

**THE SOCIO-CULTURAL CHALLENGES IN DELIVERING TUBERCULOSIS
CARE PACKAGE AT PUBLIC HOSPITALS, ISLAMABAD**



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Desire is the key to motivation, but its determination and commitment to an unrelenting pursuit of your goal -commitments to excellence-that will enable you to attain the success you seek.”

Mario Andretti

Dedication:

I would like to dedicate this research paper to my parents who have imparted me with knowledge, strength and are a constant support throughout my life.

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I would like to acknowledge my honorable supervisor, mentor, Professor Sir Shaheer Ellahi with his motivation, hard work and guidance it was possible for me to carry out this research paper. Under his supervision, I get to learn a lot about research; also he imparted us with the golden knowledge which will always be helpful in future. I am really Thankful for him to give me an opportunity to work under his enlightenment.

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Abstract:

Tuberculosis is a contagious, airborne disease and also considered as one of the prevalent diseases. Pakistan ranks eighth position among the high burden TB countries. Pakistan contributes 44% of burden in Mediterranean Region. According to the WHO, 5.1% percent TB patients are the total national disease burden in Pakistan. The study analyzed the extent of problems faced by the care providers, the challenges faced in identification of the disease and during diagnosis, Problems faced in counseling of the patients and for follow up. It also observed the challenges which health providers face every day while treating chronic patients. It is a qualitative research carried out at Pakistan Institute of Management sciences. The data is collected through in-depth interviews. According to DOTS quarterly report 2015, one hundred and ninety nine patients were diagnosed with TB in PIMS hospital. The care providers have to face a lot of problems such as lack of human resource, patient load, patient's compliance, gender discrimination, time constraint, misconception about the curability and the stigmatization attached to the disease, ineffective counseling sessions and inefficient programs for follow up. This clearly shows the failure of hospital management and TB treatment is not made effective according to the TB guidelines.

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