



COMPARATIVE HEALTH ANALYSIS IN YAMUNANAGAR CITY GOVERNMENT VS PRIVATE HOSPITALS

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ABSTRACT

In the recent decades the developing countries like India has started concentrating more on the health sector. Significant growth along with higher purchasing power of Indian has led to competition in Indian health care sector. The patient's perception of the services quality play an important role while choosing government or private hospitals. Therefore, the main objective of this study is to find out patients preferences for the health care services delivered by both government as well as private hospitals and different perceptions about the staff. Due to changes in demographic characteristics and living style of people in polluted environment of the city emerges many diseases. Being an industrial city peoples are also aware about their health problems.

Introduction

Hospitals is an institution which provides health like diagnosis and treatment of different diseases. Although the services provide by the government as well as private hospitals are almost similar but to some extent they play different role in providing services to patients. Public hospitals are easily affordable to public as they provide treatment at very low cost. On the other side, private hospitals are privately owned so that cost of treatment is very high but they provide quality treatment with personalized care to patients. Public hospitals are much larger occupy larger land with maximum facilities. Despite larger with complete infrastructure like number of beds. Medicines, equipment's, laboratory, doctors and nurses but unfortunately, public hospitals have lack of clean and maintained environment but in private they are of much concern about healthy environment for the patients. Public

hospitals are funded by the government and so they are unable to turn away patients. Conversely private hospitals can refuse treatment. However, by law they should treat an emergency cases firstly and only then the patients can be sent to the public hospital.

Despite the quality treatment is offered by private health care not all patients are able to afford private insurance can afford private insurance or fees for a treatment at private hospitals. While many public hospital sector face enormous pressure due to an influx of patients particularly if a patient requires immediate for particular treatment and have suspected serious illness. Private hospitals offer and excellent doctor to patient's ratio. A private hospital enable the patient to select their preferred surgeon, this is a big advantage since no one wants to risk his/her life. In public hospitals, you are in the hands of surgeon or an intern who is chosen per the hospitals shifts schedule (www.private vs *public hospitals*).

“The major task for suitable health care, which needs attention from policy makers, are appropriateness, comprehensiveness, adequacy, availability, accessibility, affordability, feasibility etc. (Singh, Giri, Mishra,2012)”. As a major component of social capital, the issues of health care services are one of the most essential services required by the inhabitants of an area as they reflect the conditions of health and ill health of the society (Armstrons, 2010). “Developing country like India, one of the serious lapses in the planning process has been the lack of understanding of the spatial or regional structure of the health care systems (Akhtar, 1993)”. Provision of basic health care services to the people is the primary objective of the government in the context of development. (Srinivasan,2006)”.

Study Area

Yamunanagar is a city and municipal corporation in Yamunanagar district in Haryana state. It is located at 30° 7'58" North and 77°17'16" East. River Yamuna is running through the district which forms the eastern boundary with neighbouring state Uttar Pradesh. According to census of India 2011 agglomeration had a population of 383318. This town was once part of district Ambala.

This became the new home of the refugees who migrated to this part of the country on the partition of the country in 1947. The place earlier knows as “Abdulpur” which was renamed by the city eminent people as Jamnanagar and later as yamunanagar. Basically this town is known for the cluster of plywood industries. The older town is called Jagadhri which is also called brass city famous for its brass and stainless steel utensils.

Now the city is turning up rapidly in every field like medical, education, administration, industries etc., it has many industries like paper mill, sugar mill, IGSEC engineering works, CPG limited etc. resulting pollution, which give rise to many diseases. In recent decades, due to the ever-increasing number of the people, the need of hospitals are also increasing. Present study was conducted the primary survey of two government hospitals (ESI and MLcivil) and two private hospitals (J.P. and Gaba). ESI hospital Jagadhari comprehensive medical care is being provided to insure persons and their dependent. ESI scheme is social security scheme is based on social security insurance. Social insurance scheme would protect the interest of workers in contingencies such as temporary or permanent disability resulting loss of earning capacity and death due to employed injury, sickness, maternity etc. Mukand Lal civil hospital is well equipped hospital play a critical role in health care infrastructure hospital provide 24 hours emergency care services and hence public perceive it is a vital resource for diagnoses and treatment for both physical and psychological care. It has also a developed trauma centre. JP hospital is private multi-super speciality institute. It brings together the best infrastructure technology and medical intelligences. Gaba is one of the largest multi-super speciality hospital in Yamunanagar district in Haryana. The hospital is equipped with diagnostic centre, ENT, blood bank, ultrasonography, radiology, diagnostic centre, general surgery general medicine, urology, paediatrics pathology. The hospital has envisioned with the aim of bringing to this region the highest standard of medical care along the clinical research, education and training. Gaba hospital has granted accreditation to train candidates in the speciality of general medicine Gynaecology and obstetrics. By the ministry of health and family welfare, govt of India for issue of DNB degree to the MBBS and PG Diploma Holders Doctors. Yamunanagar has a model hospital catering to the needs of people of not only Yamunanagar district but also its adjoining districts and state (www.yamunanagarhospitals.com).

