

## Research Article

# Social Entrepreneurs: Emerging Trend in Health Sector of Pakistan

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**Received:** 17 April 2021; **Revised:** 16 November 2020; **Accepted:** 26 November 2021

**Abstract:** The term Social Entrepreneurs is relatively new in the country like Pakistan. These groups try to overcome the existing social problems and derive sustainable social change in the economy through their innovative ideas and plans. The purpose of this study is to compare and explore the emerging trends of social entrepreneurs with the government in the health sector of Pakistan. This study tries to cover the research gap in the area of social entrepreneurship and highlight the growing role of social entrepreneurs in providing healthcare services to the people of Pakistan. For empirical evidence, three different healthcare institutions are selected. They include: Indus Hospital, Sindh Institute of Urology Transplantation and Shaukat Khanum Memorial Hospital. The services provided by these Healthcare Institutions are compared over the period of time. Trend analyses are carried out to study the role of these institutions by using various healthcare indicators and quantify the contribution of these organizations towards health improvement facilities in Pakistan. Some financial variables are also used to investigate resource mobilization in the sector. The result of the analysis revealed that these institutions are providing quality healthcare services to the people of Pakistan that are increasing with the passage of time.

**Keywords:** social entrepreneurs, health, Pakistan

**JEL Codes:** I1, I3, O1

## 1. Introduction

Provision and access to quality health services have been a critical issue in developing economies. On the one hand, quality health is the basic right and requirement of every human being for the living, while on the other hand, it is considered as an indicator to gauge the status of the human capital of an economy. "A healthy population is not only valued in its own right, but it also raises the human capital of a country thereby positively contributing to the economic and social development." (Pakistan Economic Survey, 2006-2007). Generally, it is the responsibility of the state to serve the needs of the population in an efficient and effective manner (Akram & Khan, 2007). In this regard, a sustainable quality investment in the health sector not only improves health outcomes but also reduces poverty and increases the economic growth of the economy. Furthermore, improvement in health services will have long lasting effect on the performance of any country.

Pakistan, a developing economy, is confronted with resource allocation in social sectors where a large segment

of the population does not have access to quality health and education. Being the lower middle-income country with a Gross Domestic Product (GDP) of PKR 34,396 Billion in 2017-18 (Pakistan Economic Survey, 2017-2018a), the Government of Pakistan spending was 0.49 percent of GDP on health sector in 2017-18 (July-Mar) (Pakistan Economic Survey, 2017-2018b). According to Pakistan Bureau of Statistics 2017-18, Pakistan is having 1,209 hospitals, 5,654 dispensaries, 5,505 Health care units and 688 rural health centers. The health services provided by the Government of Pakistan are highly insufficient for the whole population of the country in terms of access and quality. Currently Pakistan's population is about 207.77 million and the health services offered by the state are mismatched with the growing population of the country. This mismatch created the gap between demand and supply; and provided a space to the private sector for the benchmark quality services in the health sector of Pakistan. However, the high cost in health care services provided by the private sector and its limited accessibility in urban areas and unavailability in the rural part have failed to resolve the problem. The failure of State and private sector in provision of affordable and quality health services, created a ground for social enterprises to enter in the venture and tackle the social challenges in the country. In this regard, there has been a phenomenal growth of social entrepreneurship in the health and education sector of Pakistan (Mair & Marti, 2004). Social entrepreneurs have brought a noticeable change in society by improving social conditions through their innovative ideas (Maqsood & Laghari, 2003). Their main objective is not to earn a profit but to implement their ideas and strive for success in order to create some positive changes in society.

The purpose of this study is to examine the growing role of social entrepreneurs in providing healthcare services to the people of Pakistan. This research paper filled the existing literature gap and highlights some emerging trends of social entrepreneurship in the health sector of Pakistan. For empirical evidence, three different healthcare institutions are selected. They include Indus Hospital, Sindh Institute of Urology Transplantation and Shaukat Khanum Hospital.

The rest of the paper is organized as follows. Section-II provides the literature survey, followed by research methodology in Section-III. Section-IV investigates the health situation in Pakistan by focusing on two provinces, i.e. Punjab and Sindh. Section-V discusses the selected cases of social entrepreneurship in the health sector of Pakistan. Final Section-IV concludes the paper.

## 2. Review of literature

The role of NGOs and community organizations is well recognized and earned particular attention from academics, policymakers and researchers. It is highly concentrated in developing economies because of increasing issues in social sectors. However, the Social entrepreneurship phenomenon has gained little prominence in the literature and remains scanty. It may be because of the reason that social entrepreneurship is largely personal-centric with limited information. Therefore, they remained largely unaddressed in literature because of scanty information and its limited exposure to a large population. The following sections provide some findings and direction of research studies focus on health sector at a country as well as cross country level.

The literature can be grouped into three distinct research directions. The first group of studies are those that focus on health services provided by state/government, examine weakness in the system and suggest a public-private partnership to improve the delivery of health services. In this respect, Karim and Zaidi (1999) use secondary data from different governmental and non-governmental sources to explore the weakness and strengths of the government of Sindh in providing healthcare services. The result identified that many preventive programs have been implemented by government but despite this, there were inadequate facilities provided by government to the whole population. Issaka (2016) also come on the same suggestion i.e. to ensure public-private partnership in providing health services in Ghana. The research was based on a literature survey focusing the Tamale Metropolis District in Ghana. The study revealed that NGOs played an integral role in the healthcare delivery in Ghana.

