ABSTRACT

AN ANALYSIS OF HEALTH AND HEALTH CARE SERVICES IN PUNJAB

Health is increasingly being recognized as a critical human capital component, which contributes significantly towards the development of a nation. Only a healthy and educated population can contribute to productivity, economic growth and human development. The present concern in both developed and developing countries is not only to reach the whole population with adequate health care services but also to secure an acceptable level of health for all through the application of primary healthcare programmes. The present study is mainly confined to Punjab state and a detailed analysis of the health sector of Punjab has been carried out by examining various health indicators, health infrastructure and health expenditure.

The study has been based on both primary as well as secondary data. The secondary data has been collected for the period 1981 to 2008, while the primary data has been collected for the period 2008-09 on the basis of proportion of rural-urban population of Patiala district in 2001 census.

The main findings of the present study are as follows:-

There has been an improvement in health facilities in India and as a consequence there has been appreciable improvement in various health indicators. India has invested substantially in developing the health infrastructure. The public expenditure on health has not been an issue of high priority because of which a disproportionately large share of the burden of health care has to be borne by the households.
Punjab state has also recorded an impressive performance on various health indicators. On observing the health infrastructure in Punjab it has been found that the number of medical institutions in Punjab have grown over a period of time. A greater number of medical institutions have been located in the rural areas as compared to the urban areas, but the medical institutions in urban areas have grown at a higher rate as compared to that of the rural areas. There still exists wide gap in rural and urban health infrastructure. It has been observed that all major developments in health infrastructure have taken place during eighties. An analysis of inter-district variations highlights that there were large disparities in availability of medical institutions, beds, population served per bed, population served per medical and para-medical personnel, average radius served per institution in Punjab in 1981, and in 2008 also these disparities continue to persist.

The expenditure on social services has always been given greater importance vis-à-vis economic services in Punjab. Within social services, education followed by health and family welfare services has been given paramount importance. The family welfare programme has emerged as the priority programme, mainly because of its being almost fully centrally funded. The Union government has been allocating large funds for the health sector in Punjab, thus, indicating that Punjab relies heavily on the Union government for finances.

The results of the primary survey revealed that the majority of the sampled households in rural and urban areas opted for private clinic for minor illness, while they went to a private hospital in case of major illness. ‘Geographic accessibility’ and ‘good quality of services/tried treatment’ dominated in determining the choice of a health facility in both rural and urban areas in case of both minor and major illness. The most important system of medicine availed was the allopathic system of medicine. The maximum expenditure was incurred on medicines & injections.
The most important source of finance used, was the current income.

On observing the average annual health expenditure incurred by the sampled households on treatment of minor as well as major illness it was found that the households in urban areas spent 1.33 times more than that of the households in rural areas. The maximum expenditure was incurred on medicines & injections followed by hospitalization and surgery. The average health expenditure moved up as we moved from lowest income category to the highest income category.

From empirical analysis it has been found that the major factors inhibiting the growth of health sector in Punjab are existence of a smaller number of public health institutions than their actual requirement, lack of some basic facilities in government health institutions, manpower shortages in the health institutions, absentee doctors, inconvenient opening hours of the health institutions, informal payments incurred and low public sector spending on health sector etc.

A state-specific health policy is the basic pre-requisite for health planning in the state. The health policy of Punjab government must ensure optimal utilization of health manpower and resources, enhance availability of primary health care and paramedical staff, set out strategies to cope with rising pressure on tertiary health care institutions and bring about awareness for a better quality of health care comprising environment and occupational health, adequate availability of drinking water, hygienic living conditions, nutritious food, removal of drug addiction and other health hazards.