ISSN: 2455-8834

Volume:08, Issue:12 "December 2023"

EVALUATION OF THE STATUS OF HEALTH INFRASTRUCTURE IN INDIA WITH SPECIAL REFERENCE TO BIHAR & JHARKHAND

Dr. Renu Gupta

Research Associate, Institute for Economic & Social Development, Ranchi

DOI: 10.46609/IJSSER.2023.v08i12.019 URL: https://doi.org/10.46609/IJSSER.2023.v08i12.019

Received: 11 November 2023 / Accepted: 16 December 2023 / Published: 3 January 2024

ABSTRACT

Health infrastructure plays a crucial role to achieve the target 'Health for All'. During the time frame of 2019 to 2021, Jharkhand has shown a greater improvement than Bihar in terms of percentage change, with a 67% rise in the total number of Primary Health Centers (PHCs). However, Bihar has a higher total number of operational PHCs, with 2034 in total. India had a 5% increase in Community Health Centers (CHCs) between 2019 and 2021, with the most significant expansion seen in Bihar, where there was an impressive 104% increase. The Scheduled Castes (SCs) of Bihar have had a significant 4% increase in population from 2019 to 2021, whereas Jharkhand has witnessed a 6% growth within the same time frame. It is essential to provide more healthcare services through public health care system in order to safeguard the well-being and survival of all individuals.

Key Words: Health Infrastructure PHC, CHC, SC, SDH & DH

INTRODUCTION

The importance of ensuring adequate availability and accessibility of health infrastructure is universally acknowledged, especially in the context of improving medical and healthcare facilities. Numerous research studies have found that the level of deprivation among rural residents is significantly higher than that of their urban counterparts. Therefore, it is critical to formulate initiatives and strategies that are specifically designed to improve healthcare infrastructure in regions that are primarily rural. By directing attention towards this concept, it will exhibit its efficacy in augmenting the physical and mental welfare of individuals.¹

In their research, Linda Luxon and Treasurer emphasized that health infrastructure plays a crucial role in attaining the primary objective of enhancing treatment and health outcomes for all individuals, while also ensuring a positive experience with the healthcare system.^{2 It} is essential

ISSN: 2455-8834

Volume:08, Issue:12 "December 2023"

to examine the state of health infrastructure in India, particularly in EAG states, after studying the status and trends of key health indicators. This is because a well-functioning and efficient health infrastructure can improve the performance of vital health indicators that are currently lagging behind in comparison to other non-EAG and EAG states, as well as the national average. Ensuring adequate access and availability of quality health infrastructure is crucial for meeting the aims of the Sustainable Development Goals (SDGs) within the specified timeframe, in both rural and urban parts of the country.

The importance of health has been recognized in India since the nation gained independence. Several committees, like the Bhore Committee (1946), Mudaliar Committee (1962), Kartar Singh Committee (1973), and Shrivastav Committee (1975), have been formed to address temporary issues and accomplish goals particular to each program. Furthermore, many policy efforts such as the National Health Policy of 1983 (NHP-1983), the National Health Policy of 2002 (NHP-2002), the National Rural Health Mission (NRHM), and the National Health Research Policy (2011) were implemented. In addition to this, the health sector received significant attention throughout the implementation of the Five-Year Plans, with policies and programs being tailored to the sector's current circumstances.

The government of India has defined Health Care Delivery System into three levels – Primary Level, Secondary Level and Tertiary Level with the consideration of the area and population; The three levels structure of the health care delivery system in India is given bellow: -

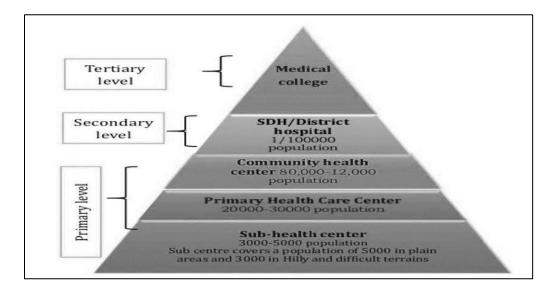


Figure: 1Structure of The Health Care Delivery System in India

Source: Ministry of Health & Family welfare, Govt. of India

ISSN: 2455-8834

Volume:08, Issue:12 "December 2023"

