



# Think differently about healthcare

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## **India's public health system can no longer function within the shadows of its health services system**

- In India, public health and health services have been synonymous.
- This integration has dwarfed the growth of a comprehensive public health system, which is critical to overcome some of the systemic challenges in healthcare.
- A stark increase in population growth, along with rising life expectancy, provides the burden of chronic diseases.
- Tackling this requires an interdisciplinary approach.
- An individual-centric approach within healthcare centres does little to promote well-being in the community.
- As most nations realise the vitality of a robust public health system, India lacks a comprehensive model that isn't subservient to healthcare services.

### **A different curriculum**

- India's public health workforce come from an estimated 51 colleges that offer a graduate programme in public health.
- This number is lower at the undergraduate level.
- In stark contrast, 238 universities offer a Master of Public Health (MPH) degree in the U.S.
- In addition to the quantitative problem, India also has a diversity problem.
- A diverse student population is necessary to create an interdisciplinary workforce.
- Public health tracks range from research, global health, health communication, urban planning, health policy, environmental science, behavioural sciences, healthcare management, financing, and behavioural economics.
- Hence, strong academic programmes are critical to harness the potential that students from various disciplines will prospectively bring

to MPH training.

- Investments in health and social services tend to take precedence over public health expenditure.
- While benefits from population-level investments are usually long term but sustained, they tend to accrue much later than the tenure of most politicians.
- This is often cited to be a reason for reluctance in investing in public health as opposed to other health and social services.
- This is not only specific to India; most national health systems struggle with this conundrum.
- A recent systematic review on Return on Investment (ROI) in public health looked at health promotion, legislation, social determinants, and health protection.
- The impact of saving valuable revenue through prevention is indispensable for growing economies like India.

### **Problem of health literacy**

- Legislation is often shaped by public perception. While it is ideal for legislation to be informed by research, it is rarely the case.
- It is health literacy through health communication that shapes this perception.
- Equally important is a system of evaluating national programmes.
- The public health system looks at the social ecology and determinants focusing on optimising wellness.

### **A council for public health**

- A central body along the lines of a council for public health may be envisaged to synergistically work with agencies such as the public works department, the narcotics bureau, water management, food safety, sanitation, urban and rural planning, housing and infrastructure to promote population-level health.
- The proposed council for public health should also work closely with academic institutions to develop curriculum and provide license and accreditation to schools to promote interdisciplinary curriculum in public health.
- Regulatory challenges force governments to deploy cost-effective solutions while ethical challenges to create equitable services concerns all of India.
- With the infusion of technology driving costs on the secondary and

tertiary end, it is going to be paramount for India to reinvigorate its public health system to maximise prevention.

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