

FIGHT FOR THE FINITE: ON BUDGETARY ALLOCATION FOR HEALTH

Health budgetary allocation must go up if India is to prepare for an unpredictable epidemic

It is an incontrovertible truth that material resources are finite. Demand in most sectors will continue to exceed supply in times of a pandemic. With the number of SARS-CoV-2 positive cases on the rise, and the number of deaths going up as well, the question is whether national and state health systems will be able to cope with ever-rising demands — for testing kits, for hospital beds, ventilators, why, even masks and hand sanitisers. This extraordinary demand has traditional production and systems of delivery choking and most often, unable to match supply to demand. Health-care resources, limited to begin with, are even more so when under stress. At a time when the disease did not have a name, and much less by way of character, in mainland China, the rapidly climbing numbers went far beyond the capacity of the country's renowned industry (where a hospital was built in record time), and the health systems struggled to cope. Reports indicate that in Italy, which has emerged the hub of the epidemic outside of China, the strain on health systems is massive. With India crossing 100 positive cases, it is impossible to ignore the question about whether the health system is robust enough to meet this emergency. What is known, however, does not inspire confidence.

For years, India's health expenditure as a percentage of GDP has been abysmal at about 1%. As per the National Health Profile, 2019, collated by the Central Bureau of Health Intelligence unit of the Directorate General of Health Services, there has been no significant change in health-care expenditure since 2009-2010. The highest it has been in the decade is 1.28 % of the GDP, and hit the nadir at 0.98 % in 2014-2015. The report does record that per capita public expenditure on health in nominal terms went up from ₹621 in 2009-10 to ₹1,112 in 2015-16. A WHO bulletin of 2018 records that out-of-pocket payments remain common in India, which in 2014, was estimated at 62% of total health expenditure. While questioning whether these incremental efforts are sufficient, one needs to factor in the substantial skew in different States in terms of public sector health infrastructure and wherewithal. There is evidence to show that increased public spending on health care has resulted in less financial hardship for communities and better health outcomes. Prime Minister Narendra Modi made a promise to increase public health spending to 2.5 % of GDP by 2025. His government would do well to treat this epidemic as an opportunity to drastically scale up budgetary allocations for health to facilitate expansion of capacity. Epidemics are known to change the course of history; India must steer this one to harness finite resources optimally for the benefit of all.

1. **the finite** (noun) – finiteness, defined/distinct limitations.
2. **unpredictable** (adjective) – unforeseeable, uncertain, unsure; volatile/unstable.
3. **epidemic** (noun) – widespread disease, widespread illness; outbreak.
4. **incontrovertible** (adjective) – unquestionable, undeniable, unarguable.

5. **finite** (adjective) – limited, not infinite, restricted.
6. **novel coronavirus (nCoV) (SARS-CoV-2)** (noun) – a new strain (type/variety) coronavirus that has not been previously identified in humans. (Courtesy: **WHO**)
7. **on the rise** (phrase) – increasing.
8. **ventilator** (noun) – a respirator, a device (used for a patient to breathe).
9. **choke** (verb) – struggle, fail to perform & match; block, obstruct, stop up.
10. **to begin with** (phrase) – at first, at the outset, at the beginning.
11. **even more so** (phrase) – used to emphasize that something holds good (true/valid) more than usual in a certain situation; especially, particularly.
12. **stress** (noun) – strain, pressure, demand, burden; trouble, difficulty.
13. **far beyond** (phrase) – outside the limits/scope/ambit of something.
14. **hub** (noun) – centre, centre of activity, focal point.
15. **robust** (adjective) – strong, powerful.
16. **inspire** (adjective) – cause, give rise to, bring about.
17. **abysmal** (adjective) – very bad, awful, terrible.
18. **collate** (verb) – combine, aggregate, put together.
19. **nadir** (noun) – the lowest point, the all-time low, the lowest level.
20. **per capita** (adverb & adjective) – for each person; each, per.
21. **bulletin** (noun) – communication, report, communiqué, statement.
22. **out-of-pocket payments (OOPs)** (noun) – it is defined as direct payments made by individuals to health care providers at the time of service use. (Courtesy: **WHO**)
23. **incremental** (adjective) – gradual, phased, piecemeal, step-by-step.
24. **factor in** (phrasal verb) – included/added as a factor/point when making a decision.
25. **substantial** (adjective) – considerable, significant, large.
26. **skew** (noun) – misrepresentation, misstatement, falsification, misreporting.
27. **wherewithal** (noun) – resources, means.
28. **hardship** (noun) – financial distress, trouble, misfortune, suffering.
29. **drastically** (adverb) – extremely; seriously, desperately, substantially.
30. **scale up** (phrasal verb) – increase.
31. **facilitate** (verb) – make easier, make possible; assist/help.
32. **expansion of capacity** (noun) – capacity expansion is the process of adding facilities of similar type over time to meet a rising demand for their services.
33. **change the course** (phrase) – divert something completely in a new & different path/direction.
34. **steer** (verb) – guide, conduct, direct/lead.

35. **harness** (verb) – put to use, utilize/exploit, make use of.