REVIEW OF LITERATURE

Health is the most essential components of social sector development. Availability of appropriate heath infrastructure and services are essential and stated as fundamental right by both the developed and developing countries (Singh Umendra 2015). The research done by Sana & Archana (2019) examined the fluctuations in health indicators within the framework of rural health infrastructure in India. Despite the lack of desired growth in physical and human infrastructure, there are noticeable advancements in health indicators. In his study titled "Public Healthcare Infrastructure in Tribal India: A Critical Review," Mohamed Saalim P. K. conducted an analysis that reveals notable discrepancies in the health status of tribal groups compared to non-tribal populations. Improving the health status and health infrastructure among tribal groups is a difficult and intricate problem for India. The issues in tribal regions include not only the inadequate number of Sub-Centres (SCs), Primary Health Centres (PHCs), and Community Health Centres (CHCs). Chopra & Vipla (2006) undertook a comprehensive examination of the health and healthcare landscape in India. This investigation included a thorough evaluation of several health indicators, the condition of health infrastructure, and the patterns of health expenditure in India during a certain timeframe. India has made substantial progress in health indices in recent decades, as seen by the study findings. In their 2017 research, Ghosh Dibyendu &Soumyananda Dinda determined that some variables have a significant role in determining crucial health outcomes, such as life expectancy at birth and infant mortality rate. Some states, such as Bihar, Jharkhand, Madhya Pradesh, and Uttar Pradesh, have not had similar advancements in these measures. The Government should give greater attention to the prioritizing of health infrastructure in these areas. Universal healthcare is a fundamental need for every human, and India has achieved some advancements in this area. Nevertheless, the distribution of health infrastructure is insufficient. The improvement of health conditions and the availability of accessible health infrastructure services also have a role in the growth of international commerce and tourism in any economy (Singh Umendra, 2021).

OBJECTIVE OF THE STUDY

The primary objective of the study is to analyze and evaluate the status of health infrastructure in India with special reference to Bihar & Jharkhand states and to provide comparison of the development of health infrastructure in the selected states.

METHOD

The paper is based on the analysis of secondary data collected from the various publications of Ministry of Health and Family Welfare, Government of India and the Health Departments of the state's government of Bihar and Jharkhand with the use of simple statistical tools.

ISSN: 2455-8834

Volume:08, Issue:12 "December 2023"

STATUS OF PRIMARY HEALTH CENTRES (PHCs) IN INDIA

Under the health infrastructure PHCs are very important as the basic health services are being operated by the PHCs. The decision to create primary health centers was taken in the early stage of the First Five Year Plan with the aim of offering fundamental healthcare services to those living in rural regions. According to the established demographic norms, a Primary Health Center should be set up for every 30,000 inhabitants in rural plains, and for every 20,000 individuals in tribal, backward, and problematic regions.

Table: 1 Status of Primary Health Centres (PHCs)

States/India	2019	2021	% Change From 2019- 2021
Bihar	1480	2034	37%
Jharkhand	210	350	67%
India	20069	30579	52%

Source: National Health Profile 2022

Table: 1 presents the status of PHCs in India and in the states of Bihar & Jharkhand; it is evident from the table in year 2019 total 20069 PHCs were providing health services in rural India and this number reached to the level of 30579 in 2021 with an increase by 52%. During the period in terms of percent change Jharkhand has reported more improvement than Bihar as total PHCs have increased by 67%, but in terms of total number more PHCs are operational in Bihar 2034.