Objective

In the present endeavour an attempt is made to evaluate the perception of the patients towards the availability and accessibility of health care infrastructure in government as well as private hospitals and several problems faced by the patients during treatment.

Data and methodology

The study is based on the primary data collected in March 2017 from two government hospitals namely, ESI hospitals and Mukand Lal Civil Hospital and two private hospitals namely, JP Hospital and GABA Hospital in Yamunanagar city. A detailed survey of the

hospitals were conducted and 25 samples from each hospitals were randomly selected. In all 100 respondents were interviewed using structured questionnaire to gather the required information. Statistical techniques were used to analyse the collected data.

Discussion and analysis

Background of patients

For the purpose of study 100 respondents were interviewed from four hospitals in which 46 percent were males and 54 percent were females. Maximum 52 percent of patients travelled less than 10 km, 27 percent patients were travelled more than 10 km and 21 percent were travelled more than 20 km in all hospitals. Maximum patients (56 percent) were travelled less than 10 km periphery in JP private hospital and followed by Gaba hospital ie. 52 percent. Both are private hospitals. In ML hospital maximum 44 percent patient were travelled more than 20 km. In ESI hospital only 8 percent patients were visited beyond 20 km (table 1). “There stands a relationship between distance and health care facilities as places which are nearer to the main service centres receive greater concentration of health care services. (Mathur, 1981)”. This has been observe during study. “When the people are far from the medical facilities the morbidity and mortality rates are high among these people as compared to the people who are closer to medical facilities. (Leisch.2010)”

As far education level of patients were concerned. Patient with primary education were 53 percent, 31 percent patients were educated up to higher secondary level only 16 percent patients were graduate. It is observer from the table that primary educated people were preferred government hospitals and highly educated patients were preferred private hospitals. It is also concern with their economic status. 64 percent of primary educated patient were follow the ESI hospital because medical care is being provided to insure persons and their dependent. 60 percent of primary educated patients were visited to private Gaba hospital because of its multi-super specialities for complicated disease. The patients suffering with serious disease like various type of cancer etc. were also visited to Gaba private hospital. It is one of the larger hospital in the city.

Age group of the patients

Due to the well-developed paediatric core unit the patient below 15 years were more in JP private hospital. Peoples are more concern and sensitive with their kids. They tried to provide best treatment. It is also observed during the survey that even people below poverty line also preferred JP hospital for their children. About 26 percent of the patient of 15-60 age

group were visited in Gaba hospital. This is again because of its multi-super speciality facilities provided latest new technology treatment. Maximum middle age group people are also start suffering some genetic and chronic diseases because of unhealthy living style. In Gaba hospital maximum patient belongs from middle class and higher class families. They have enough financial support for their treatment. It also serve as Trauma centre. Since ESI is a bigger hospital for employed or retired people therefore, the elderly people visited there for treatment. But due to lack of some modern facilities like highly equipped intensive care unit in ESI hospital 26 percent elderly patients also visited ML hospital for treatment. But these two public hospitals are mainly adopted by poor and middle class people (table 1).

Purpose of treatment of the patients

The respondent were grouped into three categories according to their purpose of treatment i.e medical check-up, surgery and counselling and rehabilitation. The highest number of patients (68 percent) for medical check-up were followed ESI public hospital. Because maximum medical check-up is required by the middle age group people mainly after the age of 40. And 52 percent were visited for medical check up in ML civil and private Gaba hospital and lowest percent (40) patients was in JP hospital. Patients for rehabilitation and counselling is only visited in private hospital JP (28%) and Gaba (24%). This is due to the complication of enquiries made by the government hospitals from the patients and their care takers. Maximum patients were adopted ML civil hospital for surgery because of low cost effect and minimum patients were adopted Gaba hospital due to high cost effect, otherwise, people preferred surgeries in private hospital. Because private hospitals enables the patients to select their preferred surgeon but in yamunanagar local and outsiders patients were preferred for their critical surgery in ML public hospital due to its quality, speciality and cost effectiveness. For minor surgery other hospitals were preferred.

Problems faced by the patients in the hospitals

Table 1 reveals that 40 percent perception of the patients towards the doctors was poor. The doctors of ML civil hospital are not punctual and 32 percent of nurses are not on time. This is may be due to the shortage of staff and excess work load. In spite that patients were preferred their surgery in ML public hospital. 32 percent respondent explained that required medicine are also unavailable in the this hospital. According to different perception of patient ESI hospital is comparative better than ML civil hospital. 72 percent of the patients gave the positive views about the availability of doctors 84 percent patients said that

cooperation of nurses are satisfactory in ESI hospital than ML hospital. Old age patients of ESI hospital explained about the sufficient medicine availability and other infrastructure.

