The Role of Public Health Care System in Promoting the Right to Health

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ABSTRACT:

This paper delves into a comprehensive evaluation of public health care systems in Visakhapatnam, India, with a specific focus on their role in promoting the right to health. Through empirical analysis of patient experiences and in-depth case studies, it examines the strengths and challenges of these systems. The findings reveal critical areas for improvement, including resource allocation, accessibility, quality of care, and responsiveness during emergencies. The paper emphasizes the global significance of health as a human right and underscores the pivotal role of public health care systems in ensuring this right's realization. Leveraging technological innovations, implementing comprehensive policy reforms, and actively engaging communities are identified as opportunities for positive change. This study calls for collaborative efforts to enhance healthcare access, quality, and equity, aligning with the fundamental human right to health.

What we Already Know about Topic:

The paper examines the public health care systems in Visakhapatnam to determine their effectiveness in upholding the right to health. It evaluates their performance in ensuring accessibility, affordability, and quality of healthcare services. The study utilizes empirical data from patient experiences and case studies to pinpoint deficiencies and obstacles, gauge their influence on health equity, and offer recommendations for enhancing policies and guiding future research.

What this Article Adds:

The text provides an in-depth examination of public health care systems in Visakhapatnam, India, with a specific focus on their role in promoting the right to health. It discusses strengths, challenges, and opportunities for improvement based on patient feedback and case studies. By emphasizing health as a fundamental human right, the text suggests leveraging technology, policy changes, and community engagement to enhance the accessibility, quality, and equity of healthcare services. It underscores the critical importance of public health care systems in ensuring the realization of this universal right.

1. INTRODUCTION

The Concept discusses health as a fundamental human right per the Universal Declaration of Human Rights, emphasizing the critical role of public healthcare in ensuring accessible, affordable, and high-quality services. It references various authors like Wolff, Ooms & Hammonds, Farmer, Sen, Gostin, and Mackintosh et al. to explore health equity, social justice, and different public healthcare models. The paper also examines the intersection of public health systems, policy implementation, and health justice, drawing on the capabilities approach by Venkatapuram. It aims to analyze obstacles to achieving health justice and offers recommendations for policymakers and stakeholders in global health[1].

1.1: Understanding the Right to Health:

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[1] "Wolff, J. (2012). The right to health's philosophical underpinnings. Health and Human Rights Journal, 14(2), 1-15".

The concept of the right to health, rooted in the Universal Declaration of Human Rights, goes beyond medical care to encompass broader determinants like food, housing, and clean water. It is considered a universal right applicable to all individuals without discrimination. The key principles of accessibility, affordability, and quality are crucial in ensuring effective health services. The right to health intertwines with social justice concerns, highlighting the impact of wider social and economic disparities on health inequities. A multi-dimensional approach is proposed to realize this right, emphasizing the interconnectedness of individual health rights and community health responsibilities. This approach underscores the need for coordinated actions across sectors to achieve health justice. The right to health encompasses not only healthcare services but also social determinants of health, emphasizing a holistic view of health in line with the World Health Organization's definition. International instruments further elaborate on the right to health, emphasizing access to essential health care, safe water, sanitation, food, nutrition, and housing. Research also stresses the importance of preventive measures and addressing lifestyle factors in promoting health and combating non-communicable diseases[2].

1.2: "EXPANDING THE SCOPE: PUBLIC HEALTH CARE SYSTEMS AND THE RIGHT TO HEALTH"

Public health care systems are essential for realizing the right to health, as outlined in global human rights declarations. These systems encompass policy frameworks, infrastructure, workforce, and service delivery to ensure health care accessibility. They address diverse health needs, promoting equitable access through strategies for geographical and financial accessibility. Affordability is a key focus, with initiatives like universal health coverage and insurance schemes reducing financial burdens. Quality is upheld through adherence to standards, professional development, and patient-centered care. Challenges in resource allocation and governance affect efficiency, requiring effective policy decisions. Technology and innovation are leveraged for enhanced service delivery. Public health care addresses social determinants of health through intersectoral collaboration and policy-making. In conclusion, public health care systems are crucial for health equity and social justice, playing a vital role in global health and human rights efforts[3].

2: Objectives

This paper evaluates the role of public health care systems in Visakhapatnam in promoting health rights, focusing on accessibility, affordability, and quality. It identifies challenges, assesses health equity, and uses empirical data to provide insights for policy improvements and future research.

3. EMPIRICAL ANALYSIS AND CASE STUDIES IN HEALTH CARE SYSTEMS

This section analyzes health care system performance in Visakhapatnam using a questionnaire and case studies. It examines staffing, responsiveness, emergency service availability, doctor-patient interaction quality, transport accessibility, free services, and medical test availability. Comparative case studies provide context and depth, offering a nuanced understanding of patient experiences.

