

## Take corrective steps on an urgent basis

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### India's poor performance on healthcare front gets exposed by frequent news about deaths of patients due to inadequate facilities in hospitals



Some recent reports and news about healthcare sector are alarming as they bring into focus two important angles – growing disease burden on one hand and sharply contrasted inadequate healthcare facilities, particularly at the grass root level on the other.

World Health Organisation (WHO) in its recent report highlighted that 61% of deaths in India are attributed to non-communicable diseases (NCDs). Almost 23% are at risk of premature death due to such diseases. NCDs caused over six million deaths in India in 2016 as per the Global Burden of Disease (GBD) study published in Lancet last year. India is at the 127th position among 188 countries in achieving UN's health related sustainable development goals (SDGs).

India's poor performance on healthcare front gets exposed by frequent news about deaths of patients due to inadequate facilities in hospitals. It is also due to the failure of the authorities to reach the healthcare facilities to the sick people in remote areas. A recent report pointed out that while the government is setting up new All India Institutes of Medical Sciences (AIIMS) at different places, five major projects in a campus of AIIMS in Delhi, which started in 2014, are delayed due to lack of funds. First the beginning of the work on implementation of these projects delayed by a decade after they were proposed and even after the work began it got further delayed.

The failures of authorities on various such counts are no more restricted only to the publication of news, but the Comptroller and Auditor General (CAG) has now officially nailed them in its recent performance audit report, leaving no scope for any counter argument.

The most interesting part of this report is that paucity of financial resources is generally cited as the cause for inadequate infrastructure in the government sector but that is not the case here. A massive Rs 9,509 crore remain unspent in the National Rural Health Mission in 2015-16. It is not a case of a single year. This amount has steadily increased from Rs 7,375

crore in 2011-12.

While the funds on such a large scale remain unutilised, healthcare infrastructure in various forms, including sub-centres, primary and community health centres remain inadequate. The shortfall ranged between 24% and 38% and in case of five states the facilities are only half of the requirement. In over 1200 cases the constructions have been done but the facilities are not operational.

Same is the situation of equipment, drugs, and human resources. Equipment is in short supply at some places and where equipment exist they lie unutilised due to non-availability of the required human resources. Average shortfall of five types of specialists ranged from 77% to 87%. Shortage of nurses in 236 *Contributory Health Services Scheme* (CHSs) is over 1000. Drugs are not only in short supply, but where they are available they are given to patients without conducting quality checks and without observing expiry dates. The performance report points out to the inadequacies in the rural healthcare in detail.

The CAG has shown the total neglect of the existing facilities and infrastructure in the healthcare. As a result of this the ministry curtailed the cost estimates of National Health Mission 2020 following the criticism of the inadequacies by NITI Aayog and finance ministry. The estimates are curtailed when the rural areas require much more healthcare facilities with more spending.

The report is certainly an eye opener for all. But more than that, it can be also looked at by the union and state governments as an opportunity to take corrective steps on an urgent basis for speedy improvement. Otherwise, it will continue to remain as one more report like many previous ones, gathering dust.