



## Trends in the Utilization of Healthcare Services of NPOs by the Elderly

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### ABSTRACT

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The global dynamics of population indicates that the proportion of the elderly population is increasing. Pakistan is the 6<sup>th</sup> most populous country in the world (worldometer 2025). The British Council report (2019) projected the estimation of over-60 population at about 7% (14 million people). The World Bank report (2022) and Pakistan Population Census (2023) shows that 65+ population at 4.27% with expectations to reach 8.5% by 2030 and 12.9% by 2050 respectively. It becomes a challenge for the public sector healthcare services to meet the needs of the growing population. Non-Profit Organizations are providing a large spectrum of services to the marginalized communities in Pakistan. To find the trends of utilization of healthcare services by the elderly population offered by the NPOs. By using cross-sectional survey method, one Tesil - Raiwind was selected from Lahore city. Purposive sampling was used to select registered NPOs (N=13) providing healthcare services (Diagnostic and treatment) to the elderly populations. An increasing trend was observed in varied healthcare services availed by the elderly. Accessibility, affordability, equitability shapes elderly perceptions and understanding, trust worthiness, satisfaction, empathy, and care to create a positive and meaningful image to seek healthcare services.

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## 1.0 Introduction

Punjab is the largest province of Pakistan. Lahore - the capital of Punjab province has a high growth rate of population and continues to expanding with estimates for 2025 projecting the city is the 27th most populous in the world. According the World Population Review “Lahore Population 2025” indicates the estimates of Lahore’s population at approximately 14.8 million for 2025 with an annual growth rate of about 2.9%. It highlights Lahore as Pakistan’s second-largest city and the 42nd most populated city in the world, expanding rapidly in size and population density. Pakistan Bureau of Statistics (PBS) “7th Population & Housing Census of Pakistan 2023” Lahore’s population was 13,004,135, with a 2.65% annual growth rate since the 2017 census. The Lahore city is facing unique urban health challenges due to urbanization and industrial growth, rural to urban migration, overburdened hospitals, high ratios of patient-to-doctor at healthcare settings, and minor access to health care among low-income populations (World Bank 2020). Other challenges than the increasing population also existed like inflation, economic and political instability.

The increasing population pressure embraced with a number of issues like housing, education, health etc. Therefore, elderly population is also increasing embraced with multidimensional challenges especially dependency and no income. All kinds of access especially of marginalized population become a challenge. Structures and services at public healthcare sector are overburdened. Within the existing healthcare infrastructure, access to healthcare for the elderly in Pakistan is highly complex due to a mix of infrastructure limitations, economic barriers, and changing social dynamics. The public healthcare system is underfunded and often overwhelmed, resulting in long wait times, suboptimal care, and a lack of specialized services for older adults. Most elderly individuals rely on out-of-pocket payments, as health insurance coverage is minimal and social safety nets for seniors are either weak or non-existent. Main barriers include economic challenges (majority of elder care expenses paid by families, leading to catastrophic health expenditures or unmet health needs, especially for those without financial support or pension), chronic diseases (hypertension, diabetes, arthritis, and depression), scarce specialized geriatric care, in rural areas, health facilities are even less accessible, while private healthcare is prohibitively expensive for most families. Among social and structural issues, Rapid urbanization and the decline of the traditional extended family model have left many elderly individuals without familial or community support. This has increased risks of social isolation, elder abuse, and neglect. The caregivers face significant burdens, as they are often responsible for elderly relatives’ physical, emotional, and financial well-being, which can strain family resources, particularly as economic pressures rise. It required an accessible, available, acceptable, affordable, and accommodating elderly care system to address their unique physical, mental, and social needs other than societal changes.

