

The background of the image is a light gray gradient, decorated with several realistic water droplets of various sizes. The droplets are rendered with soft shadows and highlights, giving them a three-dimensional appearance. They are scattered across the frame, with a higher concentration in the upper and lower right areas.

WEST BENGAL HEALTH

ASSIGNMENT OF PROJECT REPORT

TOPIC: HEALTH IN WEST BENGAL

THE UNIVERSITY OF BURDWAN

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• **INTRODUCTION**

THE STATE OF WEST BENGAL WHERE ABOUT THREE QUARTERS OF POPULATION LIVE IN VILLAGES, THE REMAINING QUARTER LIVING IN URBAN AREAS AND MORE THAN HALF RESIDE IN GREATER KOLKATA IS AT CROSSROADS IN THE FIELD OF HEALTH CARE DELIVERY SYSTEM. NUTRITION, HEALTH AND EDUCATION ARE THE THREE INPUTS ACCEPTED AS SIGNIFICANT FOR THE DEVELOPMENT OF HUMAN RESOURCES AND THE PROGRESS OF THE STATE OF WEST BENGAL IN INDIA DURING THE LAST DECADE TOWARDS ACHIEVING THESE THREE INPUTS HAS BEEN UNEVEN. THE MAIN PURPOSE OF THIS ARTICLE IS TO SHOW THE HEALTH FACILITIES AND CHALLENGES IN WEST BENGAL. PUBLIC HEALTH EXPENDITURE UNDER THE STATE OF WEST BENGAL IS SO LOW THAT THERE HAS BEEN HUNGER AND STARVATION DEATHS IN DIFFERENT DISTRICTS OF WEST BENGAL. DIFFERENT DATA HAVE BEEN CITED THROUGH DIFFERENT TABLES BRINGING INTO LIMELIGHT OF THE FACILITIES OF GOVERNMENT OF HOSPITALS OF THE STATE OF WEST BENGAL.

THIS PAPER DIVIDED INTO SEVERAL SECTIONS. BUT THE OVERALL PROJECT HAS BEEN DIVIDED INTO TWO PARTS. FIRST PART OF THIS PROJECT SHOW AN OVERVIEW HEALTH CARE STATISTICS OF WEST BENGAL AND ANOTHER SECTION CONTAINS THE MAIN OBJECTIVE OF THIS PROJECT. BASICALLY THIS PROJECT HAS HIGHLIGHTED THE GOOD ASPECTS OF THE HEALTH CARE SYSTEM OF WEST BENGAL AS WELL AS SOME ERRORS . MOREOVER THIS PAPER ATTEMPTS TO ANALYZE THE HEALTH FACILITIES AND CHALLENGES IN WEST BENGAL, WHERE INCOME DISTRIBUTIONS HAS CREATED A HIGHLY DIFFERENTIATED MARKET FOR HEALTH SERVICES MAKING AFFORDABLE AND RELIABLE FOR ITS RESIDENT.

SUMMARY OF LITERACY

P.K RANA AND B.P MISHRA REPORT:

THIS REPORT "CURRENT HEALTH STATUS IN WEST BENGAL" HE BRIEFLY DISCUSSED ABOUT THE HEALTH CONDITION IN WEST BENGAL. In The State of West Bengal in India is at the crossroads in the field of health care delivery system. Nutrition, health and education are the three inputs accepted as significant for the development of human resources and the progress of the State of West Bengal in India during the last decade towards achieving these three inputs has been uneven. MAINLY THIS ARTICLE IS TO SHOW THE HEALTH FACILITIES AND CHALLENGES IN WEST BENGAL OF INDIA WHERE THE PROBLEM OF PROVIDING EFFECTIVE HEALTH CARE SERVICES TO THE MAJORITY OF ITS CITIZENS HAS BECOME AN IMPOSSIBLE TASK FOR THE STATE OF GOVERNMENT OF WEST BENGAL. PUBLIC HEALTH EXPENDITURE UNDER THE STATE OF WEST BENGAL IS SO LOW THAT THERE HAS BEEN HUNGER AND STARVATION DEATHS IN DIFFERENT DISTRICTS OF WEST BENGAL. IN THIS ARTICLE DIFFERENT DATA HAVE BEEN CITED THROUGH DIFFERENT TABLES BRINGING INTO LIMELIGHT OF INFANT MORTALITY RATE, BIRTH RATE, DEATH RATE AND THE FACILITIES OF GOVERNMENT OF HOSPITALS OF THE STATE OF WEST BENGAL. THIS ARTICLE HAS MADE A FOCUS ON THE URGENCY OF STRENGTHENING THE IMPLEMENTATION OF ALL THE RURAL AND URBAN HEALTH CARE PROGRAM AND IMPROVE INFANT AND CHILD FEEDING PRACTICES AMONG WOMEN.