36. **optimally** (adverb) – in the most favourable way.

BACK TO SAARC: ON MODI'S VIDEO CONFERENCE WITH LEADERS

PM Modi did well to engage with leaders of South Asia on combating COVID-19

Prime Minister Narendra Modi's decision to convene a video conference of leaders of the eight-member SAARC on Sunday represents a much-needed "out-of-the-box" thinking as the world faces the COVID-19 coronavirus pandemic. Pandemics do not recognise political borders, and in times of trouble, reaching out to neighbouring countries is the most obvious course of action. To that end, the hour-long discussion with the leaders of Afghanistan, the Maldives, Bangladesh, Bhutan Nepal, Sri Lanka, and the Special Assistant on Health to the Pakistan PM, came up with shared and unique perspectives in dealing with the virus that has affected 1,75,250 people and claimed over 6,700 lives worldwide. The meeting saw Mr. Modi's proposal for a COVID-19 emergency fund — India will contribute \$10-million — as well as a decision on technical task forces. Afghanistan and Pakistan have specific challenges as they share long borders with Iran, which has emerged, after China and Italy, as a major hub of the virus. Bhutan, the Maldives, Nepal and Sri Lanka worry about the impact on tourism, which is a mainstay of their economies. Another concern is of an escalation in the virus's spread in the subcontinent. With close to 300 positive cases, South Asia has seen a much lower incidence globally, but given its much higher population density, it is clear that any outbreak will lead to far more casualties. Other concerns are about under-reporting, as fewer people are being tested in much of South Asia, and whether public health services can cope. It remains to be seen how closely the SAARC countries will cooperate to deal with the virus.

While speaking to his counterparts was a part of Mr. Modi's message, it was, however, certainly not the whole. The fact that he decided to make the video conference available live indicates his desire to also reach out to and reassure the public in the SAARC region. Beyond this is the message sent out by deciding to engage with the more or less moribund SAARC neighbourhood grouping, rather than other organisations the government has preferred to engage with recently such as BIMSTEC, BBIN and IORA. In fact the virtual summit is the first high-level SAARC meet since 2014, and comes after India's pulling out of the 2016 summit following the Uri attack; it was to have been hosted in Islamabad. Pakistan too has made its concerns over Jammu and Kashmir a sticking point in re-engagement, and PM Imran Khan's absence on Sunday, and his nominee's attempt to raise the issue of restrictions in Kashmir indicate that this attitude persists. Clearly, reviving the SAARC initiative, which countries in the region including Nepal, Sri Lanka and Bhutan have advised, will not be easy, given poor ties between SAARC's two largest members, India and Pakistan. But it is significant that New Delhi seems to be willing to try to put politics aside when dealing with the pandemic that confronts all.

1. **combat** (verb) – fight, tackle, confront/resist.
2. **COVID-19** (noun) – coronavirus disease 2019.
3. **out-of-the-box thinking** (phrase) – thinking creatively/unconventionally/differently.
4. **coronavirus** (CoV)(noun) – a large family of viruses that cause illness ranging from the common cold to more severe diseases. common signs of infection include respiratory symptoms, fever, cough, shortness of breath and breathing difficulties. In more severe cases, infection can cause pneumonia, severe acute respiratory syndrome, kidney failure and even death. (Courtesy: **WHO**)
5. **pandemic** (noun) – the worldwide spread of a new disease; The illness spreads around the world and typically affects a large number of people across a wide area.
6. **reach out** (phrasal verb) – contact someone to obtain or offer help, assistance, cooperation.
7. **come up with** (phrasal verb) – produce, propose, put forward, present.
8. **perspective** (noun) – outlook, viewpoint, approach.
9. **task force** (noun) – unit, crew, outfit, section (mainly arranged for a task).
10. **hub** (noun) – centre, centre of activity, focal point.
11. **mainstay** (noun) – central component, chief support, backbone.
12. **escalation** (noun) – intensification; an increase in the intensity of something.
13. **incidence** (noun) – occurrence, prevalence, commonness.
14. **outbreak** (noun) – sudden appearance/occurrence (of a disease); outburst, epidemic.
15. **casualty** (noun) – victim, fatality, loss/dead/injured.
16. **under-reporting** (noun) – reporting less than actual (data).
17. **counterpart** (noun) – a person/thing that serves the same job/function but in a different location; equivalent.
18. **more or less** (phrase) – approximately, roughly, nearly, almost.
19. **moribund** (adjective) – dying, sinking, decaying, declining, crumbling.
20. **virtual** (adjective) – effective, essential, practical.
21. **come after** (phrasal verb) – follow, happen, occur, ensue.
22. **pull out** (phrasal verb) – withdraw, leave, abandon.
23. **sticking point** (noun) – obstacle, bone of contention; a problem or issue that makes you can't move beyond and it stops all progress and you are stuck.
24. **persist** (verb) – continue, linger, remain.
25. **revive** (verb) – re-establish, reinstitute, bring back.
26. **put aside** (phrasal verb) – disregard/forget, set aside, ignore, pay no heed to, shrug off.