The second group of researchers addresses the role of NGOs in health institutions and provides evidence of improvement. Ejaz et al. (2011) conducted in-depth interviews. These interviews covered the perceptions of government functionaries, representatives of NGOs and donor community about the role that was played by NGOs in delivering healthcare services in Pakistan. Most of the respondents from the government and donor agencies had a view that the efficiency of the healthcare sector of Pakistan had increased because of the involvement of NGOs. Similar results are also derived by Khan and Advani (2016) by investigating the performance of social entrepreneurship. The primary

data was collected by designing a close ended questionnaire. These questionnaires were filled by 150 students of different Universities of Pakistan. The findings of the paper explored that in the career development of a student, social entrepreneurs played a productive role.

The third group corresponds to those studies that recognize the role of social entrepreneurs and acknowledge their contribution to society. In this regard, Seelos and Mair (2005) discussed the three different role models of social entrepreneurs which provide facilities to the poor people of their region and as well as these entrepreneurs worked efficiently and overcome the gap of human needs in society. Moreover, Daru and Gaur (2013) also explored the concept of social entrepreneurship in developing countries and also discussed its future challenges and prospects. This study highlighted the role of social entrepreneurship in solving social problems which were ignored by business and government enterprises. Sekliuckiene and Kisielius (2015) also discussed similar theoretical research. They tried to answer the question that how the initiatives of social entrepreneurship developed. The analysis of literature was conducted through which the author proposed a theoretical framework for further research. The result of the literature analysis revealed that the social environment plays a supportive role in the development process of social entrepreneurship.

Above discussions provide some findings and direction of research studies that focus on the health sector at a country as well as cross-country level. Although there is an increasing trend of social entrepreneurship in Pakistan, contributing towards the welfare of people and society, however, there is hardly any research that addresses the role of social entrepreneurship in the health sector. This paper attempts to fill some gaps in the literature and provide some empirical evidence by using the case study method.

### 3. Research methodology

This study attempts to investigate the growing trends of social entrepreneurs in the health sector of Pakistan. This research is basically the empirical analysis of government failure to provide basic healthcare facilities in Sindh and Punjab region, and thus explores the role of social entrepreneurs in providing the basic health care services in the same region. The performance of the government in the health sector has been examined by using the development statistics of Sindh and Punjab. Because of data availability, the annual data from 1990 to 2016 of some selected indicators are used in this study. Moreover, in order to judge the growing trend of social entrepreneurs in Karachi and Lahore districts, we select three social institutions in the health sector. They included: Sindh Institute of Urology Transplantation (SIUT), Shaukat Khanum Memorial Cancer Hospital (SKMCH) and Indus Hospital (IH). These institutions carry out their operational activities with welfare motives and are largely financed by charities and donations. We analyze the performance of these institutions in the different time span. The empirical data of various health care indicators like no. of inpatients and outpatients and the services provided by these selected social institutions are gathered from their annual report, reported in their official websites. Graphs and tables are used to analyze the performance of selected organizations.

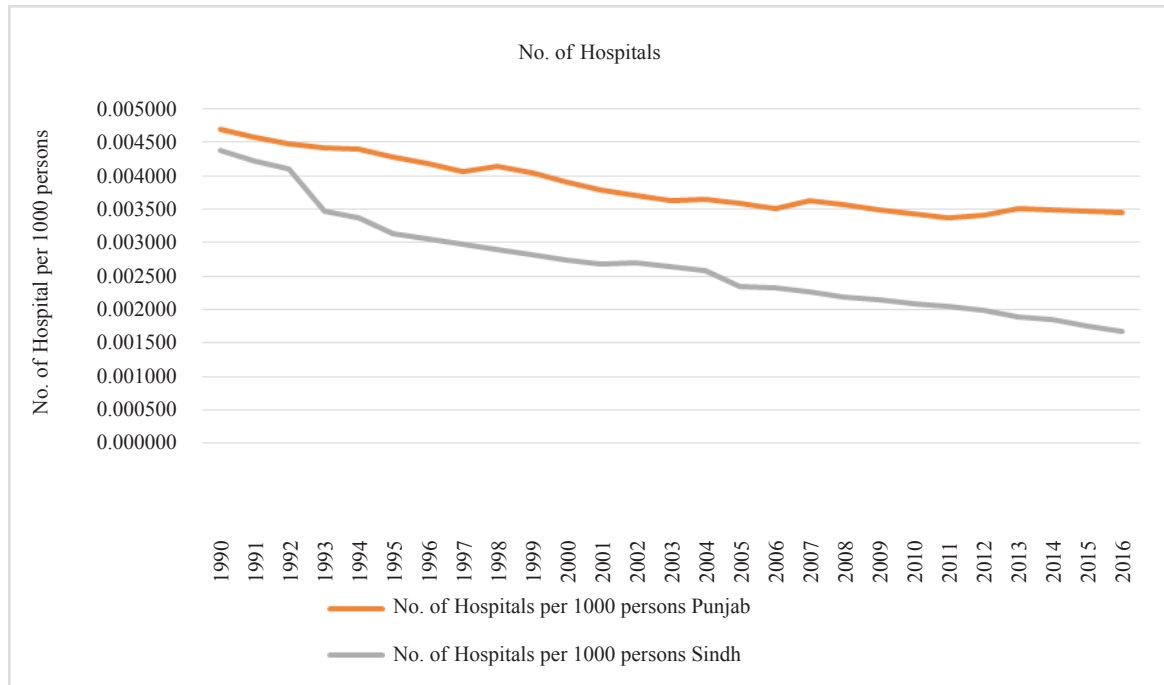
### 4. Analysis of health sector in Punjab and Sindh

In this section, we discuss the health care facilities in two major provinces of Pakistan that are Sindh and Punjab. This discussion is based on basic health care indicators, which include No. of hospitals, No. of dispensaries, bed capacities in hospitals and dispensaries per 1,000 population. The government of Pakistan appears to have less priority to provide adequate health care facilities in the last two and half decades. On the other side, the demand of these services has grown exponentially because of high population growth. The gap between demand and supply created a space for social entrepreneurs in Pakistan.