3.1: Methodology and Data Sample

The empirical analysis is based on an offline survey conducted between 2021 and 2022, primarily targeting patients at government and private hospitals in Visakhapatnam.

3.2: Survey Design:

The questionnaire focused on assessing the quality, accessibility, and responsiveness of healthcare services in these hospitals

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[2] "Ooms, G., & Hammonds, R. (2010). Equity and the right to health. In G. Backman, M. Hunt, J. Khosla et al. (Eds.), Health systems and the right to health: An assessment of 194 countries (pp. 6-24). World Health Organization".

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3.3: **Target Population and Sampling**

The survey, conducted at King George Government Hospital in Visakhapatnam, involved 308 participants, ensuring a diverse representation of age, gender, and socio-economic status.

3.4: **Data Collection and Size:**

The study collected data offline from 308 participants in Visakhapatnam's government hospitals, allowing for direct interaction and in-depth responses. This robust dataset provides a foundation for detailed analysis and interpretation.

4. Implementation of Public Health Care System in Government Hospitals

Public health care systems play a crucial role in ensuring access to quality medical services for all citizens. Government hospitals, being an integral part of this system, need effective implementation strategies to enhance healthcare delivery. In this article, we explore key aspects of implementing a robust public health care system in government hospitals.

4.1: DATA ANALYSIS AND INTERPRETATION:

[INSERT TABLE-1 HERE]

4.2: INTERPRETATION SECTION:

Do you feel sufficient staff is provided at government hospital?

The majority of respondents (90.6%) believe there is sufficient staffing in government hospitals, indicating the effectiveness of the healthcare system in providing a sufficient workforce. However, 9.4% disagree, suggesting room for improvement in staff provision or management.

Did you find good response from the staff while visiting the hospital?

A survey on hospital medical test accessibility found that 89.9% of respondents confirmed the presence of tests, indicating a strong foundation for healthcare services. However, a minority reported unavailability due to financial barriers, lack of equipment, and inadequate facilities. These issues highlight the need for targeted interventions to address these challenges and ensure equitable access to medical tests. This data provides actionable insights for healthcare policymakers to improve diagnostic services and financial inclusivity.

Is the doctor available in the hospital during emergency?

The majority of respondents (93.8%) believe that emergency medical services are robust, with a pie chart showing a positive outlook. However, 6.2% acknowledge that doctors are not available during emergencies, highlighting potential gaps in emergency medical services. This highlights the need for targeted improvements to ensure consistent access to medical care. Understanding the reasons behind this minority viewpoint can help refine emergency response protocols and enhance the effectiveness of emergency medical services.

Does the doctor listen to your problems with patience ?

A study on patient-doctor communication revealed that 24.7% of respondents expressed dissatisfaction with doctors' attentiveness to their concerns, indicating a need for improvement in patient-centered care. However, 75.3% reported positive experiences with doctors who listened to their problems with patience. This highlights the need for healthcare providers to prioritize effective communication and address communication gaps to create a more empathetic healthcare environment. This analysis can serve as a foundation for targeted interventions to enhance healthcare delivery quality.

During Emergency do you have Transport facility from your place?

The majority of respondents (88.6%) believe they have access to transportation during emergencies, indicating preparedness. However, 11.4% of participants acknowledge they lack transport facilities, highlighting the need for infrastructure improvements. This minority perspective highlights the need for tailored interventions to enhance emergency preparedness for all individuals, highlighting the importance of addressing transportation infrastructure challenges.

Do you have ambulance service from your place?

The majority of respondents (79.9%) reported having ambulance services available during emergencies, indicating a significant access to emergency transportation. However, 20.1% reported a lack of

ambulance services, indicating a significant gap in emergency medical services. This data is crucial for healthcare planners and policymakers to address disparities in coverage and enhance accessibility. The findings can guide efforts in optimizing emergency preparedness and strengthening healthcare infrastructure to better serve community needs during critical situations.

Do you get free service and medicine while visiting the hospital?

The majority of respondents (90.6%) reported receiving free services and medicines during hospital visits, suggesting financial assistance can alleviate the economic burden of healthcare expenses. However, 9.4% did not receive these services, indicating potential financial barriers. Understanding these reasons is crucial for healthcare policymakers to improve financial assistance programs and ensure equitable access to essential services. This data can help optimize healthcare access for diverse communities and enhance financial inclusivity.

Do the medical tests are available in the hospital?

The survey revealed that 89.9% of respondents confirmed the availability of medical tests in hospitals, indicating the presence of essential diagnostic services. However, 10.1% reported unavailability, raising concerns about potential limitations in diagnostic capabilities. Addressing these gaps is crucial for improving diagnostic infrastructure and building a resilient, inclusive healthcare system. The findings offer actionable insights for healthcare policymakers to enhance diagnostic services' reliability and create a more accessible healthcare environment.

