

Towards a Comprehensive Healthcare System

What is the issue?

\n\n

India's 'public health' system should become more comprehensive and can no longer function within the shadows of its 'health services' system.

\n\n

What is a healthcare system?

\n\n

\n

- The public health system looks at the social ecology and determinants focusing on optimising wellness.

\n

- Healthcare services, on the other hand, primarily focus on preventing morbidity and mortality.

\n

- A comprehensive healthcare system will seamlessly bridge the above two.

\n

- In India, public health and health services have been synonymous, hampering the growth of a comprehensive public health system.

\n

\n\n

Why is a public health system crucial?

\n\n

\n

- A stark increase in population growth, along with rising life expectancy, provides the burden of chronic diseases.

\n

- Tackling this requires an interdisciplinary approach.

\n

- An individual-centric approach within healthcare centres does little to promote well-being in the community.

\n

- Seat belt laws, food and drug safety regulations, and policies for tobacco and

substance use as well as climate change and clean energy are all intrinsic to health.

\n

- But they are not necessarily the responsibilities of healthcare services. A robust public health system becomes vital here.

\n

- A well organised public health system with supporting infrastructure strives to prevent catastrophic events and public health tragedies.

\n

- E.g. the 2017 Gorakhpur tragedy in Uttar Pradesh, 2018 Majerhat bridge collapse in Kolkata, air pollution in Delhi, Punjab narcotics crisis

\n

\n\n

What are the drawbacks in India?

\n\n

\n

- **Institutions** - India's public health workforce comes from an estimated 51 colleges that offer a graduate programme in public health.

\n

- This number is lower even at the undergraduate level.

\n

- In stark contrast, 238 universities offer a Master of Public Health (MPH) degree in the U.S.

\n

- **Workforce** - India also lacks a diverse student population which is necessary to create an interdisciplinary workforce.

\n

- In the U.S., public health graduates come from engineering, social work, medicine, finance, law, architecture, and anthropology.

\n

- [Public health tracks include research, global health, health communication, urban planning, environmental and behavioural sciences, behavioural economics, healthcare management, financing.]

\n

- **Curriculum** - The diversity is further enhanced by a curriculum that enables graduates to become key stakeholders in the health system.

\n

\n\n

\n

- Strong academic programmes are critical to harness the potential that students from various disciplines would bring, where India needs to improve.

\n

- **Investments** in health and social services tend to take precedence over public health expenditure in India.

\n

- Benefits from population-level investments are usually long term but sustained.

\n

- As it tends to accrue much later than the tenure of most politicians, there is reluctance in investing in public health as opposed to other health and social services.

\n

- But the impact of saving valuable revenue through prevention is indispensable for growing economies like India.

\n

\n\n

\n

- **Health communication**, an integral arm of public health, aims to disseminate critical information to improve the health literacy of the population.

\n

- The World Health Organisation calls for efforts to improve health literacy, an independent determinant of better health outcome.

\n

- India certainly has a serious problem with health literacy and it is the responsibility of public health professionals to close this gap.

\n

- Also, legislation is often shaped by public perception, rather than being informed by research.

\n

- **Evaluation system** - Many of the national programmes on health fail due to improper implementation.

\n

- A system of evaluating national programmes is essential for ensuring proper outcome and saving time and money.

\n

\n\n

What could be done?

\n\n

\n

- A sound public health system is critical to overcome some of the systemic challenges in healthcare.

\n

- A central body like the council for public health may be envisaged to work with other agencies to promote population-level health.

\n

- These may include public works department, narcotics bureau, water management, food safety, sanitation, urban and rural planning, housing and infrastructure.

\n

- The proposed council for public health should also work closely with academic institutions.

\n

- This is to develop curriculum and provide license and accreditation to schools to promote interdisciplinary curriculum in public health.

\n

- The proposed comprehensive insurance programme Ayushman Bharat caters to a subset of the population.

\n

- Beyond this, systemic reforms in public health could shift the entire population to better health.

\n

- With rising healthcare costs, there is also the need to systematically make healthcare inclusive to all.

\n

\n\n

\n\n

Source: The Hindu

\n

