Editorial

The Case against India Achieving Universal Health Coverage by 2030

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BACKGROUND

Universal Health Coverage (UHC) is one of basic requirements of achieving optimal health and equity in any nation.[1] The goals of Universal Health Coverage (UHC), which has been defined as "all people receiving quality health services that meet their needs without exposing them to financial hardship in paying for them."[2] Nevertheless, UHC definition in any country is associated with its economic, social, political and cultural status.[3] The commitment to achieve Universal Health Coverage (UHC) by 2030 is a mandate set by the Sustainable Development Goals (SDG) of the UN and signed up to by India in September 2015. It is very evident that two tracks on which Central Government will be moving to achieve this are 'Pradhan Mantri Jan Arogya Yojana - Ayushman Bharat' and 'National Health Mission' with contributions from the state governments.

Present Scenario

India, same as many other high-income countries, has made certain efforts to achieve UHC, however various obstacles still lie in the way of India achieving Universal Health Coverage by 2030. Smoe of these obstacles are:

1. Lack of Clarity

There is a lack of clarity on what Universal Health Coverage will entail. A large segment of the population believes that UHC means that no citizen will ever have to pay out of pocket for healthcare. This hardly seems possible, considering that this state is achieved by only a handful of developed countries with much larger financial resources, smaller population size, less disease burden, much higher and significantly wider tax base.[4]

2. Funding

Cost for Universal Health Coverage will require a significantly larger financial commitment and government offers no explanation as to how such an ambitious program will be funded. India only spends 1.4% of its GDP on healthcare. On the contrary The United Kingdom, a much smaller country with roughly the population of Karnataka, spends 7.9% of its GDP on healthcare.[5] Also In India, only 1.5% of citizens actually pay taxes.[5] On the contrary countries with Universal Health Coverage usually levy much higher taxes.

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3. Role of the Private Sector

The private sector plays an important role in healthcare in India, and it represents an influential and powerful lobby in the healthcare sector in India. However, there is no clarity regarding the role the private sector in achieving Universal Health Care. Already in case of Ayushman Bharat, too much engagement of private hospitals to provide financial cover will reinforce the impression that private healthcare is better than government healthcare.

Also, countless private hospitals have expressed grave concerns with regard to prices of critical procedures announced by the Government. The Association of Healthcare Providers, India feels that the prices are far below market rates and it would be unsustainable to operate at such costs while providing high quality outcomes.[6] Thus, revision of rates is a necessity to keep the private hospitals engaged ensuring sustainability of the scheme.

4. Shortage of Medical Personnel

The doctor: population ratio in India is 0.62 per 1000 people, against the WHO recommendation of 1 per 1000 that not only puts us behind the developed countries but also countries like Vietnam, Algeria, and Pakistan.[7]

5. Health Infrastructure in India

It is widely acknowledged that - "Policy and Infrastructure must go hand in hand" with regard to healthcare.

However, the state of health infrastructure in India remains lamentable. Of the 156,231 sub-centres in India, 78,569 were without male health workers, 6,371 without auxiliary nurse midwives and 4,263 without either.[8]

PHCs require 25,650 doctors across India to tend to a minimum of 40 patients per doctor per day for outpatient care, as per Indian Public Health Standards.[8] If these standards are met, 1 million patients could be benefitting every day. But with a shortage of 3,027 doctors, 1,974 PHCs are without doctors. This means that 12%, or 121,080 patients, go without access to primary health care every day.[8] Also, Budget allocation of 1200 crores for setting up and upgrading 1.5 lakh Health and Wellness Centres (HWC's) to cater to medical treatment need under Ayushman Bharat appears to be grossly inadequate.[9]

6. Lack of Political will

In India, having a thoroughly motivated political class is vital to the success of any project. So, a project of the size of Universal Health Care demands bipartisan support, which seems highly unlikely in India's highly polarized political climate. According to Rob Yates, Director, UHC Policy Forum, Chatham House, - "There are two things missing from the public health system in rural India - Public Financing and Political Commitment. You need the latter for the former."[10]

But, in a country which seems to be in permanent election mode, and where healthcare spending is just a fraction over 1% of its GDP, this seems a tall order.

7. Lack of Awareness

A large segment of the population remains unaware of India's dream of achieving Universal Health Coverage by 2030. As a result accountability of the Government remains an issue.

Conclusion

Based on these critical points, it remains unclear how India can and will achieve UHC. It may not be completed by 2030 or by 2050. It will take a long time. However, stronger political commitment from the government, a change of attitude towards the health sector and adequate leverage by successive governments of our financial and human resources over the next few decades, with further efforts towards reaching an efficient health system will ensure it's success; and UHC, once fully rolled out in India, will be the largest healthcare initiative the world will have ever seen.

Recommendation

- Increase in Public Health spending to at least 3% of the GDP in next five budgets.
- Building health care infrastructure in the periphery.
- Control the escalating prices of essential medications and investing more capital in providing cheap drugs and diagnostic services to the people.
- Triple the human resource in the public health sector and recruitment of additional cadre of health providers on priority basis thus giving employment opportunities
- Strengthening entire health care system in India with novel models and strategies such as experience gained from RSBY.

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