# The Performance of the Provincial Government (2013-18) in the Health Department of Khyber Pakhtunkhwa in the Terms of the Allocated Budget

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## Abstract

In the current study, the performance of the provincial government of KP (2013-18) in connection with the public satisfaction in terms of the allocated budget to health department is investigated. This study revealed that the level of public satisfaction is up to an average extent (37.39%) that portrays performance of an average extent of the provincial government in terms of the allocated budget to the health department in the province. The primary data was collected from the public and experts from the health department through a questionnaire by using simple random technique. The number of respondents from the district Charsadda and Peshawar were selected by using Yamane formula. The analysis has been made by SPSS using the chi-square test, p-value and percentage method.

Keywords:

Health Department, Budget, Provincial government, Satisfaction.

## Introduction

Health budget is actually the allocation of the budget to the ministries of health, its associated agencies and all those ministries, that provide health related expenditures (Helene Barroy, 2018). The public and private health expenditure forms the total health expenditure. It embodied the periodic and capital health spending from the government budgets, grants including external borrowings, donations from the non-governmental organizations, international agencies and the compulsory social insurance funds. The government spends on the health sector in order to improve the health structure and program, prolong and improve quality of life and provide prevention from diseases. Health expenditure encapsulate the provision of the health services,

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preventive and medicinal, family planning, nutrition and emerging aid distinguished for health. (Sengupta, 2016).

Likewise, in health sector there is financial accountability comprising of budgeting, audit and accounting systems that attempt to ensure appropriate use of the resources on the agreed upon purposes in order to reduce corrupt practices (Bossert, February 2008). The allocation of the available resources and meeting of the increasing costs are the important factor of the health sector reforms. The generation of the resources is a critical component of implementation process. The challenges for most of the governments is facilitation of the poor by concentrating the resources on compensating the market failures and efficiently financing services (Blas, 2005).

In case of Pakistan, health care is provided through a mixed system breached into public and private. The budget allocation was administered by the federal government that is decentralized after the passage of 18th constitutional amendment in the 1973 Constitution of the Islamic Republic of Pakistan. The health sector after decentralization is legally and administratively accomplished by the provincial and local governments (Faraz Salahuddin, 2021). The provincial government of Khyber Pakhtunkhwa during its rule (2013-18) initiated the universal health care initiative in which it introduced *Sehat Sahulat* program. It is actually a government run health protection initiative that provides significant financial coverage to the secondary and tertiary treatment facilities in the province to the below poverty line segments (Hussain, 2019).

The government of PTI prioritised the health department and initiated universal health care initiative by introducing Sehat Sahulat program, allocated budget for the provision of free treatment to the cancer patients, ensured the availability of the insulin and necessary medicine for the diabetic patients and those suffering with kidney diseases (Reporter, 2018). The current study revealed that public is satisfied to a greater extent (37.39%)[4] with the performance of the provincial government of Khyber Pakhtunkhwa (2013-18) for allocating a satisfactory budget to the health sector for improving the health status of the citizens in the province.

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[4] This is the average percentage that has been calculated by taking the average percentage of the percentages of all those questions which have been asked from the respondents in determining the public perception regarding the allocated budget to the health sector by the provincial government of KP (2013-18).

## METHODOLOGY:

This paper is based on quantitative and analytical methods in which primary data is collected from the public and experts of the health department and were inquired through questionnaire. The experts comprise of doctors, paramedics serving in the health care centres.

## OPERATIONALISATION OF THE VARIABLES:

In the current study, the term health department means the operational health care centres in Khyber Pakhtunkhwa. Similarly, budget means the allocated and assigned budget to the provincial health department by the provincial government in its tenure (2013-18). However, the public satisfaction is used for measuring the performance of the government, where greater extent satisfaction means performed well, average extent satisfaction means the average performance while the lower extent portrays the poor performance of the provincial government.

## SAMPLING METHOD AND SIZE:

The universe of the study is district Charsadda and Peshawar in which one rural and one urban tehsils from Charsadda and likewise towns in Peshawar are considered. For conducting this survey, a simple random sampling technique is used. Yamane formula is used for selecting the number of respondents. The total number of respondents were 400 from the public and 64 experts were interviewed through the questionnaire.

## Q 1. TO WHICH EXTENT ARE YOU SATISFIED WITH THE HEALTH BUDGET IN KP (2013-18)?

Table 11

| Variables | Sub-Category | Greater Extent | Average Extent | Lower Extent | Total | Chi-Square Value | P-Value |
|---|---|---|---|---|---|---|---|
| Gender | Male | 91 27.0% | 148 43.9% | 98 29.1% | 337 100.0% | 21.077 | 0.000 |
| | Female | 43 46.2% | 42 45.2% | 8 8.6% | 93 100.0% | | |
| | Total | 134 31.2% | 190 44.2% | 106 24.7% | 430 100.0% | | |
| | 18-30 | 44 | 41 | 25 | 110 | 14.196 | 0.007 |

| | | | | | | | |
|---|---|---|---|---|---|---|---|
| | | 40.0% | 37.3% | 22.7% | 100.0% | | |
| **Age** | 31-40 | 34 | 86 | 43 | 163 | | |
| | | 20.9% | 52.8% | 26.4% | 100.0% | | |
| | 41 and Above | 56 | 63 | 38 | 157 | | |
| | | 35.7% | 40.1% | 24.2% | 100.0% | | |
| | Total | 134 | 190 | 106 | 430 | | |
| | | 31.2% | 44.2% | 24.7% | 100.0% | | |
| **Education** | Illiterate | 33 | 41 | 26 | 100 | | |
| | | 33.0% | 41.0% | 26.0% | 100.0% | | |
| | Matriculate | 18 | 22 | 18 | 58 | | |
| | | 31.0% | 37.9% | 31.0% | 100.0% | | |
| | Intermediate | 36 | 43 | 26 | 105 | 5.691 | 0.682 |
| | | 34.3% | 41.0% | 24.8% | 100.0% | | |
| | Graduate | 33 | 55 | 22 | 110 | | |
| | | 30.0% | 50.0% | 20.0% | 100.0% | | |
| | Postgraduate | 14 | 29 | 14 | 57 | | |
| | | 24.6% | 50.9% | 24.6% | 100.0% | | |
| | Total | 134 | 190 | 106 | 430 | | |
| | | 31.2% | 44.2% | 24.7% | 100.0% | | |
| **Profession** | Government Servant | 28 | 22 | 4 | 54 | | |
| | | 51.9% | 40.7% | 7.4% | 100.0% | | |
| | Private Service Sector | 22 | 34 | 23 | 79 | | |
| | | 27.8% | 43.0% | 29.1% | 100.0% | | |