MANISH SHAH:

IN THIS REPORT "A SURVEY OF PUBLIC HOSPITAL IN WEST BENGAL"- SHOW THE HEALTH FACILITIES AND CHALLENGES IN WEST BENGAL .THERE HAVE FOUR EXECUTIVE SUMMERY OF THIS REPORT-

- ❑ THE PUBLIC HOSPITAL HOWEVER HANDLES A PATIENT POPULATION IN EXCESS OF ITS INFRASTRUCTURAL CAPABILITY AND IS HENCE UNABLE TO PROVIDE SERVICES TO ALL THE PATIENTS.
- ❑ THE WAITING PERIOD IN THE PUBLIC HOSPITAL FOR DOCTOR'S ATTENTION AS WELL AS INVESTIGATIVE SERVICES IS IMPLAUSIBLY HIGH, EXTENDING TO MONTHS IN SOME OF CASES..
- ❑ THE COSTS AT PRIVATE HOSPITALS/NURSING HOMES ARE SIGNIFICANTLY HIGHER THAN PUBLIC HOSPITALS MAKING IT ACCESSIBLE ONLY TO THE PROSPEROUS SMALL FACTION OF THE CITY'S POPULATION..
- ❑ THE PUBLIC HOSPITAL IS NOT ABLE TO EFFECTIVELY PROVIDE BASIC SERVICES BUT THE DIFFERENCE IN COST WHEN COMPARED TO PRIVATE MEDICAL INSTITUTIONS IS SO HIGH THAT PEOPLE ESPECIALLY FROM THE ECONOMICALLY WEAKER SECTIONS HAVE NO CHOICE BUT TO UNDERGO THE LONG WAITING PERIOD AND SUB STANDARD SERVICES OF THE PUBLIC HOSPITAL.

THE MAIN THOUGHT OF THE PAPER IS TO ANALYZE THE HEALTH CARE OPTIONS AVAILABLE TO A PEOPLE LIVING IN WEST BENGAL, WHILE BRINGING OUT THE DISPARITY BETWEEN PUBLIC AND PRIVATE HEALTH CARE OPTIONS IN TERMS OF SERVICE AND COST. THIS REPORT SHOE AN OVERVIEW OF HEALTH CARE STATISTICS OF WEST BENGAL HE ALSO ENLIGHT BY FEW TABLE IN THIS REPORT THE STATE A RAPID GROWTH OVER THE PAST TWO DECADES AND THE POPULATION OF THE STATE HAS BEEN RISING CONSISTENTLY IN ALL ITS DISTRICTS IN THE PERIOD OF 1991-2001.

SANDIP KUMAR ROY, SUBHRA. S. BASU, AMAL KUMAR BASU:

THIS IS THE REPORT OF AN ASSESSMENT OF RURAL HEALTH CARE DELIVERY SYSTEM IN SOME AREAS OF WEST BENGAL. IN THIS REPORT A CROSS SECTIONAL OBSERVATIONAL STUDY WAS CARRIED OUT IN THREE DISTRICTS OF WEST BENGAL BY FOLLOWING OBSERVATIONAL, QUANTITATIVE AND QUALITATIVE METHODS DURING JULY TO DECEMBER 2006 TO FIND OUT THE EXTENT OF UTILIZATION, STRENGTHS, WEAKNESSES AND GAP AS WELL AS SUGGEST RECOMMENDATIONS IN CONNECTION WITH HEALTH CARE DELIVERY SYSTEM FOR THE STATE OF WEST BENGAL, INDIA. A TOTAL OF 672 EPISODES OF ILLNESSES WERE REPORTED (2 WEEKS RECALL) BY THE STUDY POPULATION OF THE THREE SELECTED DISTRICTS IN THREE GEOGRAPHICALLY SEPARATED DIVISIONS OF WEST BENGAL. HOWEVER, AS OBSERVED IN THE STUDY RCH SERVICES INCLUDING FAMILY PLANNING AS WELL AS IMMUNIZATION SERVICES (PREVENTIVE SERVICES) WERE UTILIZED MUCH BETTER WHILE THERE WAS A STRONG NEED OF IMPROVEMENT OF POST NATAL CARE, OTHERWISE, NEONATAL AND MATERNAL MORTALITY AND MORBIDITY WILL CONTINUE TO BE HIGH.

