

## THE NEED TO PROMOTE TRANSLATIONAL PUBLIC HEALTH THROUGH PUBLIC HEALTH PROFICIENT NGOS

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Developing countries with weaker health systems find it challenging to provide equitable, affordable and optimal healthcare to its population due to conflicting developmental priorities. In India, low budgetary spending on healthcare – in addition to human resource constraints and paucity of hospitals to cater to the needs of the population – have resulted in severe yet unaddressed gaps in the public health sector, which drive the majority of the population to seek healthcare in the expensive commercialized private sector, often resulting in catastrophic expenditure on households. This cycle continues to constrain India's roadmap to improving population health and achieving desired health outcomes. Non-governmental organizations (NGOs) are paramount in bridging this gap, by strengthening health systems by educating and fostering community participation in their operations, while promoting healthier societies. Some may also have the audacity to build health systems in scale and breadth while maintaining low cost service.

The ongoing COVID19 pandemic further emphasizes the urgent need for the government to collaborate with NGOs that cater to the communities at the grass-root level. The lockdown strategy adopted by governments around the world has been criticized extensively by public health experts as it inflicts severe economic damage and disrupts social protection. India's primary healthcare continues to be severely underfunded and understaffed relative to its massive burden, and COVID19 only highlights the apparent as it ravages the nation. A major shortcoming of the state and central governments during the national lockdown was the joint inability to serve to the daily wage-earning



internal migrants which composed about 40% of the country's population . On the other hand, NGOs sprung to action by providing food, emergency supplies and transportation to the stranded migrant workers across the country . Although the lowest of the economic strata bore the brunt of the lockdown, the urban health was also affected in a different way. A recent survey by CHD Group, a Mangalore headquartered NGO, which explored the impact of lockdown on urban population stated that 38% reported experiencing emotional and mental stress during the lockdown. Furthermore, over 70% of the respondents also believed that NGO-government collaboration could have resulted to improve response to the COVID19 pandemic

Although NGOs are historically known for their contribution in providing relief during humanitarian crises, NGOs have tirelessly supported India's poorly structured health system in various other domains, especially mother and child health and mental health. For instance, nearly 60% of all healthcare workers operate in urban areas, where only 28% of the population resides. On the contrary, only 40% work in rural areas, where over 72% of the population resides. Moreover, India is short of half a million doctors, based on the World Health Organization's recommendation of 1 doctor for every 1,000 population. This economic disparity further reinforces the need for the government to involve grass-root NGOs that have the ability to independently and extensively access even the most rural belts of the country, where the health needs are rarely met. While from an infectious disease perspective COVID-19 reigns supreme, the world may well be waiting for a next pandemic in mental health as well. Lockdown, quarantine and social neglect has inched this closer to a potential catastrophe waiting to happen.

A 2019 mental health report of the Karnataka state showed that majority of the severe mental health disorders including schizophrenia and major depressive disorders, accumulate in the rural districts. NGO-government collaborations are even more essential in conducting massive screening drives, such as that for malnutrition, primary care and others, increasing vaccination coverage and maternal education also. Moreover, NGOs – that operate at a low cost in a sustainable manner – also create low-cost replicable healthcare models. Thus, NGO collaboration with government programs is a potential strategy to improve healthcare equity.

Local governments cater to a wide array of social and developmental requirements at the local level, but cascading risk do not get addressed in this process. Integration of a social health model created by CHD Group and other institutions must be linked to co-create risk informed planning and policies which brings inclusivity and sustainability at the very heart of development. Line ministries need to evolve a mechanism through which they can work together and streamline bottlenecks in the existing process of policy making.

## About the authors:



Gautam Satheesh is research assistant at CHD Group, India Country Office and Dr. Edmond Fernandes is CEO, CHD Group, India Country Office.

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