| | | | | | | | |
|---|---|---|---|---|---|---|---|
| | Businessmen & Shopkeepers | 36 39.6% | 37 40.7% | 18 19.8% | 91 100.0% | 32.553 | 0.000 |
| | Health Experts | 10 47.6% | 7 33.3% | 4 19.0% | 21 100.0% | | |
| | Education Experts | 7 25.9% | 14 51.9% | 6 22.2% | 27 100.0% | | |
| | Others | 31 19.6% | 76 48.1% | 51 32.3% | 158 100.0% | | |
| | Total | 134 31.2% | 190 44.2% | 106 24.7% | 430 100.0% | | |
| Monthly Income | PKR 21000 and Below | 58 39.5% | 62 42.2% | 27 18.4% | 147 100.0% | 10.189 | 0.037 |
| | PKR 22000 and Above | 48 28.6% | 71 42.3% | 49 29.2% | 168 100.0% | | |
| | Sorry | 28 24.3% | 57 49.6% | 30 26.1% | 115 100.0% | | |
| | Total | 134 31.2% | 190 44.2% | 106 24.7% | 430 100.0% | | |
| Area | Rural | 90 31.4% | 120 41.8% | 77 26.8% | 287 100.0% | 2.772 | 0.250 |
| | Urban | 44 30.8% | 70 49.0% | 29 20.3% | 143 100.0% | | |
| | Total | 134 31.2% | 190 44.2% | 106 24.7% | 430 100.0% | | |

**EXPLANATION:**

A good number of the female respondents (46.2%) seconded by the government servants by profession (51.9%) responded with a greater extent satisfaction from the allocated budget. It further signifies that the respondents of the middle age group (52.8%), the postgraduate respondents (50.9%), the education experts by profession (51.9%), the 'Sorry' group of income (49.6%) and the urban respondents (49.0%) were pleased to an average with the apportioned budget to the health sector. The chi-square test furnished significant p-values for the variables of the gender, age, profession and monthly income consideration. Likewise, the education and area consideration were conveyed as an insignificant with its p-values > 0.05. The significant variables were closely associated with the allocated budget while there is no association between the insignificant variables and the public satisfaction with the allocated budget to the health care system.

It also digs out that the government servants by profession were satisfied with the performance of the provincial government of KP in its rule (2013-18) that for allocating beneficial budget to the health sector.

## Q 2. TO WHICH EXTENT ARE YOU SATISFIED WITH THE SALARY INCREASE OF MEDICAL STAFF IN KP (2013-18)?

Table 12

| Variables | Sub-Category | Greater Extent | Average Extent | Lower Extent | Total | Chi-Square Value | P-Value |
|---|---|---|---|---|---|---|---|
| Gender | Male | 152<br>45.1% | 113<br>33.5% | 72<br>21.4% | 337<br>100.0% | 5.594 | 0.061 |
| | Female | 30<br>32.3% | 35<br>37.6% | 28<br>30.1% | 93<br>100.0% | | |
| | Total | 182<br>42.3% | 148<br>34.4% | 100<br>23.3% | 430<br>100.0% | | |
| Age | 18-30 | 60<br>54.5% | 32<br>29.1% | 18<br>16.4% | 110<br>100.0% | 12.674 | 0.013 |
| | 31-40 | 69<br>42.3% | 58<br>35.6% | 36<br>22.1% | 163<br>100.0% | | |

| | | | | | | | |
|---|---|---|---|---|---|---|---|
| | 41 and Above | 53<br>33.8% | 58<br>36.9% | 46<br>29.3% | 157<br>100.0% | | |
| | Total | 182<br>42.3% | 148<br>34.4% | 100<br>23.3% | 430<br>100.0% | | |
| Education | Illiterate | 31<br>31.0% | 33<br>33.0% | 36<br>36.0% | 100<br>100.0 % | 19.873 | 0.011 |
| | Matriculate | 28<br>48.3% | 21<br>36.2% | 9<br>15.5% | 58<br>100.0 % | | |
| | Intermediate | 41<br>39.0% | 36<br>34.3% | 28<br>26.7% | 105<br>100.0 % | | |
| | Graduate | 52<br>47.3% | 37<br>33.6% | 21<br>19.1% | 110<br>100.0 % | | |
| | Postgraduate | 30<br>52.6% | 21<br>36.8% | 6<br>10.5% | 57<br>100.0 % | | |
| | Total | 182<br>42.3% | 148<br>34.4% | 100<br>23.3% | 430<br>100.0 % | | |
| Profession | Government Servant | 25<br>46.3% | 18<br>33.3% | 11<br>20.4% | 54<br>100.0 % | 18.729 | 0.044 |
| | Private Service Sector | 35<br>44.3% | 29<br>36.7% | 15<br>19.0% | 79<br>100.0 % | | |
| | Businessmen & Shopkeepers | 38<br>41.8% | 24<br>26.4% | 29<br>31.9% | 91<br>100.0% | | |
| | Health Experts | 11<br>52.4% | 7<br>33.3% | 3<br>14.3% | 21<br>100.0 % | | |
| | Education Experts | 18<br>66.7% | 4<br>14.8% | 5<br>18.5% | 27<br>100.0 | | |

| | | | | | % | | |
|---|---|---|---|---|---|---|---|
| | Others | 55 | 66 | 37 | 158 | | |
| | | 34.8% | 41.8% | 23.4% | 100.0% | | |
| | Total | 182 | 148 | 100 | 430 | | |
| | | 42.3% | 34.4% | 23.3% | 100.0% | | |
| Monthly Income | PKR 21000 and Below | 64 | 48 | 35 | 147 | | |
| | | 43.5% | 32.7% | 23.8% | 100.0% | | |
| | PKR 22000 and Above | 67 | 70 | 31 | 168 | 9.071 | 0.059 |
| | | 39.9% | 41.7% | 18.5% | 100.0% | | |
| | Sorry | 51 | 30 | 34 | 115 | | |
| | | 44.3% | 26.1% | 29.6% | 100.0% | | |
| | Total | 182 | 148 | 100 | 430 | | |
| | | 42.3% | 34.4% | 23.3% | 100.0% | | |
| Area | Rural | 119 | 99 | 69 | 287 | | |
| | | 41.5% | 34.5% | 24.0% | 100.0% | | |
| | Urban | 63 | 49 | 31 | 143 | 0.382 | 0.826 |
| | | 44.1% | 34.3% | 21.7% | 100.0% | | |
| | Total | 182 | 148 | 100 | 430 | | |
| | | 42.3% | 34.4% | 23.3% | 100.0% | | |

**EXPLANATION:**

A significant number of the postgraduate respondents (52.6%), the male respondents (45.1%), the respondents having age group of 18-30 (54.5%), the education experts by profession (66.7%), the undisclosed group of the monthly income (44.3%) and the urban respondents (44.1%) responded in favour of the salary increase of health staff in order to concentrate on serving the public. Significant p-values were delivered with the application of the chi-square test in favour

of the age, education, profession and the monthly income consideration. An insignificant p-value is declared for the variables of gender and area. The significant resulted variables had p-value < 0.05 unveiled close attachment with the increased salaries of the staff in health department while the insignificant variables show disunity between the gender, area and the increment noticed in the salaries of the staff providing services in the health department.