Pakistan healthcare system is facing considerable challenges such as inadequate infrastructure, funding, burden of disease, and epidemics. To meet these challenges, it is the need of the time for a robust healthcare infrastructure and support services to prevent elderly population and isolation easing the burden on family caregivers. Although Pakistan is a signatory of SDG of

UNO (2015) to ensure essential health services to everyone without any financial hardship. The Government of Pakistan have taken initiatives in 2015, 2019, and 2022 in KPK, AJK, ICT, Gilgit, and Balistan. Unfortunately a wide gap existed yet as the increased longevity and the presence of chronic conditions along with the epidemics, influencing the access to the healthcare for elderly (National Health Vision Pakistan 2016-2025 Government of Pakistan).

To handle the situations, non-profit organizations (NPOs) are working to minimize the gaps left by the public health sector as crucial actors. Non-profit organizations are providing a spectrum of services range from large international settings to locally based organizations (Ali & Khan, 2019). Non-profit organizations generally focus marginalized communities where accesses to public healthcare services are either absent or insufficient. These organizations operate services in a flexible manner, use community-based approaches, and motivate donors for charities and donations to enable them to work for innovative and cost-effective health interventions (Ali & Iqbal, 2019).

### 1.1 Research Objective

The existing study focuses on to find the:

1. Trends in the utilization of healthcare services by the elderly population provided by the NPOs

## 2.0 Literature Review

Pakistan is facing critical challenges in healthcare and eldercare including limited public funding, brain drain of healthcare professionals, inadequate infrastructure, and change of family system which exacerbates isolation and neglect of the elderly population (Khan, A, M., & Zafar, S., 2025; Pakistan Today, 2025; Saif, M., 2025). Dawn News (2025, June 22) under the headline “Healthcare system riddled with fundamental flaws: minister” highlights the consequences of inadequate funding, systemic flaws, and the persistence of chronic diseases due to poverty and isolation, which especially impact older adults. “Sehat Sahulat Cards” 2015 initiative was an effort to cover the growing needs of the elderly population. Inflation further makes difficult to access healthcare especially for those having chronic illnesses. There are very few organizations existed to meet the needs of growing elderly population. Studies highlighted inadequate resources and insufficient infrastructure. There are multiple factors such as wealth, education, geographical disparities, and implementation of National Health Policies influencing healthcare.

Studies showing increasing access/trends of the elderly towards NPOs healthcare in Pakistan are scare. There is a need to address the growing elderly population and their significant healthcare needs keeping in view of the contextual factors like the increasing burden of chronic illnesses, the limitations of traditional family support systems, financial vulnerabilities, and limited specialized geriatric care to create a crucial context for Non-Profit Organizations (NPOs) who potentially fill the gaps to facilitate quality care. Mai, S., Cai, J., and Li, L. (2022) study proposed adoption of strategies focused on health insurance, healthcare system, barrier-free facilities, and social support to increase the access to healthcare services for participants, which could benefit their health. Similarly study of Yasir, I., and Ayub, R., (2020) highlighted that aging, poverty and immobility complicated the accessibility and availability of healthcare services especially among

elderly women. Therefore, emphasized the need to advocate the issues faced by elderly women. The nearby available healthcare services facilitate the elderly population being cost effective and equitable to improve their physical, psychological, and social wellbeing (Tariq, J., et al., 2020).

The complexities of healthcare are different in the rural areas of Pakistan. Study of Abbas, M, S., and Azlizan Bin Talib (2024) highlighted the determinants of availability and accessibility to primary healthcare for rural populations in Pakistan. It indicates the barriers and facilitators of healthcare accessibility to understand the complexities of healthcare provision in the rural context with implications for policy formulation and healthcare delivery strategies. Emphasis was on health equity and informs evidence-based interventions aimed at improving healthcare access for underserved populations.

Due to these facts, NPOs adopted community based approach to address health issues. They mobilize community resources; engage local stakeholders to strengthen health outcomes and to ameliorate the access to care (Farooq, M., & Habib, S. (2021). Social workers and community health workers serve as vital links between healthcare providers and patients, enhancing service utilization among underserved populations to achieve improved health outcomes (Khan, A. M., & Zafar, S. 2025). Community engagement initiatives from NPOs (health education campaigns to raise awareness and promote health-seeking behavior) are instrumental to minimize sufferings also ensuring the sustainability of health outcomes (Farooq, M, & Habib, S., 2021; Ahmed & Rahman, 2021).