STATUS OFCOMMUNITY HEALTH CENTRES IN INDIA

To provide an efficient referral system for rural residents to access specialized healthcare, Community Health Centers were established at the block level, where Primary Health Centers (PHCs) were already present. According to the National Health Profile- 2022 report, there are 5951 Community Health Centers (CHCs) that provide healthcare services to the rural population of India, in addition to Primary Health Centers (PHCs). Uttar Pradesh has the highest number of Community Health Centers (CHCs) among the EAG states, with a total of 765 functioning in 2021. India saw a 5% growth from 2019 to 2021, with the biggest rise seen in Bihar, where a remarkable 104% growth was recorded over the same time. Over the course of the chosen two-year period, there is no apparent shift in the state of Jharkhand. (Table: 2)

ISSN: 2455-8834

Volume:08, Issue:12 "December 2023"

Table: 2 Status of Community Health Centres (CHCs)

States/India	2019	2021	% Change From 2019-2021
Bihar	150	306	104%
Jharkhand	177	176	-1%
India	5685	5951	5%

Source: National Health Profile 2022

STATUS OF SUB-CENTRES (SCs)

Sub-centres (SCs) are essential decentralized government health service entities that provide fundamental healthcare services to the rural population of the State. A sub center has been constructed to accommodate a population of more than 5000 inhabitants in rural areas, as well as a population of 3000 individuals in tribal, mountainous, and other difficult locations, in compliance with the specified parameters. The institution provides services related to maternal and child welfare, family welfare, and vaccination provisions. According to the Rural Health Statistics 2021-22, there were a total of 157,900 Sub-Centres (SCs) operating in India.

Table: 3 Status of Sub-Centres (SCs)

States/India	2019	2021	% Change From 2019-2021
Bihar	9865	10258	4%
Jharkhand	3644	3848	6%
India	152794	157819	5%

Source: Rural Health Statistics 2021-22

Table 3 presents an analysis of the present status of sub-centers in India, namely in Bihar and Jharkhand, for the years 2019 and 2021. Across all states and union territories in India, the Scheduled Castes (SCs) only get a marginal increase of 5%. The health infrastructure in Bihar has had a notable 4% growth from 2019 to 2021, whereas Jharkhand has observed a 6% rise over the same period.

ISSN: 2455-8834

Volume:08, Issue:12 "December 2023"

STATUS OF GOVERNMENT HOSPITALS

A government hospital refers to a collective term for both rural and urban hospitals that are under the administration and management of the government. To address the health issues encountered by people living in both rural and urban areas of India, the government has launched many policies and initiatives to improve the healthcare infrastructure in these regions. As of March 31, 2021, the Ministry of Health and Family Welfare's latest report states that there are a total of 60,621 government hospitals in India. Among them, a total of 33,662 (56%) hospitals are situated in rural areas and provide healthcare services, while the remaining 26,959 (44%) hospitals are located in urban districts. The performance of Jharkhand is better than Bihar as there is an increase of 2.83% from 2019-2021, whereas at national level 48.28% increase is reported and total government hospitals touched to the level of 60621. (Table: 4)

Table: 4 Status of Government Hospitals

States/India	2019	2021	% Change From 2019-2021
Bihar	2132	2132	0%
Jharkhand	4463	4589	2.83%
India	40883	60621	48.28%

Source: National Health Profile 2022

Status of Sub-Divisional Hospital (SDH) and District Hospital (DH)

Sub-district hospitals are positioned below district hospitals and above block level hospitals, also known as CHC hospitals. They serve as the first point of contact for those residing in the Tehsil/Taluk/block where they are situated. As primary referral units, they have a crucial role in delivering urgent maternity care and providing care for infants. Additionally, they contribute to reducing maternal and infant mortality rates. They provide a connection between Primary Health Centers (PHC), Community Health Centers (CHC), and Sub-Centers (SC) on one side and district hospitals on the other side. Additionally, SDHs and DHs reduce the amount of time individuals requiring urgent medical attention spend on travel and alleviates congestion at the district hospital. The Rural Health Statistics (RHS) report for the year 2021-22 reveals that India has a combined total of 1224 Sub-District Hospitals (SDH) and 764 District Hospitals (DH) functioning nationwide.