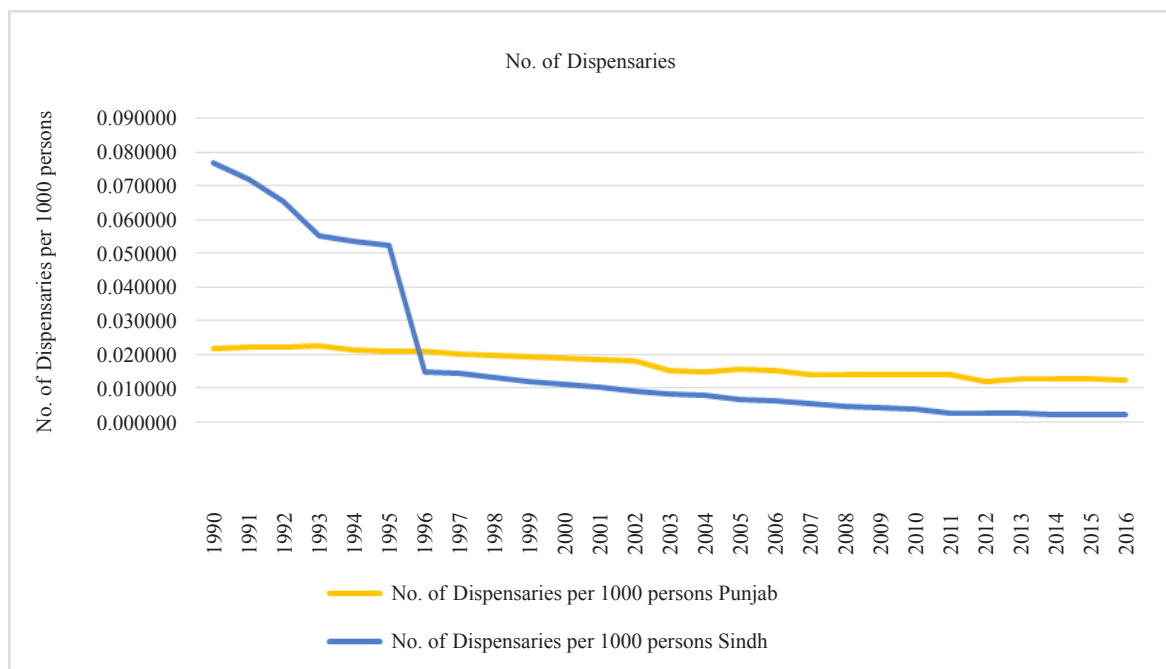
Figure 1 to Figure 5, exhibit the access to health facilities in Punjab and Sindh provinces. The performance of the government for the provision of healthcare facilities can be evaluated by a number of hospitals and dispensaries per 1,000 population (Table 1).

These two indicators relate the number of hospitals and dispensaries with the population and reflect the true picture of the economy. In the last two and half decades, government institutions have been failed to maintain the previous

quality of healthcare units. People of Punjab and Sindh are deprived from a basic health care facility and have survived in a lower number of basic healthcare units (Figure 1 and 2). This shows the poor allocation of federal and provincial budgets for the provision of healthcare facilities.

