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With rapid urbanization and influx of population into slums and shanty habitations, a large chunk of poor population has moved into environmentally deprived urban areas which are overcrowded have no access to safe water, sanitation, safe accommodation and often lack access to basic services. The urban population in India has increased from 28.53% (2001) to 31% (2011) and projected to be 46% (2030). It is estimated that 30 to 40% of population in metros lives in slum or slum like habitation. The health indicators of this population are worse than those of rural populations. This population needs urgent attention in healthcare to improve health indicators in India which are stagnating as compared many less developed neighbouring countries. The National Health Policy (NHP) 2002 acknowledged the need of urban population. National Urban Health Mission was launched in 2013 but has been very slow to take off. The NHP covers it more extensively and emphasizes the need for moving from token interventions to on-scale axssured interventions to organize primary health care and referral services and collaboration with other sectors. It includes advocacy for scaling up NUHM to cover entire urban population, with focus on the poor and the vulnerable, in next five years with sustained financing.

Though needs of urban population are similar to that of rural population, thefollowing challenges need special attention in Urban areas:

#### Lack of Primary Healthcare infrastructure

Since independence focus of public health has been rural areas which started Joseph Bhore's report in 1946. This resulted in deprivation of urban population. There were sporadic and scanty efforts such as World Bank funded Indian Population Projects. These were never planned to be taken to scale. The rapid increase in urban population due to migration stretched the infrastructure ofen moving the neo-migrants and the poor into unhygienic environment making then more vulnerable to diseases increasing their need for healthcare which is neither in their reach nor affordable for them. Though a large number of hospitals exist in cities, there is grossly inadequate primary health infrastructure such as subcentres and primary health centres.

#### What is the solution:

Health infrastructure was created under Urban Revamping Scheme and India Population Projects. However the NUHM framework provides directions for comprehensive planning for urban healthcare infrastructure. The funds allocated by the ministry for NUHM are not being used by most states. The state governments need to give a high priority to plan setting up of healthcare infrastructure by establishingUrban PHCs recruit manpower to provide preventive, promotive and basic clinical care at doorsteps and provide referral services to those who need it. The planning and implementation of services should include mapping of vulnerable population, mapping the available health facilities set up under various government schemes, non government organizations and private sector. The gaps existing should then be addressed in a comprehensive manner.

#### The Urban Lifestyle and Burden of Diseases:

The current lifestyle(s) of an average city dweller includes fast paced life with sedentary jobs, a stressful environment and unhealthy food habits predisposes them to non-communicable diseases such as obesity, diabetes, hypertension. The real question is, that are we as individuals and as care providers ready to face the consequences resulting from a poor lifestyle? India is also a diabetic capital of the world. The answer is no, and this is where seeking a solution has become utmost important. There are also seasonal outbreaks of vector borne diseases such as malaria, dengue and chickenguniya. The cities often have outbreaks of waterborne diseases due to contamination of water supply. Many of these diseases spread much faster due to dense population in cities especially slums and slum-like areas.

What is the solution: The government should engage other ministries to promote healthy life style such as promotion of non-mechanized transport and encourage physical activities and healthy dietary practices in schools, colleges and work places. Discourage tobacco and alcohol use. India had done well in reducing tobacco control and has recently received an award from WHO for this. The cities have pockets where safe water sanitation is not available and sites where water collections breed mosquitoes resulting in Dengue, Chickengunya and Malaria. The government must expand insurance coverage in both public and private sector organizations and those employed in informal sector and urban poor through scale up schemes such as RashtritaSwasthayaBimaYojana, Arogya Shree. Moreover, health awareness for various government initiatives such as Yoga and 'Swachh BharatAbhiyaan'.

#### The Accidents and Injuries:

Alarming statistics of about 16 deaths and 58 road injuries that happen per hour in India have recently been reported. The fast paced drive on crowded roads can cause traffic accidents including road rage. In India about 12,00,000 deaths take place every year due to accidents and injuries. Many more are incapacitated lifelong. Most of these deaths are preventable. The preventive action lies in the domain of other ministries such as road and transport, urban affairs, industry, municipalities.

What is the solution: The government should implement strict norms for issuing driving licenses, safety standards for the vehicles and safe spaces for pedestrians and cyclists. To provide prompt emergency medical care, it should be made mandatory to provide emergency first aid, quick transportation and for hospitals to treat such patients without wasting any time using standard treatment protocols and standard operating procedures. The government should also provide a compulsory health insurance cover for emergency medical care of all accident victims.

#### Air Pollution and related diseases

Work Stress, unhealthy lifestyle and polluted food intake is responsible for a variety of communicable and non-communicable diseases including cancers. The cancers seem to be tightening its grip on India, and a million new cases of cancer are being reported every year. These are expected to rise rapidly and will increase five-fold by 2025. One cannot wait for a long time to receive the right treatment.

Owing to thinning green cover, and toxins in the environment respiratory disease cases have risen to 5 million since 2012. As many as 2932 people died due to acute respiratory infection in 2014 as against 3513 in the previous year. Is it in our hands to deal with the wide array of serious health effects for which air pollution alone is responsible? A permanent relief to the health menace caused by air pollution has become indispensable.

What is the solution: The concerned ministry should restrict industries from creating pollution; enforce strict emission norms for automobiles.By way of restricting the number of personal vehicles per home and encouraging initiatives such as car pools, odd even vehicle number drives can go a long way in improving such situations. Also, the government should collect a tax from individuals owning multiple vehicles and contribute to create a unique health insurance cover for the accident victims. It is not just the responsibility of the government but also local communities to raise awareness about cancer by conducting rallies, awareness drives, fund contribution to fight this menace. Also, the government should issue a very exclusive, affordable & universal health insurance cover for those suffering from cancer as is done in some states such as Tamil Nadu and Kerala.

India is rapidly urbanizing. The health care needs of the urban population have not received adequate attention in the past. The government has launched national urban health mission to create comprehensive healthcare infrastructure in a planned manner. However the states are not proactively using the central funds to address needs of urban population. The special needs of urban population such as unhealthy life style leading to higher prevalence of noncommunicable diseases including diabetes, hypertension and cancers, outbreaks of seasonal diseases, accidents and injuries and diseases resulting from air pollution need to be addressed in the service delivery in towns.