

A Study on Role of Health Care Management Streams

OPEN ACCESS

Manuscript ID:
ECO-2023-11036197

Volume: 11

Issue: 3

Month: June

Year: 2023

P-ISSN: 2319-961X

E-ISSN: 2582-0192

Received: 19.04.2023

Accepted: 25.05.2023

Published: 01.06.2023

Citation:

Perumal, S., and
S. Dhanasekaran.
“A Study on Role of
Health Care Management
Streams.” *Shanlax
International Journal of
Economics*, vol. 11, no. 3,
2023, pp. 26–30.

DOI:

[https://doi.org/10.34293/
economics.v11i3.6197](https://doi.org/10.34293/economics.v11i3.6197)



This work is licensed
under a Creative Commons
Attribution-ShareAlike 4.0
International License

S. Perumal

Ph.D. (Part Time) Research Scholar

PG & Research Department of Economics

Thiruvalluvar University Serkkadu, Vellore, Tamil Nadu, India

 <https://orcid.org/0009-0008-2735-5270>

S. Dhanasekaran

Assistant Professor, PG & Research Department of Economics

Thiruvalluvar University, Serkkadu, Vellore, Tamil Nadu, India

Abstract

Health care is the maintenance or improvement of health care via the prevention, diagnosis, treatment, amelioration, or cure of disease, illness, injury, and other physical and mental impairments in people. Health care is delivered by health care professionals and allied health care fields. Medicine, dentistry, pharmacy, midwifery, nursing, optometry, audiology, psychology, occupational therapy, physical therapy, athletic training, and other health professions are all part of health care. It includes work done in providing primary care, secondary care, and tertiary care, as well as in public healthcare. Access to health care may vary across countries, communities, and individuals, influenced by social and economic conditions as well as health care policies. Providing health care services means “the timely use of personal health care services to achieve the best possible health care outcomes. A limitation to health care services affects negatively the use of medical services, the efficacy of treatments, and overall outcome (well-being, mortality rates). An efficient health care system can contribute to a significant part of a country’s economy, development, and industrialization. Health care is conventionally regarded as an important determinant in promoting the general physical and mental health care and well-being of people around the world. An example of this was the worldwide eradication of smallpox in 1980, declared by the WHO as the first disease in human history to be eliminated by deliberate health care interventions.

Keywords: Health Care, World Health Origination (WHO), Primary Health Care (PHC).

Introduction

Health care systems are organizations established to meet the health care needs of targeted populations. According to the World Health Organization (WHO), a well-functioning health care system requires a financing mechanism, a well-trained and adequately paid workforce, reliable information on which to base decisions and policies, and well-maintained health facilities to deliver quality medicines and technologies. This ideal model of healthcare was adopted in the declaration of the International Conference on Primary Health Care held in Alma Ata, Kazakhstan in 1978 (known as the “Alma Ata Declaration”), and became a core concept of the World Health Organization’s goal of Health care for all management.

According to the World Health care Organization, is “a state of complete physical, mental and social well-being and not merely the absence of disease and infirmity”. A variety of definitions has been used for different purposes over time.

Health had been promoted by encouraging healthful activities, such as regular physical exercise and adequate sleep, and by reducing or avoiding unhealthful activities or situations, such as smoking or excessive stress. Some factors affecting health care are due to individual choices, such as whether to engage in a high-risk behavior, while others are due to structural causes, such as whether the society is arranged in a way that makes it easier or harder for people to get necessary healthcare services. Still other factors are beyond both individual and group choices, such as genetic disorders.

Objectives of The Study

- To provide technical support to the Department of Health care and Family Welfare for achieving Universal Health Care accessible to all citizens and to prioritize special groups.
- To promote healthy care living and to facilitate prevention, early detection and health care management of non-communicable diseases.
- To ensure provision of state-of-the-art Emergency Care Services, including medical, surgical (especially Trauma and Burn Care), paediatric and obstetric emergency care for all.

Methodology

The method of research adopted, the description of the tools and techniques used, the sample, the procedure of data collection and the outline of statistical techniques used in the analysis of data are described under appropriate heads.

Sources of Data

The present study is based on the both primary as well as secondary data. In order to achieve the objectives of the study the investigator used both primary and secondary data.

The necessary secondary data have been obtained from various published works such as books, reports, journal articles, magazines, periodicals, web materials. In addition to this the researcher has made use of the data and other information pertaining to growth, performance, functioning, achievements and evaluation of world health care management.

World Health Organization Definition

A healthcare system consists of all organizations, people and actions whose primary intent is to promote, restore or maintain health care. This includes efforts to influence determinants of health care as well as more direct health care -improving activities. A health care system is, therefore, more than the pyramid of publicly owned facilities that deliver personal health care services. It includes, for example, a mother caring for a sick child at home; private providers; behaviour change programmes; vector-control campaigns; health care insurance organizations; occupational health care and safety legislation.

