Teacher's note

These two chapters (Chapters 2 and 3) on State Government are an attempt to
discuss the functions and structure of
government through concrete situations.
We have chosen ‘health’ as an example;
there could have been other, equally
important, choices.

Chapter 2 discusses ‘health’ as an
important issue for people. There are both
public and private aspects of health
provisioning. Healthcare in India is not
available to all. While the Constitution
supports a view that the right to health is
an aspect of our fundamental rights, its
provisioning is rather unequal. Through
the accounts provided, learners will begin
to visualise the ideal or desired role of
government, and the meanings behind its
structures. Some ways in which this
situation can be changed are also
discussed.

Chapter 3 focuses on how the
government functions, and discusses ideas
of representation, accountability and
public welfare. Though both the executive
and the legislature are presented, one
should not expect students to retain fine
distinctions. It would be best to patiently
courage them to ask questions such as,
“Who is the most powerful person?”, “Why
can’t the MLA solve the problem?”, etc.
Such queries will enable them to construct
a sense of the government apparatus.

It is important that learners acquire the
confidence to express their views on public
issues and understand the role of
government through the exercises given in
the chapters. You could choose familiar
issues such as water, transport, school-
fees, books, child-labour, etc., for them to
discuss and arrive at how these problems
need to be tackled. Allow them to express
these ideas through wall charts. Given that
discussions on the government and its
functioning often lead to boredom and
cynicism, we need to be able to make
the classroom session less didactic and
more interactive while teaching these
lessons.
Role of the Government in Health

In a democracy people expect the government to work for their welfare. This could be through the provision of education, health, employment, housing or the development of roads, electricity etc. In this chapter we shall examine the meanings and problems related to health. Look at the sub-headings of this chapter. In what ways do you think this topic is related to the work of government?
What is health?

We can think of health in many ways. Health means our ability to remain free of illness and injuries. But health isn’t only about disease. You may have associated only some of the situations in the above collage with health. What we often ignore is the fact that each of the above situations is related to health. Apart from disease, we need to think of other factors that affect our health. For example, if people get clean drinking water or a pollution free environment they are likely to be healthy. On the other hand, if people do not get adequate food to eat or have to live in cramped conditions, they will be prone to illness.

All of us would like to be active and in good spirits in whatever we may be doing. It isn’t healthy to be dull, inactive, anxious or scared for long stretches of time. We all need to be without mental strain. All of these various aspects of our lives are a part of health.

Would you associate all or some of these pictures with ‘health’? In what ways? Discuss in groups.

Pick two situations from the above collage that are not related to illness and write two sentences on how they are related to health.
## Healthcare in India

Let us examine some of the aspects of healthcare in India. Compare and contrast the situation expressed in the first and second columns.

<table>
<thead>
<tr>
<th>India has the largest number of medical colleges in the world and is among the largest producers of doctors. Approximately 15,000 new doctors qualify every year.</th>
<th>Most doctors settle in urban areas. People in rural areas have to travel long distances to reach a doctor. The number of doctors with respect to the population is much less in rural areas.</th>
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<tr>
<td>Healthcare facilities have grown substantially over the years. In 1950, there were only 2,717 hospitals in India. In 1991, there were 11,174 hospitals. In 2000, the number grew to 18,218.</td>
<td>About five lakh people die from tuberculosis every year. This number is almost unchanged since Independence! Almost two million cases of malaria are reported every year and this number isn’t decreasing.</td>
</tr>
<tr>
<td>India gets a large number of medical tourists from many countries. They come for treatment in some of the hospitals in India that compare with the best in the world.</td>
<td>We are not able to provide clean drinking water to all. 21% per cent of all communicable diseases are water borne. For example, diarrhoea, worms, hepatitis, etc.</td>
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<tr>
<td>India is the third largest producer of medicines in the world and is also a large exporter of medicines.</td>
<td>Half of all children in India do not get adequate food to eat and are undernourished.</td>
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In India, it is often said that we are unable to provide health services for all because the government does not have enough money and facilities. After reading the above left hand column, do you think this is true? Discuss.
India has a large number of doctors, clinics and hospitals. The country also has considerable experience and knowledge in running a public healthcare system. This is a system of hospitals and health centres run by the government. It has the ability to look after the health of a large section of its population scattered over hundreds of thousands of villages. We will go into more detail on this later. Moreover, there has been a phenomenal advancement in medical sciences whereby many new technologies and treatment procedures are available in the country.

However, the second column points out how poor the health situation in our country is. With all the above positive developments we are not able to provide proper healthcare facilities to people. This is the paradox – something that is contrary to what we would expect. Our country has the money, knowledge and people with experience but cannot make the necessary healthcare available to all. In this chapter, we will look at some of the reasons for this.

The story of Hakim Seikh
Hakim Seikh was a member of the Paschim Banga Khet Mazdoor Samity (PBKMS), an organisation of agricultural labourers in West Bengal. One evening in 1992, he accidentally fell off a running train and suffered head injuries. He was in a very serious condition and needed immediate treatment.

