDs, there is a need for regional coordinated and systematic plans involving various stakeholders (from clinicians to politicians through hospital managers and the public) using combination of strategies to address health determinant and risk factors. There might be a need for

a radical solution different from the current approaches which might not be appear to be cost effective as current approaches. Since GCC governments cover over 75% of the total regional healthcare expenditure, effective public health services are essential. Capacity building is important for the development of comprehensive, patient-focused health systems which make optimal use of new technology, share information, provide transparency and apply research to practice. Applying information and communication technology (ICT) enables providers to deliver faster, safer and more efficient citizen-centred health care (Duffy et al, 2003). With this, the need for the creation of a knowledge-based society is an effective tool in both promoting public health awareness and responding to public health needs. One of the key challenges to the GCC healthcare system is the shortage of qualified medical workforce. With the predicted increase in population and hence an increase in healthcare requirement, disease complexity, advances in technology etc. the need for a qualified healthcare workforce is seen as a crucial factor in delivering healthcare solutions. Healthcare managers must tackle these multiple challenges by balancing cost, quality and access in a manner that is both sustainable and consistent with changing social values and political goals. This necessitates a thorough and robust workforce planning with greater flexibility in career structure and adoption of new roles such as the nurse practitioners or physician assistants seen in the UK and USA and ways of working.

Workshop Description and Rationale

The workshop hopes to attract healthcare experts, physicians, and academics interested in issues of healthcare in the Gulf. We welcome case studies and cross-sectional papers. Topics that could be tackled in the workshop include, but are not limited to:

- Current and future healthcare challenges and opportunities in GCC
- Factors driving health-care demand in GCC
- Insurance and funding for Healthcare access in GCC
- Innovation in healthcare delivery
- Healthcare policies, systems and decision making in healthcare
- Workforce planning and training
- Hospital capacity planning
- Inherited / congenital defects in the Gulf

References:

Al-Lawati JA., Mabry R., Mohammed AJ. (2008) Addressing the threat of chronic diseases in Oman. Prev Chronic Dis, Vol. 5, No.3 Duffy, M., Wimbush, E., Reece, J., and Eadie, D. (2003), Net profits? Web site development and health improvement, Health Education, Vol. 103, No. 5, pp. 278-285.

Workshop Director Profiles

Dr. Ahmed Al-Alawi is co-founder and director at Cambridge Consulting Alliance (Cambcal), a management and a technology consultancy based in Cambridge, UK. Ahmed consults and advises on strategic healthcare investments, healthcare

management, manufacturing and innovation. Prior to Cambcal, he worked as senior scientist at Genzyme specializing in applying new technologies for building robust chemical processes. In his career, Ahmed has been influential in the pharmaceutical industry where he was steering committee member of the UK/Eire Process Analytical Technologies Community of Practice. Dr. Al-Alawi has built his career at Genzyme, leading various projects in drug developments for the company. He has also held positions at Shell International and as an academic at the University of Newcastle-upon-Tyne. Along with this, he works closely with leading universities, organizations and businesses on shaping the future for healthcare and innovation globally. Recently, he was selected to the Science and Engineering Ambassador for Suffolk and Cambridgeshire. A creative and influential individual, Dr. Alawi's education has been widespread. He is a Chartered Chemical Engineer with a BEng and Ph.D. in Chemical Engineering. Ahmed is currently completing his MBA from Henley Business School.

Shelley Gregory Jones is the Development Director at the PHG Foundation in Cambridge, England. The PHG Foundation finds the best ways to harness the power of scientific advances to prevent illness and tackle disease. They are an independent, non-profit body with a focus on policy and service development, working to accelerate the effective, responsible use of bioscience in healthcare and promote equal access to services. Her experience includes disability and public health charities in roles including Chief Executive, Strategy Director and Development Director. Her work covers strategic analysis, business development, communications, fundraising and international networking. In 2007, she completed an MBA from the Judge Business School and she has a BA (Hons), MA in philosophy from Girton College, University of Cambridge. She serves on the Cambridge Judge Business School Alumni Advisory Board and is a Senior Member of Hughes Hall, Cambridge.