Different sociological theories such as Activity Theory, Social Exchange Theory and Symbolic Interactionism explain the rising trends of elderly populations utilizing NPOs healthcare services focusing on the need for social engagement, reciprocal relationships, and the meaningful interpretation of care, respectively. Elderly individuals, seeking to maintain their sense of purpose and well-being, are drawn to NPOs that provide community, social support, and person-centered care. The elderly remain happy when they engage actively in life. NPOs foster social interaction and community involvement, providing opportunities for meaningful activities and a sense of belonging that fulfills the need for an active lifestyle. The exchange of relationships, resources seeking benefits with minimize cost creating a mutual beneficial relationship. The communication and services shapes elderly perceptions and understanding, trust worthiness, satisfaction, empathy, and care to create a positive and meaningful image to seek healthcare services. In other words focus is to improve the quality of life.

### **3.0 Methodology**

An exploratory study was designed. A cross-sectional survey method was used in this qualitative study to ensure rich relevant insights. From Lahore, one Tehsil: Raiwind was selected purposively. A semi-structured interview guide was used to collect the data. Keeping in view of the research objective, the interview guide consisted of a list of predetermined open-ended questions aligned with the research topic and research objective. Regarding the healthcare beneficiaries, criteria were set to include only 60+ adult beneficiaries. Year-wise statistics regarding diagnostic services and treatment facilities provided to the elderly population by the NPOs was collected from the in-charge/Presidents of 13 NPOs (registered with the Department of

Social Welfare and Bait-ul-Maal, Government of the Punjab, Lahore under Ordinance 1961) providing healthcare services either on small or larger scale. All the ethical considerations were observed with informed consents obtained from all the NPOs.

#### 4.0 Findings and Results

The provision of healthcare services varies on the capacity (larger to small scale) and nature of services of NPOs. Shoukat Khanum Memorial Trust Hospital is providing healthcare services to the cancer patients, Mughal Welfare Society deals only for eye ailments, Hope Rehabilitation Society deals with artificial limbs since 1989. The small scale NPOs were providing services for general ailments.

Diagnostic services: ECG, Ultrasound, X-ray, Laboratory tests along with treatment services in emergency, first-aid and indoor were provided to the community by these NPOs.

Table 1. *Diagnostic Services NPOs provided to the elderly population*

No	Diagnostic Services	1	2	3	4	5	6	7	8	9	10	11	12	13
1	ECG	789	6240	-	115	-	-	-	-	-	-	-	-	-
2	Ultrasound	1287	21990	-	273	6321	3291	-	-	137	63231	patien	No	-
3	X-ray	392	17432	-	-	-	1527	-	-	-	receiv	ed	diagnostic	-
4	Laboratory	2385	29417	25745	470	11432	-	9771	5637	-	servic	es	provided by	-
5	Phaco Machine	-	-	73270	-	-	-	-	-	-	-	-	-	-
	TOTAL	4853	75079	99015	858	17753	4818	9771	5637	137	-	-	-	-

\*Note: Healthcare Centers:

1. Shaukat Khanum Memorial Hospital; 2. Mansoura Medical Center; 3. Mughal Social Welfare Society; 4. Al-Mustafa Welfare Organization; 5. Mehdi Welfare Association; 6. Hope Rehabilitation Center; 7. Al-Akhyar Foundation Trust; 8. Makkah Welfare Trust; 9. Anjuman-e-Islah-e-Muashara; 10. Umeed Welfare Trust; 11. Life Care Foundation; 12. Izmir Residential Facility; 13. Tarayaq Welfare Group

Table 1 indicates the number of patients supported by these organizations with diagnostic services from 2021 to March 2025. Mansoor Hospital and Mughal Welfare Society provided laboratory test and ultrasound services to the majority of the patients.