It further solidified that the education experts by profession affirmed the Khyber Pakhtunkhwa government for its satisfactory performance for allocating sufficient budget to health department in terms of the increment made in the salaries of the staff serving the health care centres.

## Q 3. TO WHICH EXTENT ARE YOU SATISFIED WITH THE FACILITIES PROVIDED TO MEDICAL STAFF IN KP (2013-18)?

Table 13

| Variables | Sub-Category | Greater Extent | Average Extent | Lower Extent | Total | Chi-Square Value | P-Value |
|---|---|---|---|---|---|---|---|
| Gender | Male | 166 49.3% | 97 28.8% | 74 22.0% | 337 100.0% | 7.571 | 0.023 |
| | Female | 32 34.4% | 39 41.9% | 22 23.7% | 93 100.0% | | |
| | Total | 198 46.0% | 136 31.6% | 96 22.3% | 430 100.0% | | |
| Age | 18-30 | 50 45.5% | 31 28.2% | 29 26.4% | 110 100.0% | 1.702 | 0.790 |
| | 31-40 | 75 46.0% | 53 32.5% | 35 21.5% | 163 100.0% | | |
| | 41 and Above | 73 46.5% | 52 33.1% | 32 20.4% | 157 100.0% | | |
| | Total | 198 46.0% | 136 31.6% | 96 22.3% | 430 100.0 | | |

| | | | | | % | | |
|---|---|---|---|---|---|---|---|
| Education | Illiterate | 44<br>44.0% | 26<br>26.0% | 30<br>30.0% | 100<br>100.0% | 11.128 | 0.195 |
| | Matriculate | 32<br>55.2% | 14<br>24.1% | 12<br>20.7% | 58<br>100.0% | | |
| | Intermediate | 42<br>40.0% | 43<br>41.0% | 20<br>19.0% | 105<br>100.0% | | |
| | Graduate | 55<br>50.0% | 34<br>30.9% | 21<br>19.1% | 110<br>100.0% | | |
| | Postgraduate | 25<br>43.9% | 19<br>33.3% | 13<br>22.8% | 57<br>100.0% | | |
| | Total | 198<br>46.0% | 136<br>31.6% | 96<br>22.3% | 430<br>100.0% | | |
| Profession | Government Servant | 18<br>33.3% | 24<br>44.4% | 12<br>22.2% | 54<br>100.0% | 19.570 | 0.034 |
| | Private Service Sector | 40<br>50.6% | 23<br>29.1% | 16<br>20.3% | 79<br>100.0% | | |
| | Businessmen & Shopkeepers | 34<br>37.4% | 32<br>35.2% | 25<br>27.5% | 91<br>100.0% | | |
| | Health Experts | 6<br>28.6% | 10<br>47.6% | 5<br>23.8% | 21<br>100.0% | | |
| | Education Experts | 12<br>44.4% | 6<br>22.2% | 9<br>33.3% | 27<br>100.0% | | |
| | Others | 88<br>55.7% | 41<br>25.9% | 29<br>18.4% | 158<br>100.0 | | |

| | | | | | % | | |
|---|---|---|---|---|---|---|---|
| | Total | 198 | 136 | 96 | 430 | | |
| | | 46.0% | 31.6% | 22.3% | 100.0% | | |
| Monthly Income | PKR 21000 and Below | 55 | 56 | 36 | 147 | | |
| | | 37.4% | 38.1% | 24.5% | 100.0% | | |
| | PKR 22000 and Above | 78 | 51 | 39 | 168 | 9.867 | 0.043 |
| | | 46.4% | 30.4% | 23.2% | 100.0% | | |
| | Sorry | 65 | 29 | 21 | 115 | | |
| | | 56.5% | 25.2% | 18.3% | 100.0% | | |
| | Total | 198 | 136 | 96 | 430 | | |
| | | 46.0% | 31.6% | 22.3% | 100.0% | | |
| Area | Rural | 116 | 99 | 72 | 287 | | |
| | | 40.4% | 34.5% | 25.1% | 100.0% | | |
| | Urban | 82 | 37 | 24 | 143 | 11.128 | 0.004 |
| | | 57.3% | 25.9% | 16.8% | 100.0% | | |
| | Total | 198 | 136 | 96 | 430 | | |
| | | 46.0% | 31.6% | 22.3% | 100.0% | | |

**EXPLANATION:**

A prominent number of the male respondents (49.3%), respondents of the age group of 41 and above (46.5%), the matriculate respondents (55.2%), the 'Others' group of profession (55.7%), the 'Sorry' group of income (56.5%) and the urban respondents (57.3%) responded in favour of the introduced facilities to the medical staff in the health sector. The 'Others' group of professionals included the farmers, unemployed, retired persons, skilled, unskilled labourers and the students The chi-square test shows significant p-values for the gender, profession, monthly income and the area consideration. The variables having p-values < 0.05 showed link between the significant variables and the increased facilities for the medical staff in the health curing

centres. It also showed insignificant results for the age and education that separated the insignificant variables and the introduced facilitations for the medical staff.

The provided details proceeded that the urban respondents were curious about notifying the ensured facilitations for the medical staff in the health curing centres and advanced towards the good performance of the provincial government of KP.

