

# [Essay on lack of preventive medicine training in third world countries](https://assignbuster.com/essay-on-lack-of-preventive-medicine-training-in-third-world-countries/)

[](https://assignbuster.com/)[Business](https://assignbuster.com/essay-subjects/business/), [Strategy](https://assignbuster.com/essay-subjects/business/strategy/)

Thesis: An investigation of how the lack of preventive medicine training in Third World Countries hampers health care delivery.

## Introduction

Preventive medicine refers to measures that are undertaken to avert disease occurrence. The methods used in the preventive approach are distinct from those used when curing diseases or treating their symptoms. In practice, preventive strategies are usually implemented at the primary, secondary, tertiary and quaternary levels (Isturiz, Luna and Ramirez 820).

Preventive medicine has been adapted in the first and second world countries but still lags in many third world countries. There are several factors that contribute to the situation in the Third World which may include lack of training facilities and poverty. This paper seeks to investigate how the lack of preventive medicine training in Third World Countries hampers health care delivery.

## State of preventive medicine training in the third world

The health facilities found in the developing regions of the world are inadequate and cannot cater for the health needs of everyone living in those areas. The reason partly lies in lack of proper government policies on medical training, and the lack of sufficient medical training facilities. The lack of political will has a lot to do with the nature of healthcare provided in the developing regions of the world (Okafor 26).   
Though inadequate manpower affects the medical field as a whole, preventive medicine is the most affected and is almost nonexistent in some countries. Preventive medicine is not popular among medical graduates, who tend to go into areas that can offer them the opportunity to run private clinics.

In order for preventive medicine to work, public input is of paramount importance (Pittet, Allefranzi and Storr 420). Sanitation plays a significant role in preventing of diseases. The majority people living in the developing world are not aware of the relationship between sanitation and personal hygiene. The strategies used by governments in the developing world to teach the masses about the importance of hygiene have not been successful. Most of the uneducated people do not know the link between diseases and poor hygiene. This greatly hampers the effectiveness of disease prevention programs. With few or no experts in disease prevention approaches and with majority of people not informed on importance of preventive medicine, most third world countries only depend on palliative and curative medicine (Pittet, Allefranzi and Storr 421).

## Impacts on healthcare delivery

The lack of proper disease prevention strategies in developing countries that occurs partly due to lack of training puts a lot of pressure on the under equipped and understaffed curative wing. There are a number of impacts created by this development. First, healthcare quality is compromised due to the fact that the available medical staffs are overstretched. Secondly, healthcare is expensive as people tend to scramble for limited health facilities and professionals (Okafor 26). Thirdly, disease prevalence higher in such countries and this in turn creates more social and economic difficulties. All in all the poor state of preventive medicine increases the chances of mortality as it is more difficult to cure a disease than prevent it (Isturiz, Luna and Ramirez 824).

## Conclusion

This paper sought to investigate how the lack of preventive medicine training in Third World Countries hampers healthcare delivery. The lack of preventive medicine training in Third World Countries puts pressure on curative healthcare, increases disease prevalence and mortality rates. Effective strategies should be adopted by governments in the Third World Countries to ensure that proper preventive medicine training is undertaken for overall good.

## Works Cited

Isturiz, Raul, Carlos Luna and Julio Ramirez. " Clinical and economic burden of   
Pneumonia among adults in Latin America." International journal of Infectious   
Diseases 14(2010): 853-856. Print.   
Okafor, Enugu. " Challenges in critical care services in Sub-Saharan Africa:   
Perspectives from Nigeria." Indian Journal of Critical Care Medicine   
13. 1(2009): 25-27. Print.   
Pittet, Didier, et al. " Clean Care is Safer Care’: the Global Patient Safety Challenge   
2005—2006§." International Journal of Infectious Diseases 10(2006): 419-424.   
Print.