Table 2 presented year wise increasing trends of elderly patients got treatment services from these NPOs.

Table 2. Year wise Beneficiaries catered by the NPOs

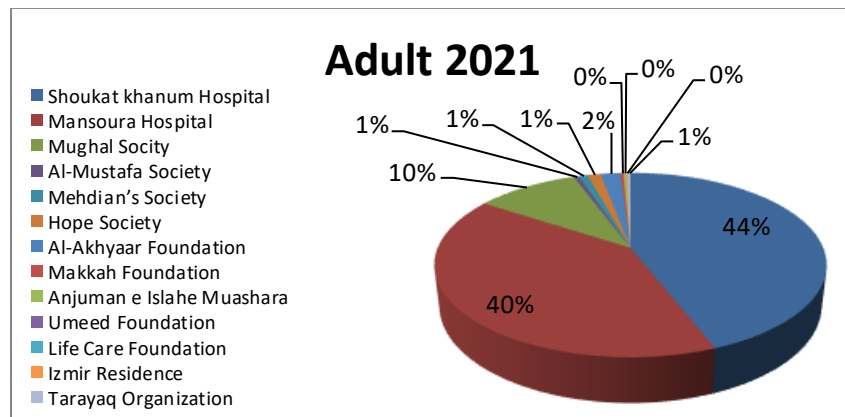
No	Years	1	2	3	4	5	6	7	8	9	10	11	12	13
1.			719									132		
	2025	6813	0	774	977	55	679	414	448	61	-	7	94	20
	(Jan.-Mar.)													
		1726	787	457	234	386	136	427	242	109		649	154	
2.	2024	04	67	33	19	5	07	2	7	2	6	43	0	749
3.		1297	610	397	125	210	119	392	167	234				
	2023	47	29	90	60	1	21	5	2	7	0	0	881	515
4.		7192	453	251	724	158	768	309	136				670	
	2022	5	29	40	0	6	4	1	2	556	1	0	1	508
5.		8376	762	192		170	247	373						
	2021	0	94	30	910	6	7	5	548	435	1	0	297	596

\*Note: Healthcare Centers:

1. Shaukat Khanum Memorial Hospital; 2. Mansoura Medical Center; 3. Mughal Social Welfare Society; 4. Al-Mustafa Welfare Organization; 5. Mehdiyan Welfare Association; 6. Hope Rehabilitation Center; 7. Al-Akhyar Foundation Trust; 8. Makkah Welfare Trust; 9. Anjuman-e-Islah-e-Muashara; 10. Umeed Welfare Trust; 11. Life Care Foundation; 12. Izmir Residential Facility; 13. Tarayaq Welfare Group

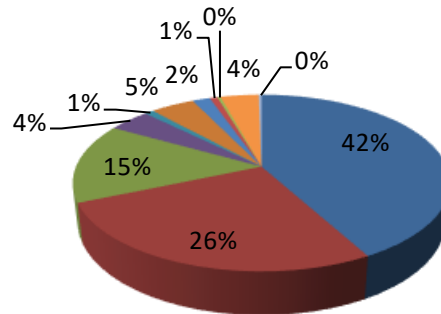
An increasing pattern of elderly patients can be observed from 2021 to March 2025. It can be observed (36% to 42%) of cancer patients at SKMTH 84000 to 173000 and expected to touch 272000 figures at the end of 2025. A double fold increasing trend 2 percent in 2021, 4 percent in 2022, 6 percent in 2023 can be observed at Hope Rehabilitation Society. There was a little decline in 2024 of 1 percent with an increase of 2 percent in 2025 is observable. A drastic declining trend was observed between the years 2021-2024 from 34 percent to 15 percent at Mansoorah hospital. An observable increase is noticeable during the years 2024 and 2025. While a zigzag patterns was observed at Mughal Welfare Society. It is worth mentioning that the Umeed Welfare Foundation addressed Thalassaemia patients specially children.

