



HEALTH ISSUES AND CHALLENGES IN RURAL INDIA

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ABSTRACT

Despite the implementation of National Rural Health Mission over a period of nine years since 2005, the public health system in the country continues to face formidable challenges. The Sustainable Development Goal of United Nations aims at ensuring healthy lives and promote well-being for all at all ages. Sustainable development of India won't be possible unless the rural population is healthy as nearly 70 per cent of the Indian population lives in rural areas. The growth of health facilities has been highly imbalanced in India. Rural, hilly and remote areas of the country are under served. Healthcare issues in rural India are health education, basic household facilities and marriage and fertility related indicators. Healthcare is the right of every individual but lack of quality infrastructure, dearth of qualified medical functionaries, and non-access to basic medicines and medical facilities prevents its reach to 60% of population in India. Improvement in access to healthcare services in rural areas is essential for achieving balanced regional development in India. The present paper attempts to reviews the issues and challenges of health sector in rural India.

KEYWORDS : Health, Healthcare Issues, Challenges, Rural India, Sustainable Development

1. INTRODUCTION:

Health is not everything but everything else is nothing without health. "In the beginning, there was desire which was the first seed of mind," says Rig-Veda, which probably is the earliest piece of literature known to mankind. Since antiquity India being the first state to give its citizens national health care as a uniform right. However in the present scenario Indian rural health care faces a crisis unmatched to any other social sector. Nearly 86% of all the medical visit in India are made by ruralites with majority still travelling more than 100 km to avail health care facility of which 70-80% is born out of pocket landing them in poverty. Government succeeded in generating infrastructures in urban area but fail to do so in rural, sustaining 70% of Indian population. Though existing infrastructural setup for providing health care in rural India is on a right track, yet the qualitative and quantitative availability of primary health care facilities is far less than the defined norms by the World Health Organization.

2. Health and Sustainable Development:

Transforming our world: the 2030 agenda for sustainable development outlines a transformative vision with 17 sustainable development goals (SDGs) for economic, social and environmental development. While only SDG 3, to ensure healthy lives and promote well-being for all at all ages, focuses on human health, all goals are interrelated. This issue of the *Bulletin of the World Health Organization* examines the relationship between health and the SDGs. Universal health coverage could therefore contribute to achieving the SDGs by producing equitable and sustainable health outcomes. "Human beings are at the centre of concerns for sustainable development. They are entitled to a healthy and productive life in harmony with nature" (WHO). Health has become a more central concern in development, both as a contributor to, and an indicator of, sustainable development. While health is a value in its own right, it is also key to productivity. Many of the ill-health conditions described above have significant impacts on economic growth and development. For the first time, meetings of the Security Council, the G-8, the World Economic Forum and the Organisation for Economic Cooperation and Development, and the follow-up to major international conferences, have explicitly addressed health issues that require attention as development or security issue.

3. Challenges faced by Healthcare in India**a) Inadequate Funds**

According to statistics from 2014, India spends only about 4% of its GDP on healthcare whereas the US allocates about 100 times more. Due to this, 60% of medical expenses of Indians

were met through personal savings compared to only 13% in the US.

b) Inadequate Infrastructure

The ratio of the doctors, hospital beds, nurses to the number of patients is alarming. There is one bed for every 2000 patients, one doctor for over 10000 people in a government hospital. There is one state-run hospital for every 90000 people. India also has a lower number of specialist doctors, especially in rural areas.

c) Less Emphasis on Preventive Care

Another major challenge facing Indian healthcare is the paucity of preventive care mechanisms. Preventive healthcare helps to make consumers aware of their health and make smart and consistent choices on their lifestyle, diet and general health. Preventive care helps tackle big problems at the early stage. Due to lack of preventive healthcare facilities at hospitals, people are adopting home monitoring systems to assess their health.

d) Medical Research

Only research leads to true success in the healthcare of any country. India is lagging behind in medical research. The main reason for the lack of research interest is the overburdening of the research staff and lack of resources. Most of the workforce in medical centers work long hours in continuous duty and have no time for the research component of their medical practice.

4. Reality of Healthcare in Rural India

Healthcare is the right of every individual but lack of quality infrastructure, dearth of qualified medical functionaries, and non-access to basic medicines and medical facilities prevents its reach to 60% of population in India. A majority of 700 million people lives in rural areas where the condition of medical facilities is deplorable. Considering the picture of grim facts there is a dire need of new practices and procedures to ensure that quality and timely healthcare reaches the deprived corners of the Indian villages. Though a lot of policies and programs are being run by the Government but the success and effectiveness of these programs is questionable due to gaps in the implementation. In rural India, where the number of Primary health care centers (PHCs) is limited, 8% of the centers do not have doctors or medical staff, 39% do not have lab technicians and 18% PHCs do not even have a pharmacist. India also accounts for the largest number of maternity deaths. A majority of these are in rural areas where maternal health care is poor.

