Chapter 5 Health Infrastructure and Economic Development in India

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ABSTRACT

The chapter examines different aspects of health care service facilities and health infrastructure available in India. Major health outcomes like Life expectancy at birth and infant mortality rate depend on available health facilities like hospitals, beds and health trained personnel. Life expectancy in India has increased and IMR declines over the years, except few states like Bihar, Jharkhand, Madhya Pradesh, Uttar Pradesh. India has achieved a considerable progress in providing health infrastructure and its access to health care services to the mass population. However, less developed states like Uttar Pradesh and Bihar need more attention to improve health infrastructure and distribution of health facilities. In this context, we also highlight the department of Ayurveda, Yoga and Naturopathy, Unani, Siddha and Homoeopathy, abbreviated as AYUSH which is a Governmental body in India purposed with developing, education and research in Ayurveda, which mostly prevails in under-developed state like Bihar. Our empirical results provide the evidence of strong association between health infrastructure and economic development in India.

INTRODUCTION

Good health is a state of physical and mental wellbeing necessary to live a meaningful and productive life. Long healthy life is the basic aspiration of human development. Hence, health has become an important indicator of human development. It is true that a healthy person is an asset for himself and for the economy also. To achieve 'good health for all' the country should promote health care services, prevent diseases and help people to make their healthy choices. In a society, 'good health for all' ensures economic progress. Good health promotes efficiency in workforce, enhances their skills and aptitude

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and is necessary for high life expectancy. Good health is absence of disease and also it represents both physical and mental capability to enjoy life. Good health is achievable under the condition of deliverable effective health care services which is possible only if available good health infrastructures.

Health infrastructures are "the basic services or social capital of a country, or part of it, which make economic and social activities possible" structures that support public health, having both tangible and intangible aspects and existing inside and outside the government sector. Health infrastructure is an important indicator for understanding the health care policy and welfare mechanism in a country.

Health care is a social determinant which is influenced by social policies. To achieve good health for people, especially the poor and the under privileged, the Government of India has focused on improving primary health services and ready to provide more accessibility and affordable to the poor people. In last few decades, India has achieved considerable progress in providing access to health care services to the people. Recently, the health infrastructure of country has expanded manifold. Now, the question arises whether health infrastructure is sufficient and properly distributed in India. So, the basic research question is on distribution of health infrastructure in India.

- 1. Is this health infrastructure adequate in India?
- 2. How is it distributed across India?
- 3. How does it affect economic development in India?

Disparity in health exists in India because of uneven distribution of health infrastructure across Indian States. Now we examine the disparity in health infrastructure in India focusing on three major channels – a) Institution, b) Knowledge capacity and c) health care service. All these connect the issues of economic development – with special focus on India.

This study is organized as follows: next section provides a brief review of literature. After spell out of the objective of the study, Data and methodology section describe data and provide primary observations. Analysis section explains the results and finally this study concludes with remarks.

BRIEF REVIEW OF LITERATURE

Literature mainly highlights the relationship between human health capital and economic development, health care service and labour productivity, etc.; however, a few have focused on health infrastructure (and particularly its distribution) and development. Effective health care service truly depends on allocating or distributing proper health infrastructure.

Colgrove, Fried, Mary, Northridge and Rosner (2010) investigated the public health and infrastructure for the US economy in 21st-Century. They highlighted that health infrastructure is crucial for public health care and services. In this paper, they argued that schools of public health (SPHs) are also essential to the nation's health, security, and well-being.

Ademiluyi and Aluko-Arowolo (2009) studied the infrastructural distribution of healthcare services in Nigeria. They examine the biomedical or western orthodox health care with its expansive bureaucratic ethos within the concept of hospitals structure in Nigeria. They observed that distribution of medical care delivery in Nigeria is biased towards urban area. Medical care services are favoured to the urban population at the cost of rural settlers. Infrastructure distribution of health care in rural areas of Nigeria are neglected to satisfy the urban areas, where the educated, the rich and Government functionaries reside.

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