**Q 4. TO WHICH EXTENT ARE YOU SATISFIED WITH THE FACILITIES PROVIDED TO PATIENTS IN KP (2013-18)?**

Table 14

| Variables | Sub-Category | Greater Extent | Average Extent | Lower Extent | Total | Chi-Square Value | P-Value |
|---|---|---|---|---|---|---|---|
| Gender | Male | 109<br>32.3% | 87<br>25.8% | 141<br>41.8% | 337<br>100.0% | 0.458 | 0.795 |
| | Female | 30<br>32.3% | 27<br>29.0% | 36<br>38.7% | 93<br>100.0% | | |
| | Total | 139<br>32.3% | 114<br>26.5% | 177<br>41.2% | 430<br>100.0% | | |
| Age | 18-30 | 34<br>30.9% | 28<br>25.5% | 48<br>43.6% | 110<br>100.0% | 1.104 | 0.894 |
| | 31-40 | 56<br>34.4% | 45<br>27.6% | 62<br>38.0% | 163<br>100.0% | | |
| | 41 and Above | 49<br>31.2% | 41<br>26.1% | 67<br>42.7% | 157<br>100.0% | | |
| | Total | 139<br>32.3% | 114<br>26.5% | 177<br>41.2% | 430<br>100.0% | | |
| Education | Illiterate | 33<br>33.0% | 24<br>24.0% | 43<br>43.0% | 100<br>100.0% | 11.640 | 0.168 |
| | Matriculate | 18 | 10 | 30 | 58 | | |

| | | | | | 100.0% | | |
|---|---|---|---|---|---|---|---|
| | | 31.0% | 17.2% | 51.7% | 100.0% | | |
| | Intermediate | 38 | 22 | 45 | 105 | | |
| | | 36.2% | 21.0% | 42.9% | 100.0% | | |
| | Graduate | 33 | 39 | 38 | 110 | | |
| | | 30.0% | 35.5% | 34.5% | 100.0% | | |
| | Postgraduate | 17 | 19 | 21 | 57 | | |
| | | 29.8% | 33.3% | 36.8% | 100.0% | | |
| | Total | 139 | 114 | 177 | 430 | | |
| | | 32.3% | 26.5% | 41.2% | 100.0% | | |
| Profession | Government Servant | 15 | 21 | 18 | 54 | | |
| | | 27.8% | 38.9% | 33.3% | 100.0% | | |
| | Private Service Sector | 20 | 18 | 41 | 79 | | |
| | | 25.3% | 22.8% | 51.9% | 100.0% | | |
| | Businessmen & Shopkeepers | 33 36.3% | 22 24.2% | 36 39.6% | 91 100.0% | | |
| | Health Experts | 11 | 6 | 4 | 21 | 20.830 | 0.022 |
| | | 52.4% | 28.6% | 19.0% | 100.0% | | |
| | Education Experts | 3 | 10 | 14 | 27 | | |
| | | 11.1% | 37.0% | 51.9% | 100.0% | | |
| | Others | 57 | 37 | 64 | 158 | | |
| | | 36.1% | 23.4% | 40.5% | 100.0% | | |
| | Total | 139 | 114 | 177 | 430 | | |
| | | 32.3% | 26.5% | 41.2% | 100.0% | | |
| Monthly | PKR 21000 and Below | 62 | 33 | 52 | 147 | | |

| Income | | | | | | | |
|---|---|---|---|---|---|---|---|
| | | 42.2% | 22.4% | 35.4% | 100.0% | | |
| | PKR 22000 and Above | 43 | 49 | 76 | 168 | | |
| | | 25.6% | 29.2% | 45.2% | 100.0% | 10.408 | 0.034 |
| | Sorry | 34 | 32 | 49 | 115 | | |
| | | 29.6% | 27.8% | 42.6% | 100.0% | | |
| | Total | 139 | 114 | 177 | 430 | | |
| | | 32.3% | 26.5% | 41.2% | 100.0% | | |
| Area | Rural | 93 | 89 | 105 | 287 | | |
| | | 32.4% | 31.0% | 36.6% | 100.0% | | |
| | Urban | 46 | 25 | 72 | 143 | 10.983 | 0.004 |
| | | 32.2% | 17.5% | 50.3% | 100.0% | | |
| | Total | 139 | 114 | 177 | 430 | | |
| | | 32.3% | 26.5% | 41.2% | 100.0% | | |

**EXPLANATION:**

An influential number of the male respondents (41.8%), the younger respondents of 18-30 age group (43.6%), the matriculate (51.7%), the respondents of the higher income group of PKR 22000 and above (45.2%) and the urban respondents (50.3%) meagrely appreciated the provision of the facilities to the patients in the health care centres. Likewise, the health experts (52.4%) supported to a greater extent the facilitation of the patients in the health care system. The chi-square test gave significant p-values for the variables of profession, monthly income and area of consideration. The significant variables were closely affiliated with the facilitation of the patients in the health sector. The insignificant p-value were declared in case of the gender, age and the educational consideration that led to the disconnection of the mentioned variables with the facilities introduced for the patients in the provincial health care centres.

The data disclosed that the matriculate respondents scarcely credited while the health experts highly credited the performance of the provincial government for the apportioned budget to the health sector in terms of the introduced convenience to the patients in the provincial health care centres.

## Q 5. TO WHICH EXTENT ARE YOU SATISFIED WITH THE FACILITIES PROVIDED TO PATIENTS' ATTENDANTS IN KP (2013-18)?

Table 15

| Variables | Sub-Category | Greater Extent | Average Extent | Lower Extent | Total | Chi-Square Value | P-Value |
|---|---|---|---|---|---|---|---|
| Gender | Male | 109<br><br>32.3% | 133<br><br>39.5% | 95<br><br>28.2% | 337<br><br>100.0% | 5.737 | 0.057 |
|  | Female | 19<br><br>20.4% | 39<br><br>41.9% | 35<br><br>37.6% | 93<br><br>100.0% |  |  |
|  | Total | 128<br><br>29.8% | 172<br><br>40.0% | 130<br><br>30.2% | 430<br><br>100.0% |  |  |
| Age | 18-30 | 38<br><br>34.5% | 30<br><br>27.3% | 42<br><br>38.2% | 110<br><br>100.0% | 13.040 | 0.011 |
|  | 31-40 | 46<br><br>28.2% | 66<br><br>40.5% | 51<br><br>31.3% | 163<br><br>100.0% |  |  |
|  | 41 and Above | 44<br><br>28.0% | 76<br><br>48.4% | 37<br><br>23.6% | 157<br><br>100.0% |  |  |
|  | Total | 128<br><br>29.8% | 172<br><br>40.0% | 130<br><br>30.2% | 430<br><br>100.0% |  |  |
| Education | Illiterate | 27<br><br>27.0% | 37<br><br>37.0% | 36<br><br>36.0% | 100<br><br>100.0% | 16.096 | 0.041 |
|  | Matriculate | 11<br><br>19.0% | 33<br><br>56.9% | 14<br><br>24.1% | 58<br><br>100.0% |  |  |
|  | Intermediate | 30<br><br>28.6% | 40<br><br>38.1% | 35<br><br>33.3% | 105<br><br>100.0% |  |  |