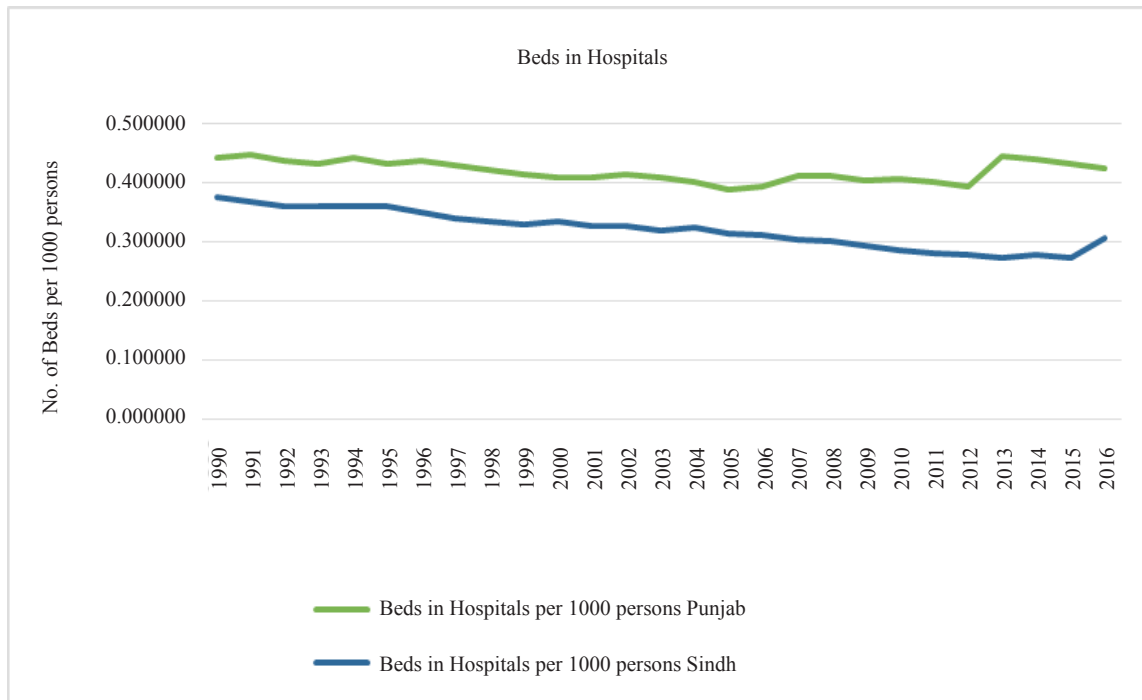


**Figure 1.** No. of Hospitals per 1,000 persons in Punjab and Sindh

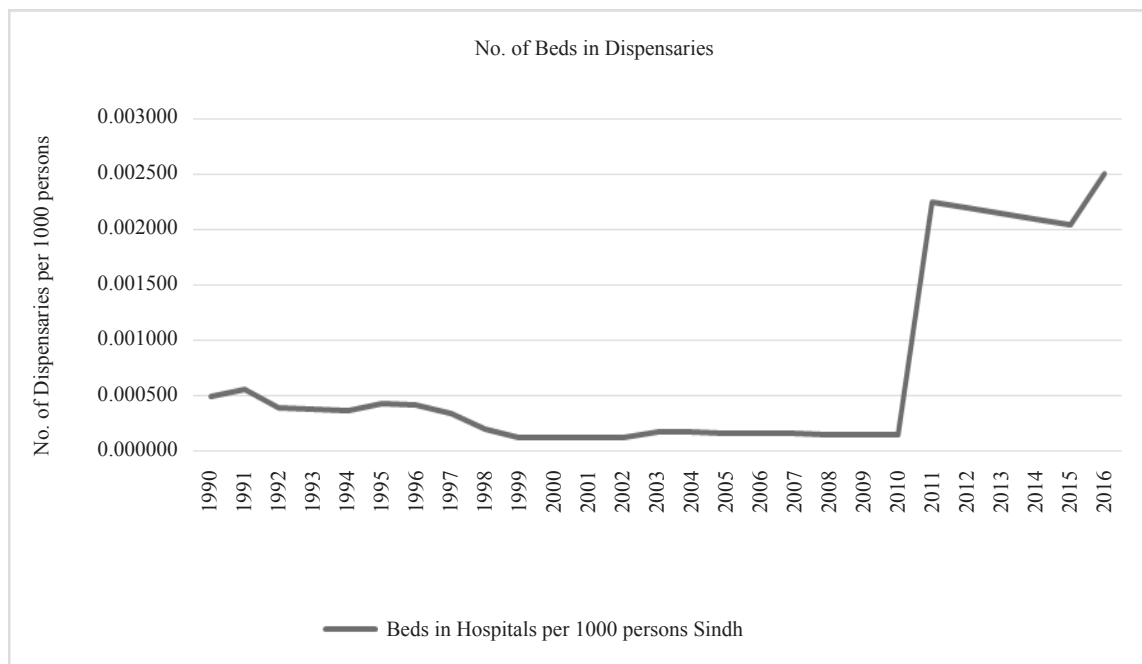


**Figure 2.** No. of Dispensaries per 1,000 persons in Punjab and Sindh

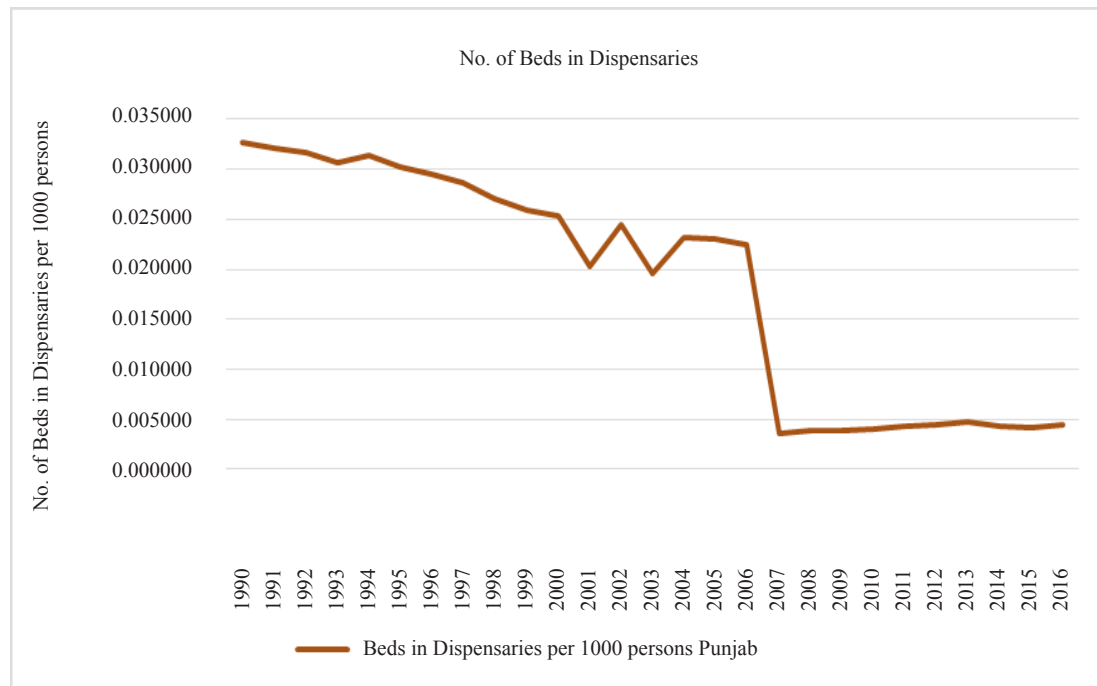
In order to reflect the capacity in hospitals and dispensaries, a number of beds in hospitals and dispensaries are also considered in the study. Both provinces have poor bed capacity in hospitals, particularly in dispensaries. The dismal number in the capacity of beds in hospitals portrays seriousness and inefficient performance in Punjab and Sindh. Figure 3 and 4 also demonstrate a similar situation in case of bed capacity in dispensaries.