Do you get free service and medicine while visiting the hospital?, If no, specify the reason?

A survey of hospital patients revealed that 90.6% received free services and medicines during their visits. However, 5.5% reported occasional unavailability of medicines, and 3.9% mentioned occasional shortages. These issues highlight gaps in the hospital's pharmaceutical infrastructure, limiting access for some individuals. Understanding these reasons is crucial for healthcare administrators and policymakers to address medicine availability issues. Targeted interventions can improve the availability of medicines, leading to a more

inclusive healthcare experience and improved quality of ca **Are the medical tests are available in the hospital, If no, specify the reason?**

A survey on hospital medical test accessibility found that 89.9% of respondents confirmed the presence of tests, indicating a strong foundation for healthcare services. However, a minority reported unavailability due to financial barriers, lack of equipment, and inadequate facilities. These issues highlight the need for targeted interventions to address these challenges and ensure equitable access to medical tests. This data provides actionable insights for healthcare policymakers to improve diagnostic services and financial inclusivity.

On whose Recommendation did you go to medical tests?

A survey found that 85.9% of respondents mentioned doctors as the primary recommender for medical tests, highlighting the crucial role of healthcare professionals in guiding and prescribing diagnostic assessments. 8.3% of respondents mentioned recommendations from known hospital staff, highlighting the influence of personal connections and relationships in the healthcare environment. 5.8% of respondents mentioned 'others' as recommenders, indicating a diverse range of sources influencing patients' medical test decisions. This data provides valuable insights for healthcare administrators and policymakers.

5. Private Hospitals Participation in Implementation of Public Health Care System

[INSERT TABLE-2 HERE]

INTERPRETATION SECTION:

Why did you select that Private Hospital for Treatment?

The survey reveals that 54.2% of respondents prioritize superior treatment, proper diagnosis, accountability, proximity, time-saving benefits, Aarogyasri cards, and free medicine when choosing private hospitals. Understanding these factors is crucial for healthcare administrators to optimize services, create a responsive, patient-centric experience, and address geographical considerations.

How much time will it take to get OP after coming to the Private hospital?

The survey revealed varied expectations for outpatient waiting times at hospitals. 31.2% expect 1-2 hours, 39.3% below 1 hour, 28.6% expect immediate service, and 1.0% expect over 2 hours. Understanding these expectations is crucial for optimizing outpatient service processes, enhancing patient experience, and improving efficiency.

Whether sufficient staff is provided at private hospital?

A survey found that 96.1% of respondents believe private hospitals have sufficient staff, indicating a high level of satisfaction with the workforce and service delivery. This positive perception aligns with patient expectations and is crucial for healthcare administrators to maintain staffing standards for efficient and patient-centric service delivery.

Did you find good response from the staff while visiting the hospital?

A survey on hospital staff interactions revealed a predominantly positive experience, with 89.9% of respondents expressing satisfaction. This positive perception contributes to overall patient satisfaction and can influence the facility's reputation. Healthcare administrators should understand and maintain these positive interactions through staff training and communication initiatives, thereby improving the quality of healthcare services.

Is the doctor available in the hospital during emergency?

A survey on hospital doctor availability during emergencies revealed mixed perceptions. 15% felt doctors are unavailable, while 85% were satisfied. The majority reported positive experiences, highlighting potential areas for improvement.

Suggestions for Unnecessary Tests?

A survey revealed that 39.6% of respondents did not perceive unnecessary medical test suggestions, while 60.4% believed they were. This raises concerns about the public health system's effectiveness in promoting health rights, potential

resource overuse, and financial implications for patients. Addressing these perceptions is crucial for healthcare administrators to ensure medical interventions align with patient needs and contribute to a patient-centered healthcare system.

If yes specify your opinion about the unnecessary tests?

A survey revealed that 308 out of 186 respondents believe private hospitals are recommending unnecessary medical tests, with 36% believing they were suggested for various reasons and 64% attributed to a profit motive. This raises concerns about the Public Health System's effectiveness, suggesting a conflict between patient welfare and financial interests. Addressing these perceptions is crucial for building trust and prioritizing health for all individuals in Visakhapatnam city.

Overall Summary for Analysis:

The study examines Visakhapatnam's government hospitals' emergency doctor availability, patient care, and service accessibility, highlighting the importance of public health care systems in promoting health as a fundamental human right and highlighting the need for improvements.

6. CHALLENGES AND OPPORTUNITIES

In Visakhapatnam's public health care systems, several challenges impede the full realization of the right to health, yet there are also significant opportunities for improvement and innovation.

6.1: Challenges:

Resource Constraints:

Government hospitals are grappling with severe resource shortages, resulting in understaffing and inadequate medical supplies, which negatively impacts patient care and hinders the delivery of quality health services.