| | | | | | | | |
|---|---|---|---|---|---|---|---|
| | Graduate | 45 40.9% | 38 34.5% | 27 24.5% | 110 100.0 % | | |
| | Postgraduate | 15 26.3% | 24 42.1% | 18 31.6% | 57 100.0 % | | |
| | Total | 128 29.8% | 172 40.0% | 130 30.2% | 430 100.0 % | | |
| Profession | Government Servant | 5 9.3% | 39 72.2% | 10 18.5% | 54 100.0 % | | |
| | Private Service Sector | 28 35.4% | 28 35.4% | 23 29.1% | 79 100.0 % | | |
| | Businessmen & Shopkeepers | 21 23.1% | 34 37.4% | 36 39.6% | 91 100.0% | 56.005 | 0.000 |
| | Health Experts | 10 47.6% | 10 47.6% | 1 4.8% | 21 100.0 % | | |
| | Education Experts | 2 7.4% | 9 33.3% | 16 59.3% | 27 100.0 % | | |
| | Others | 62 39.2% | 52 32.9% | 44 27.8% | 158 100.0 % | | |
| | Total | 128 29.8% | 172 40.0% | 130 30.2% | 430 100.0 % | | |
| Monthly Income | PKR 21000 and Below | 64 43.5% | 28 19.0% | 55 37.4% | 147 100.0 % | 53.603 | 0.000 |
| | PKR 22000 and Above | 31 18.5% | 80 47.6% | 57 33.9% | 168 100.0 % | | |

|  |  |  |  |  |  |  |  |
|---|---|---|---|---|---|---|---|
|  | Sorry | 33 | 64 | 18 | 115 |  |  |
|  |  | 28.7% | 55.7% | 15.7% | 100.0% |  |  |
|  | Total | 128 | 172 | 130 | 430 |  |  |
|  |  | 29.8% | 40.0% | 30.2% | 100.0% |  |  |
| Area | Rural | 90 | 119 | 78 | 287 | 3.864 | 0.145 |
|  |  | 31.4% | 41.5% | 27.2% | 100.0% |  |  |
|  | Urban | 38 | 53 | 52 | 143 |  |  |
|  |  | 26.6% | 37.1% | 36.4% | 100.0% |  |  |
|  | Total | 128 | 172 | 130 | 430 |  |  |
|  |  | 29.8% | 40.0% | 30.2% | 100.0% |  |  |

**EXPLANATION:**

A large number of the female respondents (41.9%) from within the age group 41 and above (48.4%), the matriculate (56.9%), the professionals of the government servants (72.2%), the respondents of the 'Sorry' group of income (55.7%) and the rural respondents (41.5%) were satisfied to an average extent satisfaction for the introduced facilities to the attendants of the patients admitted for curing in the hospitals. The chi-square test forwarded significant p-values for the variables of the gender, age, education, profession and the monthly income and insignificant value was acquired in case of the area consideration of the respondents. The significance of the variables also amalgamated the significant variables for its p-value ‹ 0.05 and the provision of the facilities to the attendants of the patients. An isolation is noted between the insignificant variables and the privileged patient attendants initiated by the provincial government because of its p-value › 0.05.

The provided details uncovered that the government servants by profession confessed to an average extent performance of the provincial government in terms of the provision of the facilities to the attendants of the patients in the public health care centres.

**Q 6. TO WHICH EXTENT ARE YOU SATISFIED WITH THE PROVISION OF FREE MEDICINE FOR HEALTH ENHANCEMENT IN KP (2013-18)?**

Table 16

| Variables | Sub-Category | Greater Extent | Average Extent | Lower Extent | Total | Chi-Square Value | P-Value |
|---|---|---|---|---|---|---|---|
| Gender | Male | 74 <br> 22.0% | 100 <br> 29.7% | 163 <br> 48.4% | 337 <br> 100.0% | 11.434 | 0.003 |
| | Female | 11 <br> 11.8% | 44 <br> 47.3% | 38 <br> 40.9% | 93 <br> 100.0% | | |
| | Total | 85 <br> 19.8% | 144 <br> 33.5% | 201 <br> 46.7% | 430 <br> 100.0% | | |
| Age | 18-30 | 17 <br> 15.5% | 45 <br> 40.9% | 48 <br> 43.6% | 110 <br> 100.0% | 9.090 | 0.059 |
| | 31-40 | 27 <br> 16.6% | 56 <br> 34.4% | 80 <br> 49.1% | 163 <br> 100.0% | | |
| | 41 and Above | 41 <br> 26.1% | 43 <br> 27.4% | 73 <br> 46.5% | 157 <br> 100.0% | | |
| | Total | 85 <br> 19.8% | 144 <br> 33.5% | 201 <br> 46.7% | 430 <br> 100.0% | | |
| Education | Illiterate | 21 <br> 21.0% | 22 <br> 22.0% | 57 <br> 57.0% | 100 <br> 100.0% | 11.669 | 0.167 |
| | Matriculate | 11 <br> 19.0% | 21 <br> 36.2% | 26 <br> 44.8% | 58 <br> 100.0% | | |
| | Intermediate | 20 <br> 19.0% | 39 <br> 37.1% | 46 <br> 43.8% | 105 <br> 100.0% | | |
| | Graduate | 25 <br> 22.7% | 36 <br> 32.7% | 49 <br> 44.5% | 110 <br> 100.0% | | |
| | Postgraduate | 8 | 26 | 23 | 57 | | |