**Figure 3.** No. of Beds in Hospitals per 1,000 persons in Punjab and Sindh



**Figure 4.** No. Beds in Dispensaries per 1,000 persons in Sindh



**Figure 5.** No. of Beds in Dispensaries per 1,000 persons in Punjab

Besides that, in 1990 the population of Punjab and Sindh were more than 20 million separately. After two and half decades, the population of the same regions were increasing by more than 80 percent. On the other side, the growth rate of these basic healthcare variables which we have discussed above is less than the growth rate of the population. Thus, we can say that the population growth rate is one of the major causes of lower facilities in the health sector.

## 5. Social entrepreneur in health sector of Pakistan

The fact remains that the government alone cannot meet the needs of people in providing health care facilities (Punjani et al., 2014). The time trend shows that the number of hospitals and beds per 1,000 population in government hospitals is very limited and health services facilities are available decreasingly. Furthermore, the quality of services deteriorated, as well. In 2016-17, a one hospital bed is available for the 1,584 population of Pakistan (Pakistan Economic Survey, 2016-2017). This shows the health system of Pakistan is not accessible for the whole population. There is also the question of quality health services. These factors provide an opportunity for social entrepreneurs and create an avenue to serve humanity.

Social entrepreneurs are playing an important role in addressing the social problems of the people (British Council, 2021). They discover and implement new ways for creating social values by serving the poor (Certo & Gaur, 2008). Their main objective is not to earn a profit, either they offer free services or charge a fraction of private market price so that the services become affordable for the poor (Defourny & Nyssens, 2010). We selected three hospitals to investigate the impact of social entrepreneurship, situated in the most populated cities of Punjab and Sindh provinces. We explore their effort to handle the diverse situation by providing healthcare services to the people. The following discussion provides the brief introduction of each social entrepreneur model and their contribution to overcoming the existing problem in the health sector of Pakistan.

**Table 1.** Health care facilities and population in Punjab and Sindh

Years	Numbers				Beds				Population of states “in 000”	
	Hopitals		Dispensaries		Hopitals		Dispensaries			
	Punjab ***	Sindh ****	Punjab ***	Sindh ****	Punjab ***	Sindh ****	Punjab ***	Sindh ****	Punjab ***	Sindh ****
1990	281	107	1,308	1,870	26,476	9,167	1,953	12	59,791	24,398
1991	281	106	1,351	1,808	27,499	9,217	1,966	14	61,370	25,081
1992	282	106	1,382	1,681	27,572	9,340	1,994	10	62,990	25,783
1993	286	92	1,452	1,463	28,031	9,604	1,987	10	64,653	26,505
1994	292	92	1,408	1,463	29,469	9,836	2,079	10	66,360	27,247
1995	292	88	1,432	1,463	29,486	10,083	2,062	12	68,112	28,010
1996	292	88	1,461	420	30,623	10,098	2,062	12	69,910	28,795
1997	292	88	1,452	420	30,830	10,054	2,060	10	71,755	29,601
1998	305	88	1,439	399	31,125	10,175	1,996	6	73,650	30,430
1999	306	88	1,440	371	31,432	10,340	1,954	4	75,594	31,282
2000	301	88	1,439	360	31,640	10,744	1,954	4	77,204	32,036
2001	298	88	1,452	340	32,341	10,744	1,605	4	78,849	32,808
2002	298	91	1,453	309	33,460	10,972	1,973	4	80,528	33,598
2003	298	91	1,241	286	33,724	11,036	1,605	6	82,243	34,408
2004	306	91	1,227	274	33,724	11,466	1,950	6	83,995	35,237
2005	308	85	1,333	238	33,334	11,397	1,973	6	85,784	36,087
2006	308	86	1,333	221	34,612	11,514	1,973	6	87,611	36,956
2007	325	86	1,260	208	36,851	11,514	316	6	89,478	37,847
2008	326	85	1,286	182	37,653	11,678	358	6	91,383	38,759
2009	326	85	1,303	157	37,742	11,677	359	6	93,330	39,693
2010	328	85	1,323	147	38,715	11,677	387	6	95,318	40,650
2011	329	85	1,347	111	39,052	11,677	416	94	97,348	41,629
2012	340	85	1,201	105	39,185	11,922	438	94	99,422	42,633
2013	357	83	1,304	101	45,319	11,922	480	94	101,539	43,660
2014	363	83	1,325	93	45,590	12,516	452	94	103,702	44,712
2015	368	80	1,325	95	45,956	12,516	444	94	105,911	45,790
2016	373	79	1,327	94	46,095	14,398	484	118	108,167	46,893

Sources: \*\*\*Development Statistics of Punjab (1990-2015); \*\*\*\*Development Statistics of Sindh (1990-2015)