He was taken to a government hospital in Kolkata but they refused to admit him because they did not have a spare bed. Another hospital did not have the facility or the specialised doctors necessary for his treatment. In this way he spent 14 hours in a critical state and was taken to eight different government hospitals, but none of them admitted him.

Finally, he was admitted in a private hospital, where he received treatment. He spent a lot of money on his treatment. Angry and upset over the indifferent attitude of all the hospitals that refused to admit him, Hakim Seikh and PBKMS filed a case in the court.

Read the story given above. Then imagine that you are a Judge in the court. What would you say to Hakim Seikh?
THE COST OF A CURE

Aman and Ranjan are good friends. While Ranjan comes from a well-to-do family, Aman’s parents have to struggle to make ends meet...

Hi Aman! Good to see you back! How have you been?

I had viral fever and had to go to the hospital...

Oh! Me, too! I just got back to school on Monday. My Daddy took me to see the doctor at the new hospital in Kingsway. It was very exciting!

The building looked so posh. I thought it was a five star hotel! Daddy said that was because it was a private hospital, with the best of facilities.

Daddy had to pay Rs 500 at the reception counter itself – before we even met the doctor! There was nice music playing and everything was really clean and shiny.

The doctor asked for many tests...but everyone was so friendly! The lady who took my blood for testing told me so many jokes that I forgot to feel the pain!

After the test results came, we went back to the doctor. He looked through them and said everything was fine, and I only had viral fever. He prescribed some medicines and rest.

...and have you heard the one about Batman on Reality TV?

...and so young man – this pink pill should be taken three times a day, and the white tablet once before bed time – that’s for the bodyache! This one is a syrup – don’t worry, it’s tasty

Thank you Doctor...I feel better already!
You see, I’ve been dying to tell you all about it! But what about you? Which hospital did you go to?

Um... it wasn’t as nice as your’s at all! At first, Abba didn’t want to take me because he said it would take too much time...

When our turn came, the doctor examined me, and asked for a blood test. Then we had to go and stand in another long queue! People were crowding around in the testing room too.

We got the test results after three days... and went back to the hospital. There was a different doctor that day.

Show me his OPD card... and the test results – quickly please!

He seems to be suffering from a bout of viral fever – nothing to worry about. All he needs is this one fever-reducing medicine.

My hospital was nice, but they gave me many medicines and the whole thing cost quite a lot!

Oh! My treatment did not cost much!
Where do you go when you are ill? Are there any problems that you face? Write a paragraph based on your experience.

What problems did Aman face in the government hospital? How do you think the hospital can work in a better manner? Discuss.

Why did Ranjan have to spend so much money? Give reasons.

What problems do we face in private hospitals? Discuss.

Public and private health care services

From the above story, you must have understood that we can roughly divide up various health care facilities in two categories –

(a) Public health services and

(b) Private health facilities.

Public health services

The public health service is a chain of health centres and hospitals run by the government. They are linked together so that they cover both rural and urban areas and can also provide treatment to all kinds of problems – from common illnesses to special services. At the village level there are health centres where there is usually a nurse and a village health worker. They are trained in dealing with common illnesses and work under the supervision of doctors at the Primary Health Centre (PHC). Such a centre covers many villages in a rural area. At the district level is the District Hospital that also supervises all the health centres. Large cities have many government hospitals such as the one where Aman was taken and also specialised government hospitals such as the ones in Hakim Seikh’s story.

The health service is called ‘public’ for many reasons. In order to fulfil its commitment of providing health care to all citizens, the government has established these hospitals and health centres. Also, the resources needed to run these services are obtained from the money that we, the public, pay to the government as taxes. Hence, such facilities are meant for everyone. One of the most important aspects of the public health system is that it is meant to provide quality health care services either free or at a low cost, so that even the poor can seek treatment. Another important function of public health is to take action to prevent the spread of diseases such as TB, malaria, jaundice, cholera,
diarrhoea, chikungunya, etc. This has to be organised by the government with the participation of people otherwise it is not effective. For example, when taking up a campaign to see that mosquitoes do not breed in water coolers, rooftops, etc., this has to be done for all houses in the area.

Recall the case of Hakim Seikh. Would you like to know what the court said in this case?

According to our Constitution, it is the primary duty of the government to ensure the welfare of the people and provide health care facilities to all.

The government must safeguard the Right to Life of every person. The Court said that the difficulty that Hakim Seikh had to face could have cost him his life. If a hospital cannot provide timely medical treatment to a person, it means that this protection of life is not being given.

The Court also said that it was the duty of the government to provide the necessary health services, including treatment in emergency situations. Hospitals and medical staff must fulfil their duty of providing the necessary treatment. Hakim Seikh was denied treatment at various government hospitals. Therefore, the Court asked the State Government to give him the money that he had spent on his treatment.

**Private health facilities**

There is a wide range of private health facilities that exist in our country. A large number of doctors run their own private clinics. In the rural areas, one finds Registered Medical Practitioners (RMPs). Urban areas have a large number of doctors, many of them providing specialised services. There are hospitals and nursing homes that are privately owned. There are many laboratories that do tests and offer special facilities such as X-ray, ultrasound, etc. There are also shops from where we buy medicines.
As the name suggests, private health facilities are not owned or controlled by the government. Unlike the public health services, in private facilities, patients have to pay a lot of money for every service that they use.

