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On the last day of 2014 when the Union government made public the draft policy is a first step in achieving universal health coverage by advocating [health as a fundamental right](#), whose demand will be justiciable". While it makes a strong case for moving towards universal access to affordable health-care services, there are innumerable challenges to be overcome before the objectives become a reality. The current government spending on health care is a dismal 1.04 per cent of gross domestic product (GDP), one of the lowest in the world; this translates to Rs.957 per capita in absolute terms. The draft policy has addressed this critical issue by championing an increase in government spending to 2.5 per cent of GDP (Rs.3,800 per capita) in the next five years. But even this increase in allocation falls short of the requirement to set right the dysfunctional health-care services in the country. Citing the health-care system's low absorption capacity and inefficient utilisation of funding as an alibi for not raising the spending to 3 per cent of GDP is nothing but a specious argument. Insufficient funding over the years combined with other faulty practices have led to a dysfunctional health-care system in the country. Undivided focus is an imperative to strengthen all the elements of health-care delivery. The failure of the public health-care system to provide affordable services has been the main reason that has led to increased out-of-pocket expenditure on health care. As a result, nearly 63 million people are driven into poverty every year. The Ebola crisis in Liberia, Guinea and Sierra Leone, which underlined the repercussions of a weak public health-care system, should serve as a grim reminder of this.

[Draft on National Health Policy 2015](#)

The national programmes provide universal coverage only with respect to certain interventions such as maternal ailments, that account for less than 10 per cent of all mortalities. Over 75 per cent of the communicable diseases are outside their purview and only a limited number of non-communicable diseases are covered. It is, therefore, crucial for the Union government to undertake proactive measures to upgrade the health-care services of poorly performing States such as Bihar and Uttar Pradesh. As it stands, health will be recognised as a fundamental right through a National Health Rights Act only when three or more States "request" it. Since health is a State subject, adoption by the respective States will be voluntary. Though a different approach has been taken to improve adoption and implementation by States, the very objective of universal health coverage that hinges on portability will be defeated in the absence of uniform adoption across India.

Also Read: [Health care for all](#)

Keywords: [National Health Policy 2015](#), [health coverage](#), [fundamental right](#), [right to health](#), [health-care system](#)

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