### 5.1 Sindh Institute of Urology Transplantation (SIUT)

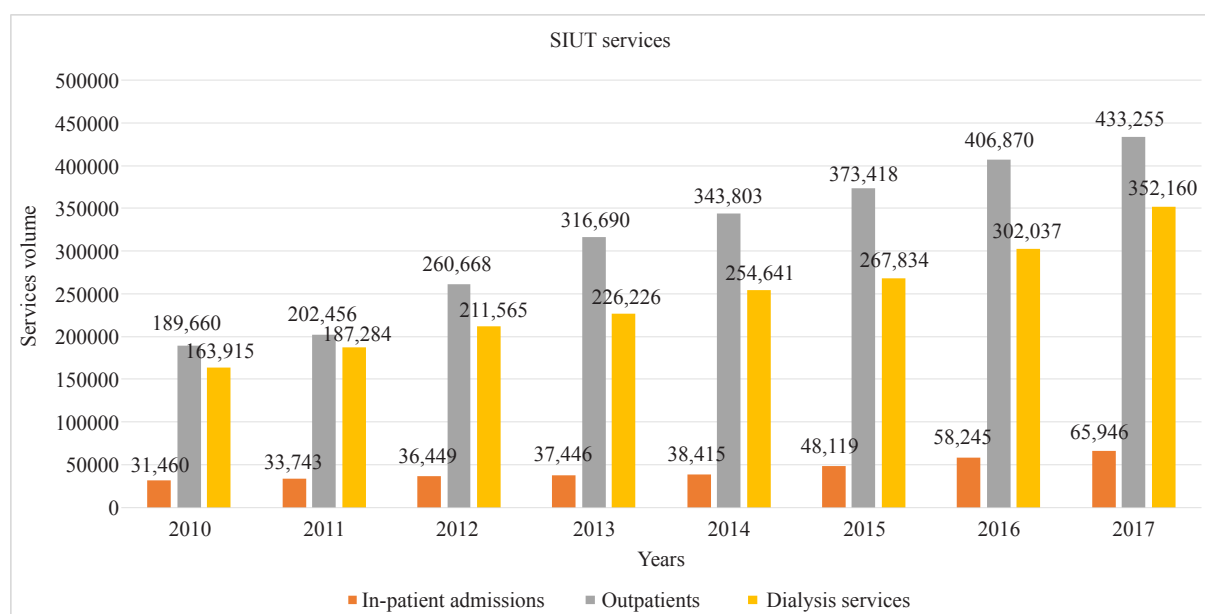
In 1970, Sindh Institute of Urology Transplantation (SIUT) started their journey with a small number of beds

in Burns Ward Department of Civil Hospital Karachi. Professor Dr. Adeeb-ul-Hasan Rizvi played a catalyst role in transforming one-room into an autonomous hospital, providing urology-related diseases at free of cost. For two decades, from 1970 to 1990, SIUT worked under the Federal Government of Pakistan. SIUT is the largest kidney disease center in Pakistan. In the period from 1970 to 1991, SIUT gradually improved their quality of Clinical and Physical services. In 1991, it was given the status of an institute under the Act of Sindh Assembly. In 1985, this institute performed the first successful kidney transplantation of a person who belongs to Azad Kashmir. Since then, SIUT continued her efforts in different medical disciplines. It also successfully achieved liver transplantation in 2003. In 2005, SIUT created a charitable trust for the benefits of public. Now today, SIUT is one of the biggest philanthropist institutes across Pakistan. In this study, Dr. Adeeb Rizvi was working in a government institute and providing quality services. But lack of a federal government budget in the health sector creates more gaps between supply and demand health care services in district Karachi. Now SIUT is working as an autonomous institute and it fulfills their expenditures through charity, donations, national and international grants.

**Table 2.** SIUT delivery of health services

Sindh institute of urology transplantation			
Years/variables	In-patients	Outpatients	Dialysis services
2010	31,460	189,660	163,915
2011	33,743	202,456	187,284
2012	36,449	260,668	211,565
2013	37,446	316,690	226,226
2014	38,415	343,803	254,641
2015	48,119	373,418	267,834
2016	58,245	406,870	302,037
2017	65,946	433,255	352,160

Source: Sindh Institute of Urology Transplantation annual report, [www.siut.org](http://www.siut.org)



**Figure 6.** SIUT delivery of health services



Table 2 shows that SIUT has more than 30,000 inpatients were admitted in the year of 2010, at the same time span, it was served almost 1.9 million outpatients. Furthermore, it performed 163,915 dialysis services in one year. With the passage of time with increasing demand more medical services have been added to SIUT. Figure 6 provides year-wise the increasing trend in Inpatients, Outpatients and Dialysis services. From 2010 to 2017, it was increased by 109% Inpatient admissions, 128% of Outpatients and 114% of Dialysis service.