A Healthcare System

Also known as health care system or healthcare system, is the organization of people, institutions, and resources that deliver health care services to meet the health care needs of target populations.

There is a wide variety of health systems around the world, with as many histories and organizational structures as there are nations. Implicitly, nations must design and develop health systems in accordance with their needs and resources, although common elements in virtually all health care systems are primary healthcare and public health care measures. In others, there is a concerted effort among governments, trade unions, charities, religious organizations, or other co-ordinated bodies to deliver planned health care services targeted to the populations they serve. However, health care planning has been described as often evolutionary rather than revolutionary. As with other social institutional structures, health care systems are likely to reflect the history, culture and economics of the states in which they evolve. These peculiarities bedevil and complicate international comparisons and preclude any universal standard of performance.

Primary Health Care, Or PHC

The ultimate goal of primary healthcare is the attainment of better health care services for all. It is for this reason that the World Health Organization (WHO), has identified five key elements to achieving this goal.

- Reducing exclusion and social disparities in health care (universal coverage reforms);
- Equitable distribution of health care – according to this principle, primary health care and other services to meet the main health care problems in a community must be provided equally to all individuals irrespective of their gender, age, caste, color, urban/rural location and social class.
- Health human resources development – comprehensive healthcare relies on an adequate number and distribution of trained physicians, nurses, allied health professions, community health care workers and others working as a health care team and supported at the local and referral levels.
- Use of appropriate technology – medical technology should be provided that is accessible, affordable, feasible and culturally acceptable to the community. Examples of appropriate technology include refrigerators for cold vaccine storage. Less appropriate examples of medical technology could include, in many settings, body scanners or heart-lung machines, which benefit only a small minority concentrated in urban areas. They are generally not accessible to the poor, but draw a large share of resources.

Approaches

The primary health care approach has seen significant gains in health care where applied even when adverse economic and political conditions prevail. The declaration did not have clear targets, was too broad, and was not attainable because of the costs and aid needed. As a result, PHC approaches have evolved in different contexts to account for disparities in resources and local priority health problems; this is alternatively called the Selective Primary Health Care (SPHC) approach.

- Biological factors, such as genes or brain chemistry
- Life experiences, such as trauma or abuse
- Family history of mental health problems

DIET

An important way to maintain one's personal health care is to have a healthy care diet. A healthy

care diet includes a variety of plant-based and animal-based foods that provide nutrients to the body. Such nutrients provide the body with energy and keep it running. Nutrients help build and strengthen bones, muscles, and tendons and also regulate body processes (i.e., blood pressure). Water is essential for growth, reproduction and good health care and include proteins, carbohydrates, and fats and fatty acids. (i.e., protein, fat, carbohydrates and sugars).

Sleep

Sleep is an essential component to maintaining health care. In children, sleep is also vital for growth and development. On-going sleep deprivation has been linked to an increased risk for some chronic health care problems. Additionally, in 2007, the International Agency for Research on Cancer, which is the cancer research agency for the World Health Organization, In 2015, the National Sleep Foundation released updated recommendations for sleep duration requirements based on age, and concluded that “Individuals who habitually sleep outside the normal range may be exhibiting signs or symptoms of serious health problems or, if done volitionally, may be compromising their health care and well-being.”

Role of Public Health Care

Public health care had been described as “the science and art of preventing disease, prolonging life and promoting health through the organized efforts and informed choices of society, organizations, public and private, communities and individuals. Public health has many sub-fields, but typically includes the interdisciplinary categories of epidemiology, biostatistics and health care services. Environmental health, community health care, behavioural health care, and occupational health are also important areas of public health care management.

Background

Health care-related policy and its implementation is complex. Conceptual models can help show the flow from health care-related policy development to health care-related policy and program implementation and to health care systems and health care outcomes. The health care policy process encompasses

decisions made at a national or decentralized level (including funding decisions) that affect whether and how services are delivered. Thus, attention must be paid to policies at multiple levels of the health care system and over time to ensure sustainable scale-up. A supportive policy environment will facilitate the scale-up of health care interventions.

- Government spending on health is essential for the accessibility and sustainability of healthcare services and programmes.
- For those people who would otherwise go without health care due to lack of financial means, any quality health care is an improvement.
- Since people perceive universal healthcare as free (if there is no insurance premium or co-payment), they are more likely to seek preventive care which may reduce the disease burden and overall healthcare costs in the long run.

Global Health Policy

Global health policy encompasses the global governance structures that create the policies underlying public health throughout the world. In addressing global health, global health policy “implies consideration of the health needs of the people of the whole planet above the concerns of particular nations.” Distinguished from international health policy (agreements among sovereign states) and comparative health policy (analysis of health policy across states), global health policy institutions consist of the actors and norms that frame the global health response.