| | | | | | | | |
|---|---|---|---|---|---|---|---|
| | | 14.0% | 45.6% | 40.4% | 100.0% | | |
| | Total | 85 | 144 | 201 | 430 | | |
| | | 19.8% | 33.5% | 46.7% | 100.0% | | |
| Profession | Government Servant | 5 | 18 | 31 | 54 | 22.620 | 0.012 |
| | | 9.3% | 33.3% | 57.4% | 100.0% | | |
| | Private Service Sector | 14 | 28 | 37 | 79 | | |
| | | 17.7% | 35.4% | 46.8% | 100.0% | | |
| | Businessmen & Shopkeepers | 16 | 28 | 47 | 91 | | |
| | | 17.6% | 30.8% | 51.6% | 100.0% | | |
| | Health Experts | 2 | 8 | 11 | 21 | | |
| | | 9.5% | 38.1% | 52.4% | 100.0% | | |
| | Education Experts | 2 | 7 | 18 | 27 | | |
| | | 7.4% | 25.9% | 66.7% | 100.0% | | |
| | Others | 46 | 55 | 57 | 158 | | |
| | | 29.1% | 34.8% | 36.1% | 100.0% | | |
| | Total | 85 | 144 | 201 | 430 | | |
| | | 19.8% | 33.5% | 46.7% | 100.0% | | |
| Monthly Income | PKR 21000 and Below | 19 | 45 | 83 | 147 | 17.503 | 0.021 |
| | | 12.9% | 30.6% | 56.5% | 100.0% | | |
| | PKR 22000 and Above | 36 | 51 | 81 | 168 | | |
| | | 21.4% | 30.4% | 48.2% | 100.0% | | |
| | Sorry | 30 | 48 | 37 | 115 | | |
| | | 26.1% | 41.7% | 32.2% | 100.0% | | |
| | Total | 85 | 144 | 201 | 430 | | |

| Variables | Sub-Category | | | | Total | Chi-Square Value | P-Value |
|---|---|---|---|---|---|---|---|
| | | 19.8% | 33.5% | 46.7% | 100.0% | | |
| Area | Rural | 65 | 82 | 140 | 287 | | |
| | | 22.6% | 28.6% | 48.8% | 100.0% | | |
| | Urban | 20 | 62 | 61 | 143 | 10.619 | 0.005 |
| | | 14.0% | 43.4% | 42.7% | 100.0% | | |
| | Total | 85 | 144 | 201 | 430 | | |
| | | 19.8% | 33.5% | 46.7% | 100.0% | | |

EXPLANATION:

A convincing number of the rural respondents (48.8%), the illiterate respondents (57.0%), the male respondents (48.4%), the respondents from within the middle age group of 31-40 (49.1%), the education experts by profession (66.7%) and the respondents of the lower income group of PKR 21000 and below (56.5%) barely supported the provision of the free medicine for the health enhancement. The chi-square test granted significant p-values for the gender, age, profession, monthly income and the area of the respondents considered, while it gave insignificant p-values for the educational consideration. The p-values < 0.05 showed interdependence of the significant variables and the provision of the free medicine for the enhancement of the health sector while divorce occurred between the insignificant variables and the advancement of the free medicines in the provincial health care centres.

The tabulation exposed that the respondents from within the education experts accepted the performance of the government for the allocated budget in terms of the provision of the free medicine for the enhancement of the provincial health sector.

**Q 7. TO WHICH EXTENT DID THE GOVERNMENT EQUALLY DISTRIBUTE FREE MEDICINE IN RURAL AND URBAN HEALTH CENTRES IN KP (2013-18)?**

Table 17

| Variables | Sub-Category | Greater Extent | Average Extent | Lower Extent | Total | Chi-Square Value | P-Value |
|---|---|---|---|---|---|---|---|
| Gender | Male | 69 | 108 | 160 | 337 | 9.088 | 0.011 |
| | | 20.5% | 32.0% | 47.5% | 100.0% | | |

| | | | | | | | |
|---|---|---|---|---|---|---|---|
| | Female | 27 29.0% | 38 40.9% | 28 30.1% | 93 100.0% | | |
| | Total | 96 22.3% | 146 34.0% | 188 43.7% | 430 100.0% | | |
| Age | 18-30 | 29 26.4% | 40 36.4% | 41 37.3% | 110 100.0% | 5.264 | 0.261 |
| | 31-40 | 38 23.3% | 57 35.0% | 68 41.7% | 163 100.0% | | |
| | 41 and Above | 29 18.5% | 49 31.2% | 79 50.3% | 157 100.0% | | |
| | Total | 96 22.3% | 146 34.0% | 188 43.7% | 430 100.0% | | |
| Education | Illiterate | 24 24.0% | 27 27.0% | 49 49.0% | 100 100.0% | 1116.134 | 0.041 |
| | Matriculate | 21 36.2% | 17 29.3% | 20 34.5% | 58 100.0% | | |
| | Intermediate | 26 24.8% | 33 31.4% | 46 43.8% | 105 100.0% | | |
| | Graduate | 17 15.5% | 44 40.0% | 49 44.5% | 110 100.0% | | |
| | Postgraduate | 8 14.0% | 25 43.9% | 24 42.1% | 57 100.0% | | |
| | Total | 96 22.3% | 146 34.0% | 188 43.7% | 430 100.0% | | |

| | | | | | | |
|---|---|---|---|---|---|---|
| Profession | Government Servant | 11 20.4% | 25 46.3% | 18 33.3% | 54 100.0% | 31.796 | 0.000 |
| | Private Service Sector | 18 22.8% | 27 34.2% | 34 43.0% | 79 100.0% | | |
| | Businessmen & Shopkeepers | 24 26.4% | 20 22.0% | 47 51.6% | 91 100.0% | | |
| | Health Experts | 3 14.3% | 16 76.2% | 2 9.5% | 21 100.0% | | |
| | Education Experts | 2 7.4% | 9 33.3% | 16 59.3% | 27 100.0% | | |
| | Others | 38 24.1% | 49 31.0% | 71 44.9% | 158 100.0% | | |
| | Total | 96 22.3% | 146 34.0% | 188 43.7% | 430 100.0% | | |
| Monthly Income | PKR 21000 and Below | 30 20.4% | 59 40.1% | 58 39.5% | 147 100.0% | 15.060 | 0.005 |
| | PKR 22000 and Above | 30 17.9% | 63 37.5% | 75 44.6% | 168 100.0% | | |
| | Sorry | 36 31.3% | 24 20.9% | 55 47.8% | 115 100.0% | | |
| | Total | 96 22.3% | 146 34.0% | 188 43.7% | 430 100.0% | | |
| Area | Rural | 57 19.9% | 102 35.5% | 128 44.6% | 287 100.0% | | |

| | | | | | | |
|---|---|---|---|---|---|---|
| Urban | 39 | 44 | 60 | 143 | 3.141 | 0.208 |
| | 27.3% | 30.8% | 42.0% | 100.0% | | |
| Total | 96 | 146 | 188 | 430 | | |
| | 22.3% | 34.0% | 43.7% | 100.0% | | |

**EXPLANATION:**

A consequential number of the illiterate (49.0%), the rural (44.6%), the male respondents (47.5%) of the elderly group of 41 and above (50.3%) and the respondents of the 'Sorry' group of income (47.8%) readily agreed to the provincial government for the equal distribution of the free medicine in the rural and urban health care centres as per the requirement of the area. However, the health experts (76.2%) responded in reasonable pleasure with the equal medicinal provision to the rural and urban health care sectors. Significant p-values were produced by the chi-square test for the variables of the gender, education, profession and monthly income while the age and area were declared as insignificant p-valued variables. The insignificant p-valued variables showed disengagement between the age, area and the equal availability of medicines in the rural and urban health sectors. While the significance of the p-values for the variables showed unity between the gender, education, profession, monthly income and the equal distribution of the medicines in the rural and urban health care centres as per the requirements.