## 5.2 Indus Hospital (IH)

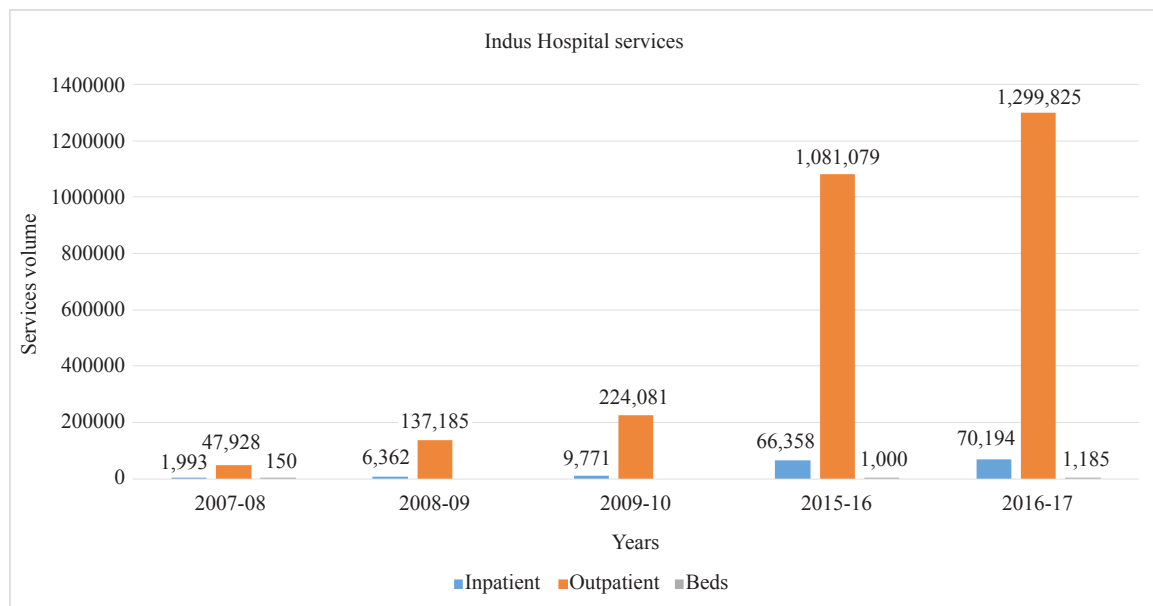
Indus Hospital was a private hospital that is based on charity and was established in July 2007. It offers state of the art health care facilities free of cost. The CEO of Indus hospital is Dr. Abdul Bari Khan, who formed and led an organization named “Patients Welfare Association” in 1980. This organization was used to raise funds for poor patients and build a blood bank and cardiac surgery Civil Hospital Karachi. After two decades, he decided to establish his own charity care hospital and thus through their hard working. Indus Hospital came into being in 2007. Initially, it has only 150 beds and now in 2016-17 the number of beds is 1,065. The number of inpatients admitted to the hospital was 1,993 in 2007-08 as listed in Table 3. Then in 2015-16, the number of inpatients was 66,358. In the same way, in 2016-17, the number of inpatients admitted to the hospital is 70,194, which shows the remarkable growth in the service volume of Indus Hospital. Same thing can be seen by Figure 7. Moreover, the total number of outpatients was increased from 47,928 in the fiscal year 2007-08 to 1,299,825 in the fiscal year 2016-17.

**Table 3.** Indus Hospital delivery of health services

Variables/years	Indus Hospital				
	2007-08 **	2008-09 **	2009-10 **	2015-16 ***	2016-17 ***
Inpatient	1,993	6,362	9,771	66,358	70,194
Outpatient	47,928	137,185	224,081	1,081,079	1,299,825
Beds	150	N/A	N/A	1,000	1,185

Source: \*\* “The Indus Hospital: Delivering Free Health Care in Pakistan” by Harvard Medical School in April 2012

\*\*\* Annual report of Indus Hospital



**Figure 7.** Indus Hospital delivery of health services

### 5.3 Shaukat Khanum Memorial Hospital (SKMCH)

Shaukat Khanum Memorial Cancer Hospital and Research Center is the first hospital that is specialized in Cancer. It was established on December 29, 1994 in Lahore, Pakistan. This hospital is the project of a charitable organization named Shaukat Khanum Memorial Trust. The founder of this trust is Imran Khan, a superstar in the cricket world. He established this hospital after the death of his mother, Mrs. Shaukat Khanum for Cancer disease. He started a fundraising of this hospital on 10<sup>th</sup>-November-1989 from the match between Pakistan and India at Gaddafi Stadium Lahore. Even in 1992, when Pakistan won the cricket world cup under his captaincy, he denoted his entire prize money for this project. Its vision is to alleviate the suffering of people with cancer, irrespective of their ability to pay.

This hospital now completed several successful years and seems a steady increase in the number of inpatients, outpatient and Chemotherapy as shown in Table 4 and Figure 8. The number of inpatients was increased from 2,599 in 2000 to 13,213 in 2018. In the same way, in 2000 the total number of outpatient visits was 40,325 whereas in 2018 the number of outpatients was 247,508. As we see the services of Chemotherapy 9,600 patients were entertained with this facility in 2000. Now in 2018, total of 47,669 patients were benefited from the services of the hospital.

**Table 4.** SKMCH delivery of health services

Shaukat Khanum Memorial Cancer Hospital			
Years/Variables	In-patients	Outpatients	Chemotherapy
2000	2,599	40,325	9,600
2001	3,102	49,511	9,322
2002	3,309	49,270	11,690
2003	3,668	54,190	12,839
2004	4,177	69,023	15,377
2005	4,910	76,736	15,868
2006	5,134	87,534	18,206
2007	6,023	112,714	23,719
2008	6,079	119,037	23,709
2009	6,545	124,372	26,448
2010	6,785	130,165	27,588
2011	7,618	141,806	31,367
2012	8,613	156,766	31,198
2013	9,949	172,236	33,783
2014	10,654	185,018	39,044
2015	11,352	205,313	42,559
2016	12,576	236,351	52,843
2017	12,054	243,663	47,983
2018	13,213	247,508	47,669

Source: Annual reports of Shaukat Khanum Memorial Hospital (2000-2016), [www.shaukatkhanum.org.pk](http://www.shaukatkhanum.org.pk)