Universal Health Care

A health care system in which all residents of a particular country or region are assured access to health care. It is generally organized around providing either all residents or only those who cannot afford on their own, with either health services or the means to acquire them, with the end goal of improving health outcomes.

Universal healthcare does not imply coverage for all cases and for all people – only which all people have access to healthcare when and where needed without financial hardship. Some universal healthcare systems are government-funded, while others are

based on a requirement that all citizens purchase private health insurance. Universal healthcare can be determined by three critical dimensions: who is covered, what services are covered, and how much of the cost is covered. It is described by the World Health Organization as a situation where citizens can access health services without incurring financial hardship.

Compulsory Insurance

This is usually enforced via legislation requiring residents to purchase insurance, but sometimes the government provides the insurance. Sometimes there may be a choice of multiple public and private funds providing a standard service (as in Germany) or sometimes just a single public fund (as in the Canadian provinces). Healthcare in Switzerland is based on compulsory insurance. Thus, a fund with a predominantly healthy, younger population has to pay into a compensation pool and a fund with an older and predominantly less healthy population would receive funds from the pool. In this way, sickness funds compete on price and there is no advantage in eliminating people with higher risks because they are compensated for by means of risk-adjusted capitation payments. Such as by requiring all citizens to purchase insurance or by limiting the ability of insurance companies to deny insurance to individuals or vary price between individuals.

Social Health Insurance

In a social health insurance system, contributions from workers, the self-employed, enterprises and governments are pooled into single or multiple funds on a compulsory basis. This is based on risk pooling. The social health care insurance model is also referred to as the Bismarck Model, after Chancellor Otto von Bismarck. The funds typically contract with a mix of public and private providers for the provision of a specified benefit package. Preventive and public health care may be provided by these funds or responsibility kept solely by the Ministry of Healthcare. Social health insurance is used in a number of Tamil Nadu countries and increasingly in India.

Private Insurance

In private healthcare insurance, premiums are paid directly from employers, associations, individuals and families to insurance companies, which pool risks across their membership base. Private insurance includes policies sold by commercial for-profit firms, non-profit companies and community health care insurers. Generally, private insurance is voluntary in contrast to social insurance programs, which tend to be compulsory. General tax revenue is currently used to meet the essential health requirements of all people.

- Health care systems should not be expressed in terms of their components only, but also of their interrelationships;
- Health care systems should include not only the institutional or supply side of the health care system but also the population;
- Health care systems must be seen in terms of their goals, which include not only health care improvement, but also equity, responsiveness to legitimate expectations, respect of dignity, and fair financing, among others;

Conclusion

Everyone needs to be well informed and concerned about the quality of health care. Everyone means patients and their families, consumer agents and advocates, health care professionals, administrators of health care plans and facilities, purchasers of health care services, and policymakers at all levels. It also means describing how health care plans, health care organizations, and clinicians should be accountable to patients and society and, conversely, how individuals can take appropriate responsibility

Author Details

S. Perumal, M.A., M.Phil., B.Ed., Ph.D. (Part Time) Research Scholar PG & Research Department of Economics, Thiruvalluvar University Serkkadu, Vellore, Tamil Nadu, India, **Email ID:** perumalskp@gmail.com

Dr. S. Dhanasekaran., M.A., M.Phil., Ph.D., Assistant Professor PG & Research Department of Economics, Thiruvalluvar University Serkkadu, Vellore, Tamil Nadu, India.

for their own healthcare management, particularly strategies emphasizing the role of the patient in managing chronic diseases (i.e., self-health care management). If not, what research agenda should be pursued to provide critical information about the relationship between types of health care systems and the processes and outcomes of care delivered to populations with serious chronic conditions.

References

- Cross, Harry, et al. *Reforming Operational Policies: A Pathway to Improving Reproductive Health Programs*. Policy Occasional Paper No. 7, 2001.
- Hardee, Karen, et al. *The Policy Dimensions of Scaling Up Health Initiatives*. Health Policy Working Paper No. 2, 2012.
- Khan, Mohd Iqbal, and Amit Banerji. "Health Care Management in India: Some Issues and Challenges." *Journal of Health Management*, vol. 16, no. 1, 2014, pp. 133-47.
- Lu, Chunling, et al. "Public Financing of Health in Developing Countries: A Cross-National Systematic Analysis." *The Lancet*, vol. 375, 2010.
- Shetty, Sham Ranjan, et al. "The Role of Health Insurance and Managed Care in India." *International Journal of Management*, vol. 11, no. 12, 2020, pp. 679-92.
- Singh, Nihaal, et al. "The Past, Present, and Future of Health Economics in India." *Journal of Family Medicine and Primary Care*, vol. 11, 2022.
- Tiwari, Ritika, et al. "Health Management Workforce for India in 2030." *Frontiers in Public Health*, vol. 6, 2018.