An increasing trend was observed at Mughal Society 12-34 percent during 2021-2025 whereas Mansoorah Hospital treated 34-21 percent of elderly patients from 2021-2025 respectively. Umeed Welfare Foundation catered 2-4 percent from 2021-2025 respectively (Figure 1).



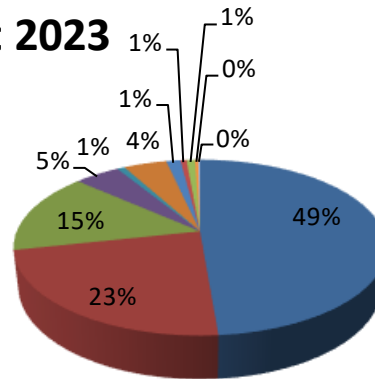
### Adult 2022

- Shoukat khanum Hospital
- Mansoura Hospital
- Mughal Society
- Al-Mustafa Society
- Mehdian's Society
- Hope Society
- Al-Akhyar Foundation
- Makkah Foundation
- Anjuman e Islahe Muashara
- Umeed Foundation
- Life Care Foundation
- Izmir Residence
- Tarayaq Organization



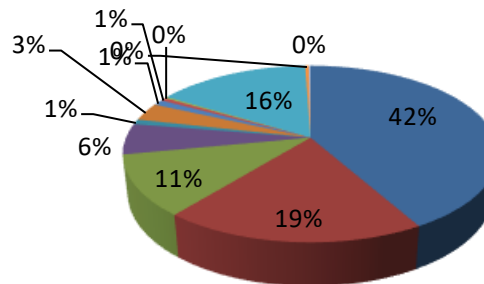
### Adult 2023

- Shoukat khanum Hospital
- Mansoura Hospital
- Mughal Society
- Al-Mustafa Society
- Mehdian's Society
- Hope Society
- Al-Akhyar Foundation
- Makkah Foundation
- Anjuman e Islahe Muashara
- Umeed Foundation
- Life Care Foundation
- Izmir Residence
- Tarayaq Organization



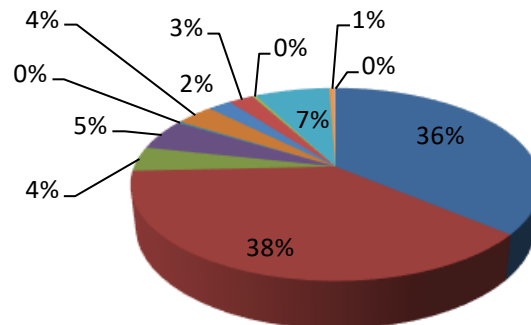
### Adult 2024

- Shoukat khanum Hospital
- Mansoura Hospital
- Mughal Society
- Al-Mustafa Society
- Mehdian's Society
- Hope Society
- Al-Akhyar Foundation
- Makkah Foundation
- Anjuman e Islahe Muashara
- Umeed Foundation
- Life Care Foundation
- Izmir Residence
- Tarayaq Organization



### Adult 2025

- Shoukat khanum Hospital
- Mansoura Hospital
- Mughal Society
- Al-Mustafa Society
- Mehdian's Society
- Hope Society
- Al-Akhyar Foundation
- Makkah Foundation
- Anjuman e Islahe Muashara
- Umeed Foundation
- Life Care Foundation
- Izmir Residence
- Tarayaq Organization



*Figure 1. Comparison of Beneficiaries catered by the NPOs during 2021-2025*

Figure 1 shows comparison of beneficiaries entertained by the organizations during the years 2021 to 2025. For the provision of healthcare services, increasing, declining, and zigzag patterns were observed among the NPO's. The trends in the utilization of healthcare services by the elderly from non-profit organizations (NPOs) indicate generally low engagement with public healthcare facilities, especially for inpatient and outpatient care. Factors influencing these trends include age, health status, availability of medicines, transportation, and perceptions of healthcare quality. Increasing age tends to elevate the likelihood of using local facilities for healthcare services, driven by better availability and perceived quality. The study reveals a predominant preference for such facilities, influenced by factors such as age, health condition, medication availability, transportation, and perceived service quality.

