International Journal for Quality in Health Care 2011; **Volume 23, Number 2**: p. 107
Advance Access Publication: 16 February 2011
10.1093/intqhc/mzq091

Letter to the Editor

Quality improvement in developing nations

Dear Editor,

I would like to comment regarding the recent article 'The role of quality improvement in strengthening health systems in developing countries' as published in the August issue of your publication [1]. It is documented that some of the factors that have resulted in a lack of quality improvement (QI) initiatives in the developing world include poor infrastructure, resource limitations and lack of systems that are readily available in the developed world [2]. The question remains as to how we 'sell our case' so to speak to the developing countries that may see these sorts of initiatives as a luxury that can only be afforded in the developed world?

It is documented that in the developing countries, health-care workers are essential to the delivery of health interventions, however, inadequate health-worker performance is a very widespread problem [3]. Why do not we start here, with the driving force of the health-care workforce? I believe we must start by utilizing the skills and resources that already exist in developing countries. This requires understanding and working with current QI initiatives that already may be established in health-care institutions. I believe that sometimes we, from the developed world come into the developing countries thinking that we know everything and that our way is the best way. This approach can be dangerous as we need adequate consultation with the health-care providers in the developing countries who know and understand how their system works. This allows us to be able to identify the individual strengths and weaknesses that can then be worked with to introduce the appropriate QI initiatives.

Our communication techniques need to put forth in such a manner that they are easy to understand and that they can relate to common, everyday health-care scenarios. This program needs to be a multifaceted initiative that works with all systems of health care, most importantly information technology. It is documented that collecting, managing and communicating information is a critical part of delivering high-quality, efficient health care [4] but the health-care workers must be trained to use the technology appropriately, otherwise it is a complete waste of resources. Literature demonstrates that it is the ability to share information, skills and competencies that are perfected in the developed world as being an integral and prominent part of this process [5]. I believe that we need to meet the developing countries at the face value, on their own level and with a realistic expectation of achievable project plans and realistic goals.

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Daniel Gordon
Calvary Hospital Emergency Department
Calvary Health Care ACT
Canberra
ACT, Australia
Tel: +61-4-20-97-73-99
E-mail: dgordonau@hotmail.com