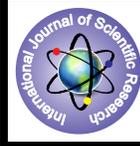


To Protect The Right To Health in India: Eliminate The Health Care Burden With The Help of Health Informatics



Political science

KEYWORDS : Right to health, health informatics, healthcare, India, health policy.

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ABSTRACT

Every human being has the right to the enjoyment of the highest attainable standard of health indispensable for the realization of other human rights. It is now generally acknowledged that the world is changing, with a plethora of upcoming challenges that jeopardize the health and well-being of human beings, it really becomes crucial for the government and community to take necessary steps conjointly for the cause and deal with the problems comprehensively in a systematic manner. According to WHO's work, social determinants of health and economic issues must be managed with a general agreement on ethical principles – universalism, justice, dignity, security and human rights. This strategy would be quite beneficial for mankind in attaining the Right to Health.

Introduction:

The Constitution of the World Health Organization declares that "health is a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity and that the enjoyment of the highest attainable standard of health is one of the fundamental rights of every human being without discrimination of race, religion, political belief, economic or social condition." Every human being has the right to the enjoyment of the highest attainable standard of health indispensable for the realization of other human rights.

The concept of a human right to health embraces a wide range of socio-economic factors that helps in promoting physical and mental health of people, which includes underlying determinants such as access to all medical services, sanitation, adequate food and nutrition, decent housing, safe and healthy working conditions, and a clean environment.

The human right to health assures a system of health protection for every human being without any discrimination, every individual has the right to avail health care services according to their need and to living conditions that facilitates us to lead a healthy life, such as adequate food and nutrition, proper housing facility, and a neat and healthy environment. Health care provision must be financed publicly in an equitable way and it should be nondiscriminatory.

The human right to health care ensures that hospitals, clinics, medicines, and doctors' services must be available and within point of reach to each and every individual on an equitable basis, whenever and wherever required, and it must be of superior quality.

The celebration of the 50th Anniversary of the UDHR, throughout 1998 and terminating on Human Rights Day, December 10, 1998, is a crucial event for institutions involved in the teaching and training of health professionals to explore and accept the strong connection between human rights and health.

According to the 2011 provisional census report, reported in the, India is considered to be the world's second-most populous country having 1,210,193,422 residents. Its population has decelerated to 17.64% in the decade 2001–2011, in comparison to 21.54% growth rate in the past decade (1991–2001).

Several studies have recorded the burgeoning role of private sector as the predominant healthcare centre nationally. The investment on healthcare is quite less- approximately 4% of Gross Domestic Product or US\$61 per person per annum.

The private healthcare sector plays a significant role in regulating the majority of healthcare in India. Most of the expenditure on healthcare is carried out by patients and their family members, instead of via insurance. In India, public seeks private insurance through various government-sponsored health insurance schemes. As per the record of the World Bank, near about 25% of India's population had certain kinds of health insurance in 2010. The census of 2014 by Indian government found this report to be an over-estimate, claiming only about 17% of India's population to be insured. Public healthcare is provided free of cost to those people underlying below the poverty line.

As stated by the National Family Health Survey-3, the private medical sector is known to be the major source of health care provider for 70% of residents in urban areas and 63% of residents in rural areas. The credence on public and private health care sector differs significantly from state to state. Various plausible reasons are mentioned for strongly believing private rather than public sector; the main justification behind this at our country is deprived quality of care and services provided in the public sector. Due to this reason, more than 57% of households indicate this to be the major factor behind prioritizing private health care. According to the study carried out by IMS Institute for Healthcare Informatics in 2013, across 12 states in over 14,000 households, a steady elevation is noted in the utilization of private healthcare amenities over the last 25 years for services provided to both Out Patient and In Patient, covering regions of both rural and urban areas.

Subsequent to the 2014 election by which Prime Minister Narendra Modi came to action, Modi's government disclosed the plans for a nationwide universal health care system noted as the

National Health Assurance Mission, which ensures every citizen with free drugs facility, diagnostic treatments, and insurance for severe diseases. The year 2015 also saw the rollout of the long-delayed universal health care system due to lack of budget.

Rural Health of India

The Government of India initiated National Rural Health Mission (NRHM) in April 2005. The main objective of the NRHM was to impart beneficial healthcare services to poor and needy people, with an emphasis on 18 states having deprived public health indicators and/or poor infrastructure. It has a total of 18,000 ambulances and manpower of 900,000 community health volunteers and 178,000 paid staff members. Only about 2% of doctors are serving in rural areas - where 68% of the population thrives.