OBJECTIVE OF THE STUDY

IT IS DIFFICULT TASK TO HIGHLIGHT THE COMPLETE HEALTH CARE SYSTEM IN WEST BENGAL, SO THERE ARE DISCUSSED SOME SPECIAL ASPECTS IN THIS ARTICLE

THE PAPER WILL SEEK TO EXPLAIN THE FOLLOWING QUESTIONS:

- **HOW MANY MEDICAL INSTITUTIONS IN WEST BENGAL?**
- **HOW MANY POPULATION SERVED PER BED IN WEST BENGAL?**
- **HOW MANY CRITICAL PATIENTS ARE BEING ADMITTED IN HOSPITAL?**
- **WHERE ARE THE PATIENT COMING FROM?**
- **WHAT IS THE DIFFERENCE IN THE COST OF BASIC SERVICES BETWEEN THE PUBLIC HOSPITAL AND THE PRIVATE HOSPITAL?**



DATA AND METHODOLOGY

THIS PROJECT IS TOTALLY BASED ON SECONDARY DATA. WEST BENGAL HEALTH REPORT BULLETIN AND CAG PERFORMANCE AUDIT REPORT ,WEST BENGAL HEALTH WEBSITE DATA HAS BEEN PARTIALLY USED FOR ANALYSIS PURPOSE.

IN THE METHODOLOGY PART VARIOUS PIE CHART AND TABULATION PRESENTATION HAS BEEN USED.



ANALYSIS :

An Overview of Health care statistics of West Bengal:

The state of West Bengal has seen rapid growth over the past two decades and the population of the state has been rising consistently in all its districts. The table below indicates the rise in overall population as well as the density of population from 1991 to 2001 in West Bengal's seven districts.

Table 1.1: Population, decennial growth rate, density of in the districts of West Bengal, 1991 and 2001

	Total population		Decennial growth rate		Density of population per sp.km	
	1991	2001	1981-91	1991-01	1991	2001
Bankura	2805065	3192695	18.12	13.82	408	464
Burdwan	6050605	6895514	25.13	13.96	861	982
Birbhum	2555664	3015422	21.94	17.99	562	663
Kolkata	4399819	4572876	6.61	3.93	23783	24718
Darjeeling	1299919	1609172	26.91	23.79	413	511
Hora	3729644	4273099	25.71	14.57	2542	2913
Hugli	4355230	5041976	22.43	15.77	1383	1601
WEST BENGAL	68077965	80176197	24.73	17.77	767	903

From the table above, we can see that in Kolkata though the Decennial growth rate is not as high as other districts and it has fallen considerably from 1991 to 2001, however, the density of population per sq Km in Kolkata is phenomenally high: While the state of West Bengal had an overall population density of 903 in 2001 the population density of Kolkata district in 2001 was 24,718.

With such soaring population figures it is evident that there must be a heavy demand for Health care infrastructure in the state. Table 1.2, gives an overview of the health care facilities available to the people of West Bengal provided by the state as well as the central government.

Table 1.2 Medical Institutions in West Bengal

Hospital/health centres under the family welfare	Number of hospital/health centres	Total number of beds sanctioned
Medical college and hospital	9	11130
District hospital	15	7402
State general hospital	45	8926
Other hospital	32	4019
Rural hospital	35	7553
Block primary health centres	96	3554
Primary health centres	252	4774
Sub centres	921	5593
Hospital under other dept. of the state govt.	10356	0
Hospital under the local bodies	67	6044
Hospital under the govt of India	31	960
Hospital which are NGO/privet	58	6235
Sub divisional	1789	29891
Total	13706	96081

Source: West Bengal Health Department Website

From the above table and keeping in mind the population of West Bengal mentioned in the earlier table, it can easily be discerned that there is a serious shortage in infrastructure especially hospital beds available to the citizens of West Bengal. It should also be noted that the Private or NGO hospitals supply the most number of beds in West Bengal.

