The Healthcare Scenario in India: Changes Required at Ground Level

[1]Indu Saxena and [2]Manoj Kumar

[1]All India Institute of Medical Sciences, India.

[2]Maharshi Vashishtha Autonomous State Medical College, India.

The National Health Protection Scheme (NHPS) was presented in the Indian Parliament by the Finance Minister Mr Arun Jaitley on 1st February 2018, and has been admirably discussed by Chatterjee in the Lancet World Report[1]. It was launched on 23rd September, 2018 and was renamed as Prime Minister Jan Arogya Yojana. It offers an insurance cover of Rs5 lakh ($7140, approximately) per family per year to the economically vulnerable under specific categories of rural and urban areas.

There is no doubt the NHPS is making healthcare more amenable to the economically weaker people. Most of the less affluent people avail the public sector dispensaries/ hospitals/ medical institutes, present throughout the country. The trust of the people in government healthcare facilities can be judged from the long queues, overcrowding, and long waits for surgeries encountered in these establishments. The physicians and staff in these establishments are overworked but discharge their duties with diligence and sincerity.The Indian healthcare sector, currently worth almost US$ 100 billion, is expected to increase to US$ 280 billion by 2022, showing a growth rate of 23% [2,3]. The increase in the number of physicians in the country has been followed by an even greater increase in population, however , the doctor: population ratio has improved to 1:1700, from 1:6300 in 1950[4].The efficiency of the present healthcare resources of the public sector can be improved if the basic problems can be rooted out of the system.

Sadly, the corruption, bakhsheesh, and discrimination present in the society have infested healthcare establishments also[5]. No healthcare scheme, however perfect, can make healthcare amenable to all people belonging to the weaker sections of the society, as long as corruption and discrimination prevail in these institutions. Housekeeping personnel, ward personnel, and even nursing staff may demand bribe in return of the facilities provided to the patient, or demand bakhsheesh at the time of patient's discharge or on the birth of a healthy baby, especially if also male. Corruption and bakhsheesh are perhaps a result of the economic insecurity borne by the Indians under the Mughal and British rules, especially during the famines[6]. In spite of the improved living conditions and economic security today, the tendency to hoard, not merely for the rainy day but also for the future generations, is still there. Parents find it hard to believe that their young children will one day be able to earn enough for themselves.

Discrimination in India is often based on caste, region, language, socioeconomic status, or gender. The biggest losers are the poor women of the Dalit community[7]. Even if only 1% healthcare personnel show biased behaviour, and each biased person discriminates against just 100 patients in a year, the number of actual incidents becomes very high. Most physicians are empathetic towards their patients, but are unable to keep an eye on their subordinates or lack the power to take action against such employees. Eliminating discrimination will not be easy. Lectures, role-play, discussions etc. can be held by the faculty to remove or reduce these biases. Compulsory CMEs related to identification and removal of bias for practicing physicians, as well as tips on how to deal with biased co-workers and subordinates can reduce discrimination in workplaces. Helplines for victims of discrimination should be made available, and serious incidents should be reported to the police. Teaching the evils of discrimination to young primary school children would be more effective, as young minds are more malleable, idealistic, free from bias, and open to new thoughts. It must be remembered that the caste system that is currently practiced in India is not according to the Sanatan Dharma.

The PurushSuktam of Rigveda has described varnas on the basis of occupation of the people[8]. A person who committed a grievous sin became untouchable, and could belong to any varna. The government can become involved and incorporate such teachings in the primary school syllabus; however it would be difficult to recruit teachers who are themselves free from such biases. Ancient India had an efficient healthcare system based on Ayurveda[9]. Hospitals were established by the heads of rich Vaishya families, where physicians originating from all varnas looked after the sick. The patients, belonging to all varnas, availed of free medicines, food, and care during their stay. It would be wonderful to have the same standard of healthcare in Modern India. The government is making all efforts to uplift the standard of healthcare in India and to make it accessible to all citizens, but it must be realized that the government alone cannot achieve anything without the cooperation of the citizens. It is the responsibility of every citizen, not just of India but the world, to take the world towards a brighter future.

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