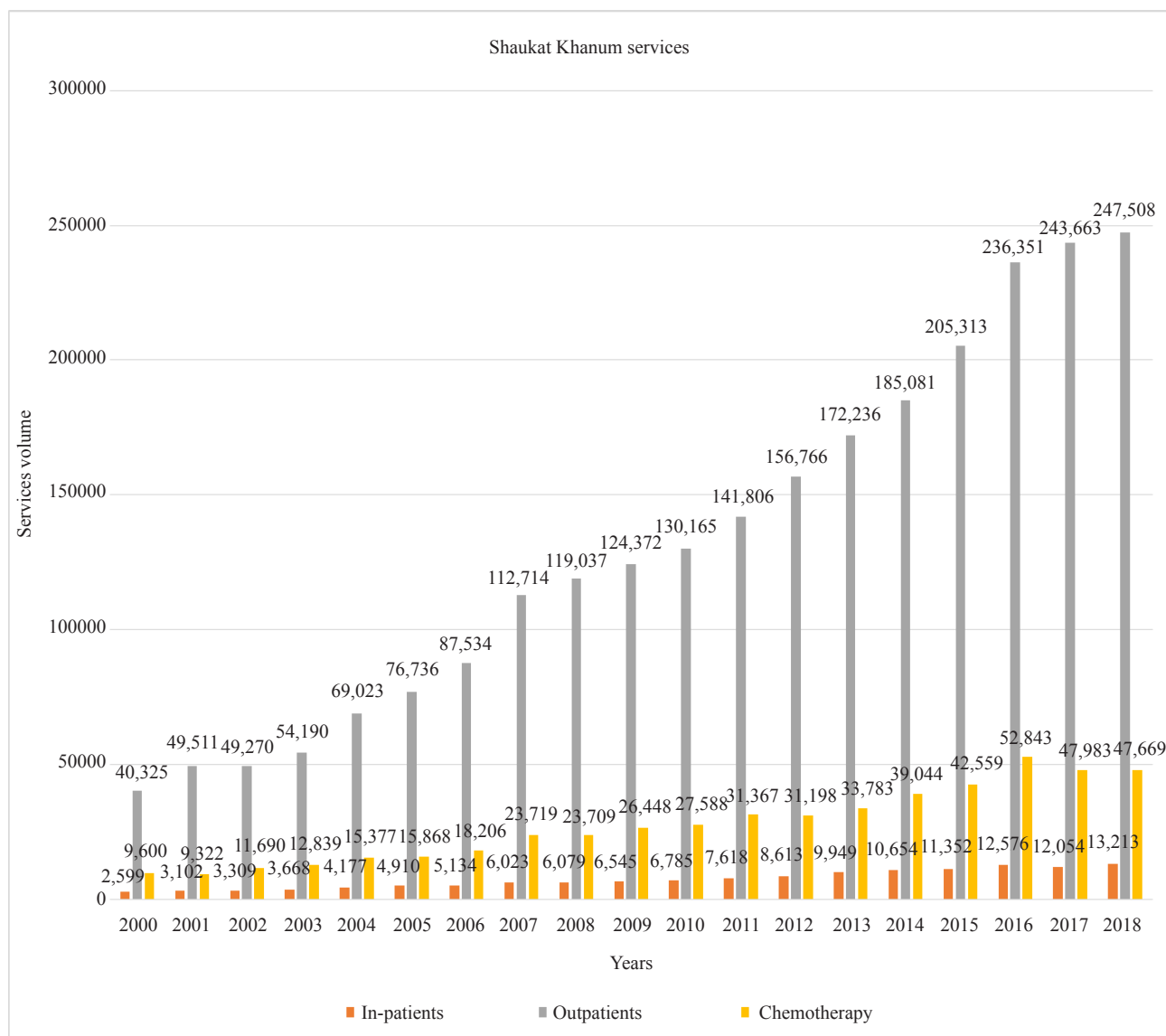


Figure 8. SKMCH delivery of health services

In short, facilities at Shaukat Khanum Memorial Cancer Hospital continue to be increased. In December 2015 Shaukat Khanum Memorial Cancer Hospital and Research Center is established in Peshawar. Other than these two-existing hospitals, that continue to provide facilities to cancer patients, the construction of the third Shaukat Khanum Memorial Cancer Hospital and Research Center has started in Karachi in December 2018. The aim is that this third hospital will start working within three years.

## 6. Conclusion

This paper is an exploratory attempt to study the role of social entrepreneurs in the health sector of Pakistan. Three hospitals were selected to study the impact of the emerging phenomenon in social entrepreneurship. There appear four distinct emerging trends. The first trend is the result of transformation in public sector hospitals where some individuals within the system play a catalyst role in order to improve the available facilities. SIUT and Gambat hospital are examples in the context. The second trend corresponds to those phenomena, where a group of professionals in the field

join hands with the objective to provide health care facilities at minimal cost or free to the people. The Indus hospital is an example where general health care facilities are provided at free cost. The third trend is the outcome where some celebrity or prominent person ventures into social activity to serve the human. Shaukat Khanum Memorial and Sahara Trust are examples in this regard. The fourth trend exhibits the establishment of hospital and health care services by the corporate sector or business houses. Tabba Heart Institute, Sharif Medical Centre are an example of such ventures.

Though emerging trends of social entrepreneurs show that various entities substituted health care facilities of public sector hospitals in an effective manner at a minimal cost. The provision of quality healthcare services by these institutions is increasing over the period of time. However, their scope of operations is limited to large cities because of location, which limits the access of services to small cities and/or rural areas. It needs evolving and designing of strategy where every individual of society can benefit from the services of social entrepreneurship.

## Conflict of interest

The authors declare no competing financial interest.

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