### **5.0 Discussion and Conclusion**

At international as well as at national level, the role of Non-profit Organizations is commendable as they are playing a pivotal role in the provision of healthcare services in Pakistan. Equitable and multidimensional healthcare services are being provided to communities in spite of multiple challenges like infrastructure, funding, skilled manpower, and equipment etc. The burden of diseases is increasing with the increasing population. Epidemics and climate changes are the other challenges. NPOs are managing and catering healthcare services on self-help basis.

In Lahore, larger NPOs like SKMTH and Mughal eye hospital having established infrastructure are prominent in contributing the provision of quality healthcare facilities to all. Equitable access, awareness, and the provision of quality healthcare engage communities' especially elderly population that enhances satisfaction for utilization, well-being, and quality of life. Accessibility and the cost effectiveness i.e free treatment provision especially for the elderly population is a blessing. The increasing trend in varied ailments is evident as patients' not only from Lahore but from the far flung areas benefited with these healthcare services. Few large NPOs like SKMTH is expanding healthcare services in other big cities so that to accommodate outreach elderly population specifically.

It is important to mention here that all NPO's were functioning (from smaller to larger scale) depends on the availability of funds, human and technical resources, or the availability of equipment. Small NPO's generate funds on self-help basis. Variations for the utilization of healthcare services by the elderly might be due to the accessibility or due to some other reasons. Figures represent an increasing trend for the utilization of healthcare services which is alarming. Health education for the promotion of health is evitable by the figures.

The trends in the utilization of healthcare services by the elderly from non-profit organizations (NPOs) indicate increasing engagement with NPOs healthcare facilities. Factors influencing these trends include age, health status, availability of medicines, transportation, and perceptions of healthcare quality. Increasing age tends to elevate the likelihood of using local facilities as elderly individuals often prefer private healthcare, driven by better availability and perceived quality. The study reveal a predominant preference for local facilities, influenced by factors such as age, health condition, medication availability, transportation, and perceived service quality.



## 5.1 Conclusion

Findings reveal an increasing trend of utilization of healthcare services among elderly population. Study reveals that NPO's serving untiring local communities/populations and providing free healthcare facilities on self-help basis.

The accessibility, affordability, equitability shapes elderly perceptions and understanding, trust worthiness, satisfaction, empathy, and care to create a positive and meaningful image to seek healthcare services.

The increasing burden of diseases needs focused considerations to address the measures of adoption not only to control but to prevent from multiple ailments. The increasing ailments among the elderly population are becoming a challenge not only for the public as well as for the private sectors for the provision of healthcare services. Therefore, promote awareness to address the negative stereotypes of elderly marginalized population and work for the intergenerational solidarity.

## 5.2 Policy Recommendations

- With the growing population, at public sector healthcare services, the provision of accessible elderly healthcare provision needs to be considered.
- At government level, there is a dire need of NPOs friendly effective policies for implementation so that to improve equitable access to these healthcare services for communities.
- Local administration coordination and adequate support with NPO's (financial, technical, logistics) helps to strengthen and extension for the provision of healthcare services to the marginalized population especially women and rural areas.
- Preventive measures need consideration to minimize the burden of diseases.

Promote awareness to address negative stereotypes of elderly marginalized population and intergenerational solidarity.

## Authors Contribution

**Bushra Yasmeen:** Problem Identification, Literature review, Results, and Discussion.

**Fatima Shahzadi:** Theoretical Framework, and Data Analysis.

## Conflict of Interests/Disclosures

The authors declared no potential conflicts of interest in this article's research, authorship, and publication.

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