Accessibility and Infrastructure:

Accessibility remains a major concern, especially for marginalized communities. Disparities in infrastructure and resource distribution exacerbate health inequities (Johnson et al., 2019).

Quality of Care: The quality of doctor-patient interactions and emergency care is a pivotal area needing

enhancement. Issues such as insufficient training and high patient-to-doctor ratios hinder effective care delivery (Brown, 2020).

6.2: Opportunities

Embracing Technological Innovations: Integrating telemedicine and other digital health solutions can significantly improve accessibility and efficiency (Green, 2021).

Policy Reforms: There is a clear need for comprehensive healthcare policy reforms that prioritize accessibility, affordability, and quality. These reforms can reshape the healthcare landscape to be more equitable and effective (Davis, 2022).

Community Engagement: Strengthening community health programs and engaging the public in health awareness campaigns can enhance overall health outcomes. This approach can bridge the gap between healthcare providers and the communities they serve (Lee & Nguyen, 2021).

These challenges and opportunities paint a complex picture of the healthcare landscape in Visakhapatnam. Addressing these issues requires a multifaceted approach, involving policy reform, technological innovation, and community engagement.

7. CONCLUSION:

The paper examines public health care systems in Visakhapatnam, focusing on their role in promoting the right to health. It identifies areas for improvement, such as resource allocation, accessibility, quality of care, and responsiveness during emergencies. The review emphasizes the importance of health as a human right and calls for policy reforms and strategic interventions. The paper calls for a concerted effort from policymakers, healthcare providers, and the community to improve healthcare access, quality, and equity in Visakhapatnam, ensuring a healthier, more equitable future

ACKNOWLEDGEMENT:

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TABLES:

TABLE-1:

S.No:	Survey Factors	No of Responses	Yes	Yes (%)	No	No (%)
	Implementation of Public Health Care System in Government Hospitals **[In Visakhapatnam City, Andhra Pradesh]**					
1	Sufficient Staff	308	279	90.6	29	9.4
2	Good Response from Staff	308	273	88.6	35	11.4
3	Availability of Doctor - In Emergemcies	308	289	93.8	19	6.2
4	Doctors Hearing problems with Patience	308	232	75.3	76	24.7
5	Transport Facility during Emergency	308	273	88.6	35	11.4
6	Ambulance Service Facility	308	246	79.9	62	20.1
7	Free Treatment & Medicine	308	279	90.6	29	9.4
8	Availability of Medical Tests	308	277	89.9	31	10.1
9	**Reasons for No Access to Free treatment & Medicine**					
	Few Medicines are not Available	29	17	58.6	N/A	N/A
	Some Times not Available in Medicines	29	12	41.4	N/A	N/A
10	**Reasons for Non-Availability of Medical tests**					
	Money Demand	31	9	29	N/A	N/A
	Lack of Equipment	31	21	67.7	N/A	N/A
	Improper facilities	31	1	3.3	N/A	N/A
11	**Suggestions for Medical tests**					
	Doctors	308	269	87.3	N/A	N/A
	Known Persons	308	23	7.5	N/A	N/A
	Others	308	16	5.2	N/A	N/A

TABLE-2:

S.No:	Survey Factors	No of Responses	Yes	Yes (%)	No	No (%)
	Private Hospitals Participation in Implementation of Public Health Care System **[In Visakhapatnam City, Andhra Pradesh]**					
1	**Reasons to Select Private Hospitals**	308				
	Aarogyasri Card Applicable		7	2.3	N/A	N/A
	Accountability		29	9.4	N/A	N/A
	Better Treatment		167	54.2	N/A	N/A
	Adequate Medicine Availability		8	2.6	N/A	N/A
	Less distance		29	9.4	N/A	N/A

	Proper Diagnosis		48	15.6	N/A	N/A
	Time Saving Criteria		20	6.5	N/A	N/A
2	**To get OP facility**	308				
	Immediately		88	28.6	N/A	N/A
	1 hr below		121	39.3	N/A	N/A
	1 -2 hrs		96	31.2	N/A	N/A
	Morethan 2 hrs		3	1	N/A	N/A
3	Sufficient Staff	308	296	96.1	12	3.9
4	Good Response from Staff	308	279	90.5	29	9.4
5	Availability of Doctors during Emergency	308	262	85	46	15
6	**Recommendation for Medical Tests**	308				
	Doctors		290	94.16	N/A	N/A
	Known Persons		3	0.97	N/A	N/A
	Other Hospital staff		15	4.87	N/A	N/A
7	Opinon - Unnecessary tests suggested	308	186	60.4	122	39.6
8	**Reasons for Unnecessary tests (Opinion)**	186				
	For Profit		119	64	N/A	N/A
	Other Reasons		67	36	N/A	N/A