5. Healthcare issues in Rural India

a) Basic Household Facilities: As per the National Family Household Survey (NFHS-4), the households with electricity has increased from around 68 per cent in 2005-06 to 88 per cent in 2015-16 (Table 1). However, it was only 83 per cent in rural area. Apart from this, irregular power supply and / power cuts are common in most of the rural areas. This surely affects availing various services linked with electricity supply including healthcare services. Availability of improved drinking water is very important to protect people from waterborne diseases. Over 10 per cent of rural household still lack the supply of improved drinking water source. Good sanitation facility is an important issue to facilitate better mental and physical health. The households using improved sanitation facility has been very low but it has almost doubled in a span of 10 years from 29 per cent in 2005-06 to 48 per cent in 2015-16. The use of sanitation facility is significantly low in the rural households of India (36.7%). Use of clean fuel reduces the risk of respiratory diseases. However, less than a quarter of the rural households use clean fuel for cooking which indicates greater possibility of getting affected by the diseases related to indoor air pollution. The families with any usual member covered by a health scheme or health insurance which was extremely less (4.8%) in 2005-06 has increased to around 29 per cent in a span of 10 years. This indicates that more than 70 per cent of the households are yet to be covered by a health scheme / insurance. These issues clearly highlight the poor condition of rural households in India which are bound to affect the health and their earning capacity.

Table 1: Availability of Basic Household Facilities in India (2005-06 & 2015-16)

Indicators (in Percentages)	NFHS-4 (2015-16)			NFHS-3 (2005-06)
	Urban	Rural	Total	Total
Households with electricity	97.5	83.2	88.2	67.9
Households with an improved drinking-water source	91.1	89.3	89.9	87.6
Households using improved sanitation facility	70.3	36.7	48.4	29.1
Households using clean fuel for cooking	80.6	24.0	43.8	25.5
Households with any usual member covered by a health scheme or health insurance	28.2	29.0	28.7	4.8

Source: NFHS-4, 2015-16

b) Education: Educated person is assumed to be better informed and has analytical skills. Therefore, it influences the awareness and understanding capacity of various issues affecting his/her life. The male literacy during 2015-16 was nearly 86 per cent with a higher rate in urban area (90.8%) compared to rural areas (82.6%) (NFHS, 2015-16). In the case of female literacy the rural-urban difference is considerable. The female population of 6 years and above who ever attended school has increased from 58 per cent in 2005-06 to nearly 69 per cent in 2015-16 with around 91 per cent in urban area and 63 per cent rural areas. The percentage of female with 10 or more years of schooling increased from 22 per cent to around 36 per cent between 2005-06 and 2015-16, with a wide gap between urban (51.5%) and rural areas (27.3%). In this regard, considerable steps efforts have already been taken by the government agencies. However, much more needs to be done to reduce school drop out rates.

c) Marriage and Fertility Related Indicators: The NFHS-4 shows that, the proportion of women in the age-group of 20-24 who got married before 18 years of age decreased from over 47 per cent in 2005-06 to around 27 per cent in 2015-16 with a large proportion of them belonging to rural areas (31.5%).

Even a sizeable proportion of men of the age 25-29 married before 21 years of their age (20.3%) and their proportion was 10 per cent more in rural areas compared to urban areas. The total fertility rate was 2.4 per cent in rural area and 1.8 per cent in urban areas. Over nine (9.2) per cent of the rural women and five (5) percent of urban women of the age group of 15-19 were already mothers or pregnant at the time of NFHS-4 survey.

Table 2: Marriage and Fertility Related Indicators in India (2005-06 & 2015-16)

Indicators	NFHS-4 (2015-16)			NFHS-3 (2005-06)
	Urban	Rural	Total	Total
Women age 20-24 years married before age 18 years (%)	17.5	31.5	26.8	47.4
Men age 25-29 years married before age 21 years (%)	14.1	24.4	20.3	32.3
Total fertility rate (children per woman)	1.8	2.4	2.2	2.7
Women age 15-19 years who were already mothers or pregnant at the time of the survey (%)	5.0	9.2	7.9	16.0
Infant mortality rate (IMR) (per 1000 live births)	29	46	41	57
Under-five mortality rate (per 1000 live births)	34	56	50	74

Source: NFHS-4, 2015-16

6. CONCLUSIONS

Health is a major issue affecting overall and rural development in India. Many of the indicators affecting health of people is considerably poor in India and within that, there is significant gap between rural and urban areas. The growth of health facilities has been highly imbalanced in India. Rural, hilly and remote areas of the country are under served while in urban area healthcare facilities are well developed.

There is need to increase awareness among rural people regarding healthy way of life. The Governments at different levels have been trying to create awareness by informative advertisements and grass root level workers. Education, especially female education will be the strongest weapon to self-awakening among people. Hence, there is further need to enhance the quantity and quality of education facilities. Improving healthcare facilities at all levels is essential especially in the remote and rural areas. Because of long distance and scanty transport facilities it is difficult for remote area people to get the emergency healthcare services.

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