In both government hospitals staffs were not sufficient and punctual. This is due to the shortage of staff, excess work load and lack of facilities. But 60 percent from ML hospital and 72 percent for ESI hospital patients gave positive response about staff cooperation and their polite behaviour. The situation was quite similar at both the private hospitals. The perception of respondents was very positive. Doctors and staff are very polite and cooperative. Patients of private hospitals felt the staff sympathetically attitude toward them.

Characteristics	Medical institute								Total	
	Government hospital				Private hospital					
	ESI hospital		Mukandlal hospital		J.P hospital		Gaba hospital		No	%
	No	%	No	%	No	%	No	%		
<i>Sex</i>										
Male	11	44	10	40	12	48	13	52	46	46
Female	14	56	15	60	13	52	12	48	54	54
<i>Age Group</i>										
Less than 15	-	-	01	8	2	12	2	8	5	0.5
15-13	7	28	6	28	2	12	4	16	19	19
30-45	7	28	7	32	7	32	8	32	29	29
45-60	5	20	04	20	5	24	8	32	21	21
Above 60	6	24	2	12	3	20	3	12	14	14
<i>Education</i>										
Illiterate	7	28	7	28	4	16	7	28	25	25
Primary	6	24	9	36	5	20	8	32	28	28
Secondary	6	24	5	20	9	36	5	20	25	25
Higher Education	2	8	1	4	5	20	3	12	11	11
Graduate & Above	4	16	3	12	2	8	2	8	11	11
<i>Cause of Treatment</i>										
Rehabilitation & Counselling	-	-	-	-	7	28	6	24	13	13

surgery	8	32	12	48	7	32	6	24	33	33
Medical Check up	17	68	13	52	8	40	13	52	51	51
<i>Distance covered by patients to hospitals (kms)</i>										
< 5	9	36	5	20	7	28	4	16	25	25
5-10	5	20	5	20	7	28	9	36	26	26
10-20	9	36	4	16	6	24	9	36	28	28
<20	2	08	11	44	5	20	3	12	21	21
<i>Problem Faced by the Patients</i>										
Availability of Doctors	18	72	15	60	25	100	25	100	83	83
Availability of required Medicines	22	88	17	68	25	100	25	100	89	89
Availability required Infrastructure	23	92	25	100	25	100	25	100	98	98
Availability of Required staff	21	84	17	68	25	100	25	100	88	88
<i>Problems of Amenities Faced by Patients</i>										
Canteen	12	48	19	92	25	100	25	100	81	81
Electricity/ generator	22	88	19	92	25	100	25	100	91	91
Drinking Water	21	84	14	72	25	100	25	100	85	85
Sanitary Facilities	22	88	18	84	25	100	25	100	90	90
Others (waiting hall, parking, wheelchair, Ambulance cleanliness etc.)	13	52	14	68	25	100	25	100	77	77

Source: Primary survey conducted by author

Problem of amenities faced by patients

Though the basic amenities are pre-requisite for the patients which increase the social capital of society. Amenities have long been relevant to the hospitals' competition, they seems to have increased in importance perhaps patients now have more choice in selecting hospitals. And the hospital market is blooming by making advertisements of its amenities, like that of 'five star hotels' in the country for exemple Max, Forties, Cignus, Apollo hospitals etc. The unavailability of basic amenities for the treatment numerous additive

problem. In study patients were asked about the availability of basic amenities like safe drinking water, canteen, toilet, electricity etc. Both the private hospitals fulfil the basic amenities of the patients. It is mainly due the market. If they don't provide the basic things to patients, patients will not visit their hospitals. But the condition was quite different in public hospitals. As revealed from the table, 72 percent respondents said that drinking water is safe in ML hospital and 16 percent patients' complaint about the sanitation. In ESI civil hospital condition is quite better than ML hospitals. Only 16 percent were complaint about safe drinking water and 12 percent were complaint for hygienic sanitation. Other facilities are also absent in both the public hospitals to some extent.

Conclusion and Suggestions

Being Yamunanagar is a big city and famous for its industrial growth. It is emerging as a major health care centre for increasing population. This city is developed by migrating population, earlier migration from Pakistan after partition and now a days from Bihar and Uttar Pradesh for employment . But government or local administration's efforts for medical facilities has not been able to keep pace with fast growing population. The health care facilities in both public hospitals is badly affecting the poor people who come to attain better and low cost treatments. Private hospitals provided better treatment. Patients were not faced problems like availability of doctors on time, staff, medicines and other basic amenities in private hospitals. But poor patients cannot afford the high cost treatments provided by the private hospitals. Only in complicated and serious case poor people were visited in private hospitals otherwise they follow the public hospitals for their treatment. Old people visited to ESI hospital.

Better health care management and planning is important to fulfil the health needs of the people in the city. Time to time the Union Minister of Health and Family welfare is announced special funds for the Cleanliness and sanitation of