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Healthcare Scenario in India

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India, a country with a centuries-old heritage of medical science, first became familiar with the modern systems of medicine in the 17th century. India became an independent nation in 1947 and became a Federal Republic in 1950. There have been various developments in the health sector in the postindependence era. But problems like higher population density, low socioeconomic status of a significant number of people and low literacy rate in some parts of the country, have resulted in poor health indicators.

Historical Background

India has a rich, centuries-old heritage of medical and health sciences. The approach of the ancient Indian medical system was one of holistic treatment. The history of healthcare in India can be traced to the Vedic times (5000 BCE), in which a description of the Dhanwanthari, the Hindu god of medicine, emerged. Atharvaveda, one of the four Vedas, is considered to have developed into Ayurveda, a traditional Indian form of holistic medicine. The philosophy of Ayurveda, "Charaka Samhita" (the famous treatise on Medicine compiled by Charaka), and the surgical skill enunciated by Sushruta, the father of Indian surgery, bear testimony to the ancient tradition of scientific healthcare amongst the Indian people. Historically, the most outstanding hospitals in India were those built by King Ashoka (273-232 BCE). Medicine based on Indian medical principles was taught in the Universities of Taxila and Nalanda.

Transition from Traditional to Modern Medicine

Ayurveda applies the Tridoshha theory of disease. Tridoshha describes three dhoshas, or biological elements, which are linked to a patient's health: Vata (wind), Pitta (gall) and Kapha (mucus). Disease is explained as a disturbance in the equilibrium of the three dhoshas, a concept similar to the theory put forward by Greek medicine. Other non-modern systems of medicine, like Unani and homeopathy, are not of Indian origin, but are popular in India even today.

During the 17th and 18th centuries, there was a slow and steady growth of the modern system of medicine in India, starting with the arrival of European Christian missionaries in South India in the 17th century. In 1664 at Chennai, the British opened the first modern hospital for soldiers and, in 1688, another for the civilian population. Organized medical training began with the opening of the first medical college in Calcutta in 1835, followed by a school in Mumbai in 1845 and one in Chennai in 1850.

Health Scenario

Over the past decade, healthcare services available in India have increased dramatically (see table 1).

The doctor-to-population ratio in India is 1:2148. The infant mortality rate is 64 per 1,000 live births. The overall mortality rate has declined from 27.4 in 1991 to 8 per 1,000 population in 2002, and life expectancy at birth has increased from 37.2 years to 60.6 years over the same time period.

Since independence, considerable progress has been achieved in the promotion of health in India. Smallpox has been eliminated, and mortality from cholera and other related diseases has decreased. But episodes of cholera continue to recur, and the incidence of tuberculosis is not insignificant. The situation in regard to public sanitation, preventive healthcare, control of communicable diseases and health education needs to

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be improved. In addition to the diseases of poverty and malnutrition, noncommunicable diseases related to urbanization, such as diabetes mellitus, hypertension, cardiovascular diseases and cancer is a cause of concern. Road traffic accidents, geriatric problems and complications of autoimmune deficiency syndrome (AIDS) are also on the increase.

Though hospitals, dispensaries, public health centers and other medical facilities are present, they are not sufficient to cater to the growing needs of India's substantial population. Rural access to quality medical service has to be improved. The inadequate manpower of doctors in public sector hospitals is also a concern for health authorities. Furthermore, the infrastructure required in the hospitals, like medicine, furniture and equipment, are not adequate to serve the population. Compounding the problem, government spending on healthcare services is not up to the World Health Organization (WHO) norms of gross domestic product in healthcare.

Though the public sector is not expanding its healthcare services, private, co-operative and other non-profit organizations have started hospitals and are providing medical services to the public. Moreover, the Government of India is taking other steps to improve healthcare. For example, the Government has, from time to time, appointed various committees to address the pervasive problems in the healthcare sector. In addition, it has demonstrated a strong commitment to population control, including the implementation of family planning programs geared towards controlling the population.

The Right to Health and Advances in Healthcare Protection

The Indian Constitution has incorporated the responsibility of the state in ensuring basic nutrition, basic standard of living, public health, protection of workers, special provisions for disabled persons and other health standards, which were described under Articles 39, 41, 42 and 47 in the Directive Principles of state policy. Article 21 of the Constitution of India provides for the right to life and personal liberty and is a fundamental right. Keeping in tune with the universal declaration of human rights and various other developments in the Indian healthcare sector, the judiciary has included the right to health under Article 21. In accordance with the recognition of the fundamental right to health, the Indian Government adopted a national health policy targeted "health for all" by the year 2000. Although the country couldn't achieve all the benchmarks by the targeted date, the Government has set a revised date of 2015, by which time it hopes to meet the millennium development goals.

The judiciary, through the process of judicial activism, has transformed the Indian health scenario. The right to health is now a fundamental right; hospitals are included under the purview of the Consumer Protection Act, ensuring timely and emergency care for patients in all hospitals (the patients can approach the Consumer Forums to redress grievances); and actions are taken against cases of negligence. The legislature has also introduced acts like the Transplantation of Human Organs Act, Prenatal Diagnostic Techniques Act, Medical Termination of Pregnancy Act and others to improve healthcare. The media has also played an important role, by bringing the problems of the healthcare sector to the attention of Government authorities.

Insurance in the Healthcare Sector

Most developed countries have a widespread insurance network in the healthcare sector. But, in India, the insurance industry is only now picking up. The percentage of the Indian population having health insurance policies is very low, and there are very few companies offering insurance in the healthcare sector. Nonetheless, it is expected that insurance will play a major role in the Indian healthcare system in the near future.

Availability of Information and Impact of Information Technology in Healthcare

Consolidated data on the healthcare service is not available, and the mechanism of assimilation of data on the national level is not efficient. However, there are islands of excellence in some of the national institutes and a few other centers. The developments of information technology, such as a computerized hospital information system, are available in some of the centers. In addition, the Indian Space Research Organization (ISRO) has embarked on a telemedicine project, which has potential to provide specialist service to remote areas.

Health Tourism

India, the land of Ayurveda, has a wide variety of special treatments to offer. In addition, there are hospitals practicing modern medicine that provide quality service at an affordable cost. When compared to the expense of medical treatment in Western countries, India's facilities for treatment, natural beauty and tourist destinations across the country will make it a popular destination for people of all nationalities seeking healthcare.

Accreditation

In the year 2006, the quality council of India, through the National Accreditation Board for Hospitals (NABH) has come out with hospital standards that are applicable to Indian hospitals. The likelihood of an insurance boom in the healthcare sector and the potential for health tourism are important reasons for accrediting the hospitals. Therefore, accreditation and quality health service will be the main agenda of hospitals in the years to come.

Conclusion

India has made striking progress in health standards in the post-independence era. Still, many feel that the budgetary resources for the health sector should be increased. International developments in information technology need to be utilized at the national level in an attempt for health data documentation. The sustained efforts to control the country's population and the political will to march towards the millennium development goals in health will help India to make a significant impact in the international health scene.

Global references for this article are available at editorial@icu-management.org.

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