Urban Health of India

On 1st May 2013, the Union Cabinet approved the launch of National Urban Health Mission as a sub-mission of National Health Mission. The thrust of the mission is to fulfill the primary health care needs of the people residing in urban areas with special focus given to poor people of urban areas, by making essential primary health care services accessible to them and minimizing their expenditure for treatment.

Indian health care sector: present conditions and future prospects

The people of developing countries such as India are highly concerned for health care, where the citizens are habituated to receiving better standards. The expectations of the people are becoming quite high including demand for latest technologies involved in the treatments, timely, budgeted services, and a wide range of possibilities. Proper knowledge is provided to the patients regarding their health and various options available for treatment. The people manage to bear the responsibility for their own health, but they are concerned about their ability to pay their medical bills more than they already are for their health care.

Health informatics: a smart solution to health care system of India

Health informatics is an evolving specialization which refers to how health information is captured, transmitted for the advancement of medicine, using information technology and computer science. The inter relationship between bioinformatics and health informatics related under the umbrella of biomedical informatics. High-speed data that is reliable, comprehensive and abundant provides necessary health related information. Big data refers to the preservation and logging of the structured and unstructured data with various attributes such as its volume, heterogeneity, complexity, and timeliness. Big data are such a large data streams that they exceed the processing ability of conventional database systems. A recent estimate in 2011 demonstrated the overall volume of healthcare data at 150 billion gigabytes, and this volume is expected to rise to 1.2–2.4 billion gigabytes per year. The main target of this dispatch is to explore and analyze the benefits of big data to promote the effectiveness of the systems approach-based one health.

Big Data- a new era for right to health

It is quite tedious, expensive and often incomprehensible to collect, analyze, and share health data in a traditional system, whereas big has revolutionized the task. The huge quantity of health data provides significant opportunity for various approaches such as real-time tracking of diseases, predicting disease outbreaks, and developing healthcare. Big data networks are meant for handling distributed resources that are simultaneously operating on a single task that requires resiliency, consistency and application awareness to render a robust evidence-informed health policy. The aim of the big data network is to increase the worth

by extracting more applicable information. Precise analysis of data resulted in confident decision making, greater operational efficiencies, cost reductions and reduced risk. Big data comprises of unstructured and multi structured data carrying an enormous volume of information.

Conclusion:

A better understanding of health objectives and targets is one of the predominant factor which governs the activities of the health sector, e.g. in the United States, the "Healthy People 2010" provides a quite robust idea by generating health objectives in such a format which accredits heterogeneous groups to assemble their task and work in collaboration. Likewise, in India, an agenda is required to "better health for all" that can be implemented by states, communities, professional organizations and all sectors.

It is now generally acknowledged that the world is changing, with a plethora of upcoming challenges that jeopardize the health and well-being of human beings, it really becomes crucial for the government and community to take necessary steps conjointly for the cause and deal with the problems comprehensibly in a systematic manner. According to WHO's work, social determinants of health and economic issues must be managed with a general agreement on ethical principles – universalism, justice, dignity, security and human rights. This strategy would be quite beneficial for mankind in attaining the Right to Health. The benchmark of success would be attained when every citizen of India, from distant places in Bihar to the city of Mumbai, experiences the change.

Numerous health related issues has been untangled in the past years: The breakthrough in the history of public health that have had a significant impact on millions of lives – initiation of Expanded Program of Immunization in 1974, Primary Health Care enunciated at Alma Ata in 1978, eradication of Smallpox in 1979, launch of polio eradication in 1988, FCTC ratification in 2004 and COTPA Act of 2005 are few health related programs. The past work was tremendously marvelous, but the path to sustainability, outlined in this framework, requires greater innovation to offer equal opportunity to all persons to contribute to and benefit from development and successfully achieve the dream of healthy India. The prime objective of great nation would be to avoid any discrimination between rural and urban, with adequate supply of clean and potable water, where the best health services is provided to all, where the governance is perceptive and approachable, explicit and free from fraudulence, where poverty and illiteracy have been eliminated and women and children are breathing in a crime-free country – a healthy nation that is one of the best places to dwell in.

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