Harnessing Private Sector - Empowering Women: Snippets from India

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Healthcare in India- the Financing Story, circa 2014

• India spent 4.1 percent of GDP (or US$40 per capita) on health in 2008-09 (NHA 2009) and continues to spend about 4 percent of GDP.

• Current health spending in India is about US$ 70 billion per year.

• Over 17 percent of the world’s population manages with just 1 percent of the world’s total health expenditure.

• Public spending on health is hovering at about 1 percent (1.2 percent currently)- significantly below India’s global income comparators.

• Out-of-pocket payments represent about 59 percent of the total health expenditure- common cause for impoverishment.

• Even for the country’s income and health expenditure level, performance on health outcomes is below par- plus large disparities across states and social groups

• A consequence of under-investing in the health sector is the severe shortage of health workforce, especially in nursing and midwifery in some states.
Key health challenges to address in the state of Uttarakhand

- A difficult geographical terrain with access and equity challenges
- Severe human resource constraints, even more so in remote areas
- A large, seasonal, floating population of tourists and pilgrims
- Persisting maternal and child health challenges, persisting communicable diseases
- Epidemiological and demographic transition
- Need for disaster preparedness and building resilience from natural calamities
- Financial protection issues, including unmet demand for health services
Harnessing Private Sector, Empowering Women

• Steady growth in health sector, one of the largest employers of women
• New generation publicly-funded health insurance schemes: women’s enrolment low, but utilization higher
• Acute shortages in nursing staff, amidst huge international demand =
  • Improved Status and Emoluments for Graduate Nurses
  • Unprecedented private investments in Nursing Schools across India
Empowering Women as Providers: The ASHA (hope) story

• Under India’s flagship health program, the National Health Mission, 0.9 million women residing in the village communities trained as Accredited Social Health Activist (ASHAs) – grassroots workers engaged to act as interface between community and Health System.

• Not salaried workers- paid entirely on performance

• An integral link worker role for all public health programs now
Harnessing Private Enterprise and Empowering Women: The proposed Uttarakhand Health Project