Table 1.3 : Population served per bed in select districts in West Bengal

District	Estimated population 2007			Total Number			Population Served per bed		
	Rural	Urban	Total	Beds		Total	Population Served per bed		
				Rural	Urban		Rural	Urban	Total
Bankura	3239857	245254	3485111	914	2572	3486	3545	95	3640
Burdwan	4763706	2655382	7419088	1337	7503	8840	3563	354	3917
Birbhum	3020271	269411	3289682	914	1714	2628	3304	157	3461
Darjeeling	1192705	5425668	6618373	441	3909	4350	2705	139	2844
Hooghly	3674526	1759534	5434060	924	4724	5648	3977	372	4349
Howrah	2323656	2243521	4567177	613	3882	4495	3791	578	4369
Kolkata	0	4767375	4767375	0	25698	25698	0	186	186
Total			35575466			55145			646

Source: West Bengal Health Department Website

Table 1.3, reveals some disturbing statistics about the availability of health facilities to resident of the state. The condition in the rural areas is far worse in the districts throughout the state. In the capital city/district of Kolkata which has the lowest number of people served per bed still has an extremely high figure of 186 people for one bed, while the total figure for the state of West Bengal is 646 people served per bed.

How many critical patients are being admitted in the hospital?

During the audit of CAG on the health and family department, government of west Bengal, it was found that patients were only diagnosed with the problem but were not admitted into the hospital for proper medical treatment.

Although, it was difficult to calculate how many patients were not being admitted into the hospital during a day, Data has been found on how many critical patients were not admitted in the hospital from January 2003 to December 2006.

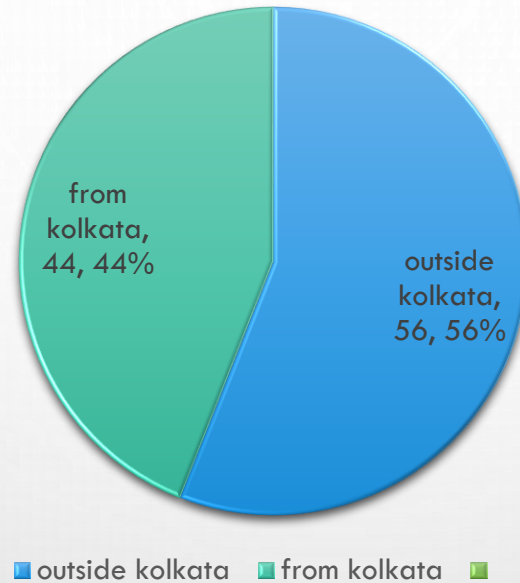
Name of the medical college and Hospital	Total critical patients attending emergency (in lakh)	Number of the patients admitted (in lakhs)	Percentage of admission emergency patients
CMCH	3.67	1.75	47.68=48
NRSMCH	2.57	1.00	38.91=39
RGKMCH	4.50	1.03	22.88=23
SSKMH (Pg. hospital)	3.55	0.38	10.74=11
Midnipur MCH	1.88	1.45	77.12=77

Source: CAG performance audit report on the Health and Family Department, Government of West Bengal

SSKM hospital was only able to admit 11% of the critical patients who were brought to the emergency ward. This clearly indicates that the hospital cannot support the huge demand on its resources and has the lowest admittance rate among the 5 hospitals which were reported. Due to unavailability of beds, patients have to be redirected in critical condition to other hospitals.

Where are the patients coming from?

According to the west Bengal health report bulletin 2019 ,it was found that 44% of the patients came from municipal areas to the Kolkata for proper treatment.



Source: West Bengal Health report bulletin,2019

This data can be used to infer two things. Firstly, the hospitals and other medical care centers in other parts of the state are not functioning effectively and hence people from other areas have to visit the hospital in the city. A large number of patients from state hospitals are sent as referral cases to SSKM and other city hospital Secondly, the SSKM hospital itself has to cater not only to the people in Kolkata but also from people outside the city which is creating an immense pressure on its resources. It is because of this that the hospital cannot give timely medical assistance to the people of the city or to the people who travel all the way to the city.