Today the presence of private facilities can be seen all around. In fact now there are large companies that run hospitals and some are engaged in manufacturing and selling medicines. Medical shops are found in every corner of the country.

**Healthcare and equality: Is adequate healthcare available to all?**

In India, we face a situation where private services are increasing but public services are not. What is then available to people are mainly private services. These are concentrated in urban areas. The cost of these services is rather high. Medicines are expensive. Many people cannot afford them or have to borrow money when there is an illness in the family.

Some private services encourage incorrect practices to earn more. At times inexpensive alternatives, though available, may not be used. For example, some medical practitioners are found to prescribe superfluous medicines, injections or saline when simple medication may suffice.

In fact, barely 20 per cent of the population can afford all the medicines that they require during an illness.
illness. Hence, even for those whom one might not think as being poor, medical expenses cause hardship. It was reported in a study that 40 per cent of people who are admitted to a hospital for some illness or injury have to borrow money or sell some of their possessions to pay for the expenses.

For those who are poor, every illness in the family is a cause of great anxiety and distress. What is worse is that this situation tends to happen again and again. Those who are poor are in the first place undernourished. These families are not eating as much as they should. They are not provided basic necessities like drinking water, adequate housing, clean surroundings, etc., and therefore, are more likely to fall ill. The expenses on illness make their situation even worse.

Sometimes it is not only the lack of money that prevents people from getting proper medical treatment. Women, for example, are not taken to a doctor in a prompt manner. Women’s health concerns are considered to be less important than the health of men in the family. Many tribal areas have few health centres and they do not run properly. Even private health services are not available.

**What can be done?**

There is little doubt that the health situation of most people in our country is not good. It is the responsibility of the government to provide quality healthcare services to all its citizens, especially the poor and the disadvantaged. However, health is as much dependent on basic amenities and social conditions of the people, as it is on healthcare services. Hence, it is important to work on both in order to improve the health situation of our people. And this can be done. Look at the following example.
The Kerala experience

In 1996, the Kerala government made some major changes in the state. Forty per cent of the entire state budget was given to panchayats. They could plan and provide for their requirements. This made it possible for a village to make sure that proper planning was done for water, food, women’s development and education. This meant that water supply schemes were checked, the working of schools and *anganwadis* was ensured and specific problems of the village were taken up. Health centres were also improved. All of this helped to improve the situation. Despite these efforts, however, some problems – such as shortage of medicines, insufficient hospital beds, not enough doctors – remained, and these needed to be addressed.

For more details, visit http://lsgkerala.gov.in/en

Let us look at an example of another country and its approach to issues of health.

The Costa Rican approach

Costa Rica is considered to be one of the healthiest countries in Central America. The main reason for this can be found in the Costa Rican Constitution. Several years ago, Costa Rica took a very important decision and decided not to have an army. This helped the Costa Rican government to spend the money that the army would have used, on health, education and other basic needs of the people. The Costa Rican government believes that a country has to be healthy for its development and pays a lot of attention to the health of its people. The Costa Rican government provides basic services and amenities to all Costa Ricans. For example, it provides safe drinking water, sanitation, nutrition and housing. Health education is also considered very important and knowledge about health is an essential part of education at all levels.
EXERCISES

1. In this chapter you have read that health is a wider concept than illness. Look at this quote from the Constitution and explain the terms ‘living standard’ and ‘public health’ in your own words.

2. What are the different ways through which the government can take steps to provide healthcare for all? Discuss.

3. What differences do you find between private and public health services in your area? Use the following table to compare and contrast these.

<table>
<thead>
<tr>
<th>Facility</th>
<th>Affordability</th>
<th>Availability</th>
<th>Quality</th>
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</thead>
<tbody>
<tr>
<td>Private</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Public</td>
<td></td>
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</table>

4. ‘Improvement in water and sanitation can control many diseases.’ Explain with the help of examples.

Glossary

Public: An activity or service that is meant for all people in the country and is mainly organised by the government. This includes schools, hospitals, telephone services, etc. People can demand these services and also raise questions about their non-functioning.

Private: An activity or service that is organised by an individual or company for their own gain.

Medical tourists: This refers to foreigners who come to this country specifically for medical treatment at hospitals that offer world-class facilities at a lower cost than what they would have to pay in their own countries.

Communicable diseases: These are diseases that are spread from one person to another in many ways such as through water, food, air, etc.

OPD: This is the short form for ‘Out Patient Department’. This is where people are first brought in and treated in a hospital without being admitted to any special ward.

Ethics: Moral principles that influence a person’s behaviour

Generic names: These are chemical names of the drugs. They help in identifying the ingredients. They are globally recognised. For example, acetyl salicylic acid is the generic name of Aspirin.

An important part of the Constitution says it is the “duty of the State to raise the level of nutrition and the standard of living and to improve public health.”

Sustainable Development Goal (SDG) www.in.undp.org

Chapter 2: Role of the Government in Health