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DAILY EDITORIAL ANALYSIS

TOPIC

India's Path to Inclusive Health Care

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INDIA'S PATH TO INCLUSIVE HEALTH CARE

Context

- With a large and diversified population, India faces persistent obstacles to health equity.
 - Recently, World Health Day (WHD) was celebrated to mark the anniversary of the founding of WHO in 1948

Health Equity

- Equity is the absence of avoidable, unfair or remediable differences among groups of people due to their social, economic, demographic or geographic circumstances.
- Health equity is the state in which everyone has a fair and just opportunity to attain their highest level of health.

Importance of Health equity

- It ensures that every person has an equal opportunity to achieve their highest health potential, no matter what their circumstances.
- It addresses the root causes of inequities such as poverty, discrimination, limited access to high-quality education, a healthy diet, clean water, fresh air, and housing, and merely grants equal access to health care.
- It is a fundamental component of social justice.
- Health and development :They are interlinked. The health of a population is a fundamental need for economic and social well-being. Thus, the developmental trajectory of a nation hinges significantly on its capacity to furnish top-tier healthcare services to its populace.
 - Doing so enhances productivity, encourages better lifestyles, and creates a more informed and mature labour force, thereby enriching the overall standard of living.

Initiatives

- "Public Health and Hospitals" being a state subject, the primary responsibility of strengthening the public healthcare system lies with the respective State Governments.
 - However, under the **National Health Mission (NHM)**, technical and financial support is provided to the States/UTs to strengthen the public healthcare system at public healthcare facilities.
- Ayushman Bharat initiative :Ayushman Bharat was recommended by the National Health Policy 2017, to achieve the vision of Universal Health Coverage (UHC).
 - This initiative has been designed to meet Sustainable Development Goals (SDGs) and its underlying commitment, which is to "leave no one behind."
- The **National Health Mission (NHM**), which includes both the National Rural Health Mission (NRHM) and the National Urban Health Mission (NUHM), reduces the health-care gap between rural and urban India by expanding access, strengthening infrastructure, and providing essential services to vulnerable populations.

Constitutional Provisions

- The **Directive Principles of State Policy in Part IV** of the Constitution provides a basis for the right to health.
- Article 39 (e) of the Constitution directs the state to secure the health of workers:
- Article 42 emphasises just and humane conditions of work and maternity relief; and
- Article 47 casts a duty on the state to raise the nutrition levels and standard of living, and to improve public health.
- The Constitution not only mandates the state to enhance public health but also endows the panchayats and municipalities to strengthen public health under Article 243G.

Existing Issues

- **Global:** The **COVID-19 pandemic** has revealed that infectious diseases target marginalised and vulnerable groups the most, thus widening the health equity gap.
 - **Climate change** poses a serious health risk since it disproportionately impacts low-income and vulnerable people.
 - The health-care provision is severely hampered by **conflicts**, which destroy infrastructure, uproot communities, and shut off access to vital medical services.
- · Indian Scenario: India is diverse and has wide socioeconomic gaps.
 - Access to health care in rural areas is significantly less than in metropolitan areas.
 - Social and economic barriers exacerbate this disparity.
 - According to the 2011 Census, urban slums make up over 17% of India's metropolitan areas, and exhibit serious health disparities.
 - Health risks are increased by overcrowding, poor sanitation, and restricted access to clean water.
 - Infectious diseases, such as tuberculosis, are 1.5 times more common in slums than in non-slum areas
 - Disparities across caste and gender are profound.
 - NFHS-5 (2019-21) data indicates that Scheduled Castes and Scheduled Tribes experience higher child mortality and lower immunisation rates.
 - Additionally, 59% of women in the lowest wealth quintile suffer from anaemia, almost double the rate in the highest quintile, demonstrating the intersection of caste, gender, and economic status in health outcomes.
 - Non-communicable diseases (NCDs) account for more than 60% of all fatalities in India.
 - A critical shortage of doctors exacerbates these issues, with WHO data indicating only 0.8 doctors per 1,000 people, which is below the advised ratio.
 - Even though over 75% of health-care professionals work in metropolitan regions, which only account for 27% of the population, the shortage is particularly severe in rural areas.



Suggestions and Way Forward

- Even though access to health care has improved over the past 20 years, there is still
 much work to be done in rural India.
- India's health equity issues require a comprehensive approach beyond improvements in health-care facilities to address more extensive socioeconomic determinants of health.
- To move India toward universal health coverage and a more equitable future, the government, civil society, health-care providers, and communities need to work together.
- Governments and officials may influence the state of health through funding, creative policies, and laws.
- Achieving health equity also requires addressing social determinants of health and health disparities.
 - It involves acknowledging and addressing racism as a threat to public health and the history of unethical practices in public health that lead to inequitable health outcomes.

Mains Practice Question

[Q] In a rapidly changing world, the pursuit of health equity and inclusion remains at the forefront of various countries' goals. In light of the above statement, examine the status of Health Equity in India.