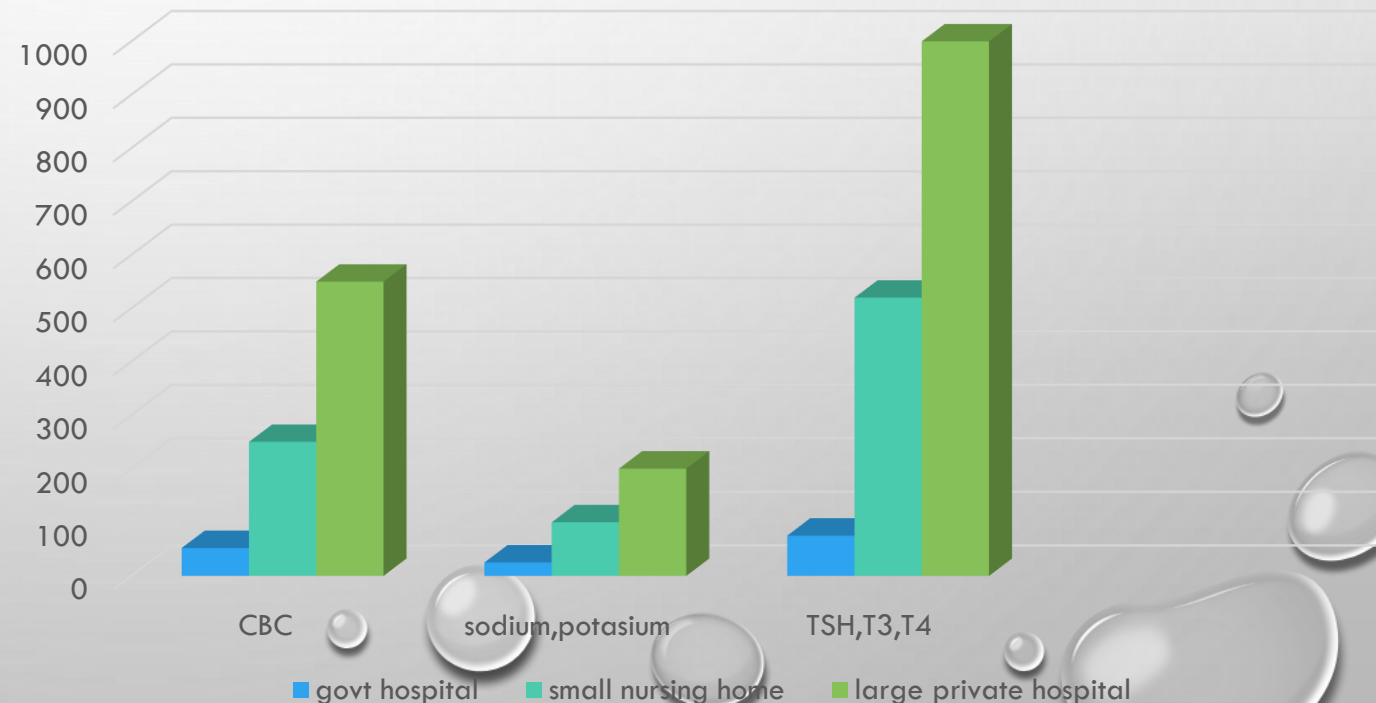
Cost Comparison with Private Healthcare Institutes

One of the reasons behind the excess demand on the SSKM hospital and public hospitals in west Bengal in general is the lower cost at which these public hospitals provide services to patients. There is definitely no dearth of private nursing homes and hospitals in west Bengal but in the sense of cost comparison between the private and public hospital there have huge difference .

So this purpose three investigation tests a regular blood test, x ray and a Sonogram for OPD patients were compared in the SSKM hospital, a small nursing home and a private large hospital in this report. The bar diagram below reveal the difference the costs between the three medical institutions.

Blood report charges comparison

	govt hospital	small nursing home	large private hospital
CBC	52/-	250/-	550/-
sodium,potasium	25/-	100/-	200/-
TSH,T3,T4	75/-	520/-	1000/-



Source of MCH data: Government of West Bengal document on fixation of hospital charges for government hospital

Source of private hospital data: Google search

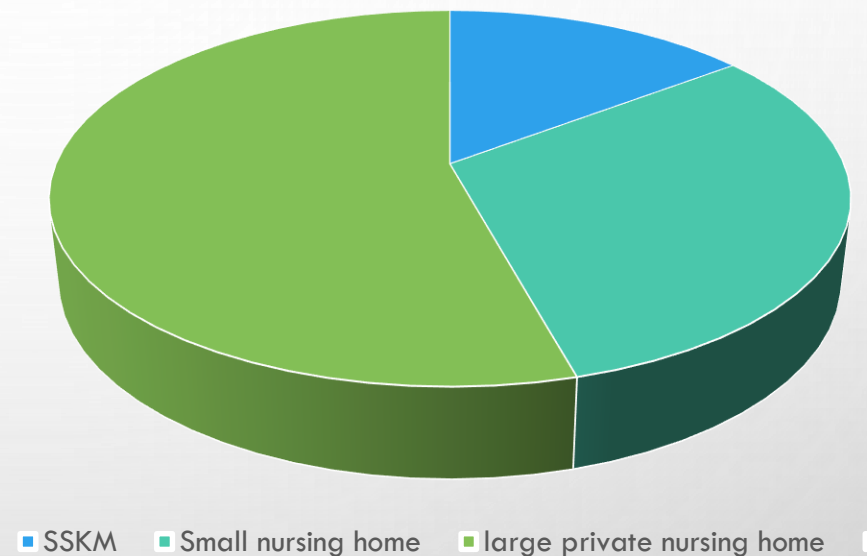
X Ray Charges

Similarly, the cost of an ordinary X ray in a Public MCH and nursing home and a digital X Ray in a large private hospital were compared. The pie chart below shows the results of the comparison:

