National health policy – Thrust Areas and Implementation framework

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Abstract

The government of India has come up with National Health Policy 2017, in the month of March 2017 after long deliberations and discussions with all the stakeholders. The primary aim of the National Health Policy, 2017, is to inform, clarify, strengthen and prioritize the role of the Government in shaping health systems in all its dimensions-investments in health, organization of healthcare services, prevention of diseases and promotion of good health through crosssectoral actions, access to technologies, developing human resources, encouraging medical pluralism, building knowledge base, developing better financial protection strategies, strengthening regulation and health assurance. This research paper deals with highlighting the key features of National Health Policy and identifying the mechanism laid down by the government of India for its implementation. It is noticed that the policy advocates a progressively incremental assurance based approach, with assured funding to create enabling environment for realizing health care as aright in the future.

Keywords – National Health Policy, Public Health

Introduction

The National Health Policy of 1983 and the National Health Policy of 2002 have served well in guiding the approach for the health sector in the Five-Year Plans. Now 14 years after the last health policy, the context has changed in four major ways. First, the health priorities are changing. Although maternal and child mortality have rapidly declined, there is growing burden on account of non-communicable diseases and some infectious diseases. The second important change is the emergence of a robust health care industry estimated to be growing at double digit. The third change is the growing incidences of catastrophic expenditure due to health care costs,

which are presently estimated to be one of the major contributors to poverty. Fourth, a rising economic growth enables enhanced fiscal capacity.

The National Health Policy (NHP), 2017, was approved by the Union Cabinet ……., two years after a draft copy of the bill was circulated among stakeholders. After considering suggestions from the public, state governments and others, the new policy will replace the previous one, which was framed 15 years ago in 2002.

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Objectives

1- Identify the highlights of National Health Policy-2017
2- Study the thrust areas and their implementation mechanism

Methodology

Secondary data has been obtained through various sources including statistics available on the ministry of health, World Health Organization and National Health Mission's website. Also, the newspapers, magazines and healthcare journals are referred to. The information, thus, gathered is processed to relate it with the objectives of this research paper.

Discussion & findings

The government of India's National Health Policy 2017 aims at providing healthcare in an "assured manner" to all. It will address current and emerging challenges arising from the ever changing socio-economic, technological and epidemiological scenarios.

Key highlights of NHP 2017:

> ➤ The government aims in shifting focus from "sick-care" to "wellness", by promoting prevention and well-being.

> ➤ It intends on gradually increasing public health expenditure to 2.5% of the GDP.

> ➤ To strengthen health systems by ensuring everyone has access to quality services and technology despite financial barriers. The policy proposes increasing access, improving quality and reducing costs. It proposes free drugs, free diagnostics and free emergency and essential healthcare services in public hospitals.

> ➤ To focus on primary health care: The policy advocates allocating two-thirds (or more) of resources to primary care. It proposes two beds per 1,000 of the population to enable access within the golden hour (the first 60 minutes after a traumatic injury).

> ➤ To reduce morbidity and preventable mortality of non-communicable diseases (NCDs) by advocating pre-screening.

> ➤ To promote 'Make in India' initiative by using drugs and devices manufactured in the country.

> ➤ It highlights AYUSH (Ayurveda, Yoga & Naturopathy, Unani, Siddha and Homeopathy) as a tool for effective prevention and therapy that is safe and cost-effective. It proposes introducing Yoga in more schools and offices to promote good health.

> ➤ Reforming medical education.

The policy also lists quantitative targets regarding life expectancy, mortality and reduction of disease prevalence in line with the objectives of the policy.

NATIONAL HEALTH POLICY, 2017
The NHP 2017 focuses on ensuring health for all and the thrust areas of the policy include:

- Ensuring Adequate Investment

- Preventive and Promotive Health

- Organization of Public Health Care Delivery

- Primary Care Services & Continuity of Care

- Secondary Care Services

- Reorienting Public Hospitals

- Closing Infrastructure and Human Resource/Skill Gaps

- Urban Health Care

Implementation of the policy – Governance and Framework

1. Role of Centre & State:

One of the most important strengths and at the same time challenges of governance in health is the distribution of responsibility and accountability between the Centre and the States. The policy recommends equity sensitive resource allocation, strengthening institutional mechanisms for consultative decision-making and coordinated implementation, as the way forward.

Besides, better management of fiduciary risks, provision of capacity building, and technical assistance to States to develop State-specific strategic plans, through the active involvement of local self-government and through community based monitoring of health outputs is also recommended.

The policy suggests State Directorates to be strengthened by HR policies, central to which is the issue that those from a public health management cadre must hold senior positions in public health.

2. Role of Panchayati Raj Institutions: Panchayati Raj Institutions would be strengthened to play an enhanced role at different levels for health governance, including the social determinants of health. There is need to make Community Based Monitoring and Planning (CBMP) mandatory, so as to place people at the

Centre of the health system and development process for effective monitoring of quality of services and for better accountability in management and delivery of health care services.

3. Improving Accountability:

The policy would be to increase both horizontal and vertical accountability of the health system by providing a greater role and participation of local bodies and encouraging community monitoring, programme evaluations along with ensuring grievance redressal systems.

Conclusion –

A policy with clarity regarding its implementation is a step towards ensuring systemic improvements. The National Health Policy, 2017 envisages that an implementation framework be put in place to deliver on these policy commitments. Such an implementation framework would provide a roadmap with clear deliverables and milestones to achieve the goals of the policy.

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