The above figures show that the elderly respondents were simply inclined to the performance of the provincial government of KP (2013-18) and the health experts confessed good level of satisfaction for the allotted budget to the health sector in terms of the equal distribution of the medicines in the rural and the urban health care centres as per the requirements of the localities.

**Q 8. TO WHICH EXTENT WAS THE HEALTH BUDGET IN KP (2013-18) IN LINE WITH THE INTERNATIONAL STANDARD?**

Table 18

| Variables | Sub-Category | Greater Extent | Average Extent | Lower Extent | Total | Chi-Square Value | P-Value |
|---|---|---|---|---|---|---|---|
| Gender | Male | 69 | 138 | 130 | 337 | | 0.644 |
| | | 20.5% | 40.9% | 38.6% | 100.0% | 0.881 | |
| | Female | 20 | 42 | 31 | 93 | | |

| | | | | | | | |
|---|---|---|---|---|---|---|---|
| | | 21.5% | 45.2% | 33.3% | 100.0% | | |
| | Total | 89 | 180 | 161 | 430 | | |
| | | 20.7% | 41.9% | 37.4% | 100.0% | | |
| Age | 18-30 | 26 | 32 | 52 | 110 | | |
| | | 23.6% | 29.1% | 47.3% | 100.0% | | |
| | 31-40 | 37 | 77 | 49 | 163 | | |
| | | 22.7% | 47.2% | 30.1% | 100.0% | 13.144 | 0.011 |
| | 41 and Above | 26 | 71 | 60 | 157 | | |
| | | 16.6% | 45.2% | 38.2% | 100.0% | | |
| | Total | 89 | 180 | 161 | 430 | | |
| | | 20.7% | 41.9% | 37.4% | 100.0% | | |
| Education | Illiterate | 17 | 49 | 34 | 100 | | |
| | | 17.0% | 49.0% | 34.0% | 100.0% | | |
| | Matriculate | 12 | 25 | 21 | 58 | | |
| | | 20.7% | 43.1% | 36.2% | 100.0% | | |
| | Intermediate | 20 | 51 | 34 | 105 | | |
| | | 19.0% | 48.6% | 32.4% | 100.0% | 12.572 | 0.127 |
| | Graduate | 30 | 32 | 48 | 110 | | |
| | | 27.3% | 29.1% | 43.6% | 100.0% | | |
| | Postgraduate | 10 | 23 | 24 | 57 | | |
| | | 17.5% | 40.4% | 42.1% | 100.0% | | |
| | Total | 89 | 180 | 161 | 430 | | |
| | | 20.7% | 41.9% | 37.4% | 100.0% | | |
| | Government Servant | 8 | 22 | 24 | 54 | | |

| Profession | | 14.8% | 40.7% | 44.4% | 100.0% | | |
|---|---|---|---|---|---|---|---|
| | Private Service Sector | 10 | 39 | 30 | 79 | | |
| | | 12.7% | 49.4% | 38.0% | 100.0% | | |
| | Businessmen & Shopkeepers | 27 | 38 | 26 | 91 | | |
| | | 29.7% | 41.8% | 28.6% | 100.0% | 21.596 | 0.017 |
| | Health Experts | 6 | 8 | 7 | 21 | | |
| | | 28.6% | 38.1% | 33.3% | 100.0% | | |
| | Education Experts | 3 | 6 | 18 | 27 | | |
| | | 11.1% | 22.2% | 66.7% | 100.0% | | |
| | Others | 35 | 67 | 56 | 158 | | |
| | | 22.2% | 42.4% | 35.4% | 100.0% | | |
| | Total | 89 | 180 | 161 | 430 | | |
| | | 20.7% | 41.9% | 37.4% | 100.0% | | |
| Monthly Income | PKR 21000 and Below | 26 | 49 | 72 | 147 | | |
| | | 17.7% | 33.3% | 49.0% | 100.0% | | |
| | PKR 22000 and Above | 35 | 78 | 55 | 168 | | |
| | | 20.8% | 46.4% | 32.7% | 100.0% | 13.392 | 0.010 |
| | Sorry | 28 | 53 | 34 | 115 | | |
| | | 24.3% | 46.1% | 29.6% | 100.0% | | |
| | Total | 89 | 180 | 161 | 430 | | |
| | | 20.7% | 41.9% | 37.4% | 100.0% | | |
| Area | Rural | 63 | 107 | 117 | 287 | | |
| | | 22.0% | 37.3% | 40.8% | 100.0% | 7.524 | 0.023 |
| | Urban | 26 | 73 | 44 | 143 | | |

| | | | | | | | |
|---|---|---|---|---|---|---|---|
| | | 18.2% | 51.0% | 30.8% | 100.0 % | | |
| | Total | 89 | 180 | 161 | 430 | | |
| | | 20.7% | 41.9% | 37.4% | 100.0 % | | |

**EXPLANATION:**

An observable number of the female respondents (45.2%), the illiterate respondents (49.0%) and the urban respondents (51.0%) were inclined towards an average extent satisfaction with the provincial government for allocating an international standard budget to the health sector. But, the younger respondents of the age group 18-30 (47.3%), the educational experts by profession (66.7%) and the respondents of the lower income group of PKR 21000 and below (49.0%) agreed to the provincial government for the apportioned budget of the health system in line with the international standards. The chi-square test issued significant p-values for the age, profession, monthly income and the area of consideration. The p-values $< 0.05$ indicated bondage among the age, profession, monthly income and the area to the budget aligned with the international standards. In the same way the chi-square test granted insignificant p-values for the gender and education. The p-value $> 0.05$ isolated the insignificant variables of gender, education and the allotted international standard budget to the health sector.

It also displayed that the urban respondents readily approved while the education experts hardly encouraged the performance of the provincial government of KP (2013-18) for the allocated budget to the health department in terms of the aligned health budget to the international standards.

