

Arvind Singhal: Little care for health care

For India's business houses and entrepreneurs, health care could be one of the most promising and rewarding sectors

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The exceptionally high occupancy rate of hospital beds in the National Capital Region (NCR) in recent weeks may be partly due to rampant dengue, but it is also symptomatic of the worsening crisis in India's health care infrastructure. With the NCR region having the highest concentration of hospital beds in India with almost 30,000 beds under operation by private and government entities but still not being able to cope with the needs of less than 25 million residents and visitors from neighbouring areas, one can imagine the plight of India's masses residing in less developed regions. And unlike other sectors of physical and social infrastructure, this is one in which the situation seems to be deteriorating rather than improving. With nearly a net addition of over 18 million people every year, India needs to add (and evenly distributed) at least 40,000 beds per year just to keep up with the increase in population. It has, on paper, about 1.4 million beds of which about 60 per cent are in the private sector. In reality, however, no more than 70 per cent of the private sector, and just about 50 per cent of the government sector beds are really operational. This means there are just about 850,000 operational beds for a population of nearly 1.2 billion implying just one bed for about 1,400 citizens, which is worse than some of the poorest nations on the planet. The picture becomes grimmer when one realises that of all the beds in the private sector, as many as 70 per cent are estimated to be operating in the top 20 cities only. The government hasn't done much better in the distribution of health care delivery infrastructure with almost 60 per cent of its beds located in top 20 cities of India! And finally, most of the leading private sector operators continue to focus their investments in the top 30-40 cities only and most of these beds are largely affordable for very small, relatively more affluent strata of the society.

There are varying estimates about the deficit in India's health care delivery infrastructure, but the Medical Council of India (MCI) and many private players continues to underestimate or underplay the gap for various reasons, and the governments — both at the Centre and in states — continue to take baby steps at best despite the fact that over 46 per cent of all patients in India still have to travel an average of 100 kilometres for any reasonable quality secondary or tertiary care. If one were to consider the highly skewed distribution of hospital beds and, therefore, the medical professionals including doctors and nurses, India is already short of more than 2 million hospital beds (and almost 1 million doctors and 2 million nurses) required to provide universal accessibility to its people. Further, with more than 30 per cent of the population eking an existence below the poverty line and another 30-35 per cent just above it, this health care has to be affordable too. And finally, since a human life is equally precious for all socio-economic strata, this accessible and affordable health care has to be delivered with basic standards of quality (of outcomes) and accountability.

Against this deficit, it is important to note that India still has a capacity to produce less than 40,000 MBBS doctors (and less than 15,000 MDs) every year. Each tertiary hospital bed, even in tier-3 and tier-4 towns, will not cost less than Rs 35-40 lakh to be set up, and if India has to meet the current deficit of 2 million primary, secondary, and tertiary care beds, an investment

exceeding \$150-200 billion is needed right now. Unfortunately, even if all this money is made available through some miracle, India will take more than 25 years (at current capacity) to produce the required number of (only MBBS) doctors! And in those 25 years, India's population would have further increased by 350-400 million requiring another 1 million or more hospital beds.

Unfortunately, the little attention that the government has given in recent years to health care has focused on enabling payment mechanism for the very poor and on very basic primary care. It must not lose any time, and put its best brains and, significantly, higher financial resources (both public and private) to create health care delivery capacity across the country on a scale (and a sense of urgency) that has never been attempted anywhere in the world. And for India's large business houses and entrepreneurs, health care will be one of the most promising and rewarding sectors for decades to come, provided they come up with more innovative and appropriate business models.

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