ISSN: 2455-8834

Volume:08, Issue:12 "December 2023"

Table: 5 Status of Sub-divisional Hospital & District Hospitals

States/India	2019		2021	
	SDH	DH	SDH	DH
Bihar	55	36	45	36
Jharkhand	13	23	13	23
India	1234	756	1224	764

Source: Rural Health Statistics, 2021-22

As per the above-mentioned data presented in the table 5 it is clear that the state of Bihar is have more SDHs and DHs than Jharkhand. Total 10 SDHs have reduced from 2019 to 2021 in Bihar. At present 13 SDH &23 DH are providing health services in Jharkhand.

STATUS OF NUTRITION REHABILITATION CENTER (NRC)

The Nutrition Rehabilitation Center (NRC) is a specialized health institution that provides admission and management services for children diagnosed with Severe Acute Malnutrition (SAM). Children are admitted into the NRC based on established criteria of the IAP 2006 guidelines and the updated WHO 2009 recommendations. At present in India 1089 Nutritional Rehabilitation Centre (NRCs) are providing services at national level while in 2019 there were 1075 NRCs, more 14 NRCs have been established in comparison to 2019. As far as the status of both states is concerned in terms of Nutritional Rehabilitation Centres Jharkhand state have 96 centres whereas Bihar has only 96 centres. (Table 6)

Table: 6 Status of Nutritional Rehabilitation Centre (NRCs)

EAG States	2021	2019
Bihar	41	39
Jharkhand	96	96
India	1089	1075

Source: Rural Health Statistics, 2021-22

CONCLUSION

From the above study, it is clear that with the initiation of many policies and programs by the central government as well as by the state governments of Jharkhand and Bihar, the health infrastructure has improved over the years. More health services must be ensured to protect the

ISSN: 2455-8834

Volume:08, Issue:12 "December 2023"

lives and health of everyone, especially those living in the rural and difficult areas of our country. To reduce the OOPE (Out of Pocket Expenditure), the government has to boost and increase the coverage of public health infrastructure in India, especially in the poorest performing states.

REFERENCES

- 1. Kapoor Radhika (2020). Significance of Health Infrastructure. Available from: https://www.researchgate.net/publication/342832865_Significance_of_Health_Infrastructure [accessed Feb. 03 2024].
- 2. LuxonLinda & Treasurer (2015). Infrastructure the key to healthcare improvement, https://www.ncbi.nlm.nih.gov/pmc/articles/PMC6465866/.
- 3. Singh Umendra (2022). A Study of Gender Development in Empowered Action Group States of India, Available from:

 https://www.researchgate.net/publication/370526507_A_Study_of_Gender_Development
 _in_Empowered_Action_Group_States_of_India [accessed Feb 02 2023].
- Singh Umendra (2021). Social Sector Development in India: With Special Reference to Health and Education Services. Available from: https://www.researchgate.net/publication/370287894 SOCIAL SECTOR DEVELOPM ENT IN INDIA WITH SPECIAL REFERENCE TO HEALTH AND EDUCATIO N_SERVICES.
- 5. Singh Umendra (2015). An Analysis of the trends of Public expenditure on Health Sector in India, Vinoba Bhave Journal of Economics, Vol. IV (2), 2015.
- 6. Sana & Archana (2019) An Examination of Rural Health Infrastructure of India, International Journal of Scientific Research and Reviews, IJSRR, 8(1) Jan. Mar., 2019, ISSN: 2279–0543.
- 7. Mohamed Saalim P. K. (2020), entitled "Public Healthcare Infrastructure in Tribal India: A Critical Review", The Institute for Social and Economic Change, Bangalore, February 2020. ISBN 978-81-945114-3-4.
- 8. Chopra, Vipal (2006): "Health and Health Care in India An Analysis", Indian Economic Association, 8fh Annual Conference Volume, pp. 115-130.
- 9. Ghosh Dibyendu &Soumyananda Dinda (2017), Health Infrastructure and Economic Development in India. Available from:

ISSN: 2455-8834

Volume:08, Issue:12 "December 2023"

https://www.researchgate.net/publication/319978925 Health Infrastructure and Econo mic Development in India.