**Q 9. TO WHICH EXTENT DID THE HEALTH BUDGET IN KP (2013-18) ACHIEVE ITS GOALS?**

Table 19

| Variables | Sub-Category | Greater Extent | Average Extent | Lower Extent | Total | Chi-Square Value | P-Value |
|---|---|---|---|---|---|---|---|
| Gender | Male | 90 | 138 | 109 | 337 | | |
| | | 26.7% | 40.9% | 32.3% | 100.0 % | 4.410 | 0.126 |
| | Female | 19 | 49 | 25 | 93 | | |
| | | 20.4% | 52.7% | 26.9% | 100.0 | | |

| | | | | | % | | |
|---|---|---|---|---|---|---|---|
| | Total | 109 25.3% | 187 43.5% | 134 31.2% | 430 100.0% | | |
| Age | 18-30 | 33 30.0% | 42 38.2% | 35 31.8% | 110 100.0% | 10.409 | 0.034 |
| | 31-40 | 49 30.1% | 72 44.2% | 42 25.8% | 163 100.0% | | |
| | 41 and Above | 27 17.2% | 73 46.5% | 57 36.3% | 157 100.0% | | |
| | Total | 109 25.3% | 187 43.5% | 134 31.2% | 430 100.0% | | |
| Education | Illiterate | 30 30.0% | 40 40.0% | 30 30.0% | 100 100.0% | 15.644 | 0.048 |
| | Matriculate | 16 27.6% | 17 29.3% | 25 43.1% | 58 100.0% | | |
| | Intermediate | 26 24.8% | 46 43.8% | 33 31.4% | 105 100.0% | | |
| | Graduate | 28 25.5% | 48 43.6% | 34 30.9% | 110 100.0% | | |
| | Postgraduate | 9 15.8% | 36 63.2% | 12 21.1% | 57 100.0% | | |
| | Total | 109 25.3% | 187 43.5% | 134 31.2% | 430 100.0% | | |
| Profession | Government Servant | 30 30.0% | 40 40.0% | 30 30.0% | 100 100.0 | | |

| | | | | | % | | |
|---|---|---|---|---|---|---|---|
| | Private Service Sector | 16 | 17 | 25 | 58 | | |
| | | 27.6% | 29.3% | 43.1% | 100.0% | | |
| | Businessmen & Shopkeepers | 26 | 46 | 33 | 105 | 20.601 | 0.024 |
| | | 24.8% | 43.8% | 31.4% | 100.0% | | |
| | Health Experts | 28 | 48 | 34 | 110 | | |
| | | 25.5% | 43.6% | 30.9% | 100.0% | | |
| | Education Experts | 9 | 36 | 12 | 57 | | |
| | | 15.8% | 63.2% | 21.1% | 100.0% | | |
| | Others | 109 | 187 | 134 | 430 | | |
| | | 25.3% | 43.5% | 31.2% | 100.0% | | |
| | Total | 30 | 40 | 30 | 100 | | |
| | | 30.0% | 40.0% | 30.0% | 100.0% | | |
| Monthly Income | PKR 21000 and Below | 45 | 59 | 43 | 147 | | |
| | | 30.6% | 40.1% | 29.3% | 100.0% | | |
| | PKR 22000 and Above | 27 | 86 | 55 | 168 | 13.686 | 0.008 |
| | | 16.1% | 51.2% | 32.7% | 100.0% | | |
| | Sorry | 37 | 42 | 36 | 115 | | |
| | | 32.2% | 36.5% | 31.3% | 100.0% | | |
| | Total | 109 | 187 | 134 | 430 | | |
| | | 25.3% | 43.5% | 31.2% | 100.0% | | |
| Area | Rural | 72 | 130 | 85 | 287 | | |
| | | 25.1% | 45.3% | 29.6% | 100.0% | | |
| | Urban | 37 | 57 | 49 | 143 | 1.334 | 0.513 |
| | | 25.9% | 39.9% | 34.3% | 100.0 | | |

| | | | | | % | | |
|---|---|---|---|---|---|---|---|
| | Total | 109 | 187 | 134 | 430 | | |
| | | 25.3% | 43.5% | 31.2% | 100.0 % | | |

**EXPLANATION:**

Majority of the postgraduate respondents (63.2%) female respondents (52.7%) of the elderly group of 41 and above (46.5%) serving in the education department (63.2%) with a high income group of PKR 22000 and above (51.2%) belonging to the rural area (45.3%) were pleased to an average extent with the apportioned budget to the health system that was beneficial and remained successful in achieving its goals for improving the health system in the province. The chi-square test portrayed a significant p-value for the variables of the age, education, profession and monthly income while it gave insignificant P-values for the gender and area considerations. The p-value < 0.05 shows organization of the significant variables and the achieved goals with the apportioned budget to the health department. Similarly, the p-value > 0.05 disunited the variables of gender and area from the allocated budget that remained successful for achieving its goals in health sector.

The table displayed the performance of the provincial government that the postgraduate respondents and the educational experts by professions confessed satisfaction with the particular allotted budget in terms of the achieved goals from the allotted budget.

**CONCLUSION:**

The provincial government of Khyber Pakhtunkhwa (2013-18) after assuming power initiated improvements in the health care system. In this regard, it tried to increase the apportioned budget to the health department and ensured facilitating the patients and the staff serving in the health caring centres. It further elaborated that the allocated budget is important for exploring it in terms of the variables of the gender, age group, education, profession, monthly income and area of belongingness.

It is evident from the discussion that the male respondents are more satisfied with the performance of the provincial government of KP (2013-18) for the articulated budget to health department. In considering the age, the respondents of the older age group of 41 and above are happier with the improved budget of health caring centres. For understanding the educational qualification, the intermediate qualified respondents have credited the provincial government of

KP for introducing beneficial health budget. So far, the profession is considered the self-employed respondents of the businessmen and shopkeepers conferred greater extent satisfaction with the advanced budget of health department. Evaluating on the basis of the monthly income demonstrated that the high income respondents of 22000 and above income group are more satisfied. Similarly, the urban respondents are more inclined towards satisfaction with the performance of the provincial government of KP (2013-18) for a clear beneficent budget to the health department.

Study revealed the applicability of the public satisfaction to an average extent (37.39%) with the performance of the provincial government of KP (2013-18) about the budget assigned for the improvement of the health department in the province. The average extent satisfaction of the public portrayed average performance of the Pakistan Tehrik-e-Insaf in the province.

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