Cost Comparison of a X Ray

	Xray charges in rupees
SSKM	95
Small nursing home	200
large private nursing home	350

Xray charges in rupees



Source of MCH data: Personal Survey Government of West Bengal document on fixation of hospital charges for government hospital

Source of private hospital data: Dr.Mithun Sarkar, member of the All India Medical Association Kolkata

CONCLUSION

THIS PAPER HAS ATTEMPTED TO SHOW CURRENT HEALTH INFRASTRUCTURE OF WEST BENGAL BASED ON CERTAIN PARAMETERS. GIVEN THE POPULATION OF THE CITY THE SEVERE DEMAND ON HEALTH SERVICES IS EXPECTED, HOWEVER IN THE CITY AT LEAST PRIVATE HEALTH CARE INSTITUTES INCLUDING BOTH LARGE PRIVATE HOSPITALS AND SMALL NURSING HOMES OUT NUMBER PUBLIC HOSPITALS DRASTICALLY -BUT THE DEMAND ON THE SERVICES OF THE PUBLIC HOSPITAL HAS NOT REDUCED DESPITE THE AVAILABILITY OF PRIVATE HEALTH CARE OPTIONS. ONE OF THE PRIMARY REASONS FOR THE EXCESS DEMAND ON PUBLIC HOSPITALS IS THE DIFFERENCE IN THE COST OF SERVICES WHEN COMPARED TO PRIVATE HEALTH CARE INSTITUTES. WHILE SERVICES IN GOVERNMENT HOSPITALS LIKE THE ONE SURVEYED ARE LARGELY SUBSIDIZED, PRIVATE HEALTHCARE IS LARGELY PROFIT ORIENTED AND HENCE MUCH MORE EXPENSIVE. THE FACILITIES IN THE PUBLIC HOSPITAL ARE OF POOR QUALITY, THERE HAVE BEEN REPORTS ON THE IRREGULARITY OF DOCTORS AND MEDICAL STAFF WHICH PLAGUE DESIRED EFFICIENCY OF THESE HOSPITALS. DESPITE OF THESE FACTS ONE MUST TAKE INTO ACCOUNT THE PRESSURE OF PROVIDING HEALTHCARE TO LAKHS OF PEOPLE ON EVERYDAY BASIS AS A MAMMOTH TASK. THE SSKM HOSPITAL IN KOLKATA IS ONE OF THE LARGEST REFERRAL HOSPITALS IN WEST BENGAL, HENCE WHEN MEDICAL CASES CANNOT BE SOLVED DUE TO LACK OF EQUIPMENT OR EXPERTISE IN A STATE OR DISTRICT HOSPITAL IN THE STATE, THE PATIENT IS ASKED TO VISIT SSKM IN THE CITY. THIS IS DESPITE THE FACT THAT ALL PUBLIC HOSPITALS IN THE CITY ITSELF DO NOT HAVE ENOUGH INFRASTRUCTURES TO CATER TO THE PEOPLE OF THE CITY ALONE. HENCE, THE POOR OF THE CITY AND THE STATE HAVE NO OPTION OTHER THAN TO UNDER GO THE PAINSTAKING LONG WAITING PERIODS IN PUBLIC HOSPITALS AT THE COST OF THEIR HEALTH SINCE THEY SIMPLY CANT AFFORD TO PAY FOR PRIVATE SERVICES. THIS IN TURN CREATES AN IMPOSSIBLE DEMAND ON THE PUBLIC HOSPITAL AND ONE WALK THROUGH A PUBLIC HOSPITAL CORRIDOR WHERE SICK PATIENTS LIE ON THE FLOOR INSTEAD OF BEDS AND WHERE PEOPLE INCHES AWAY FROM DEATH ARE ASKED TO WAIT FOR THEIR TURN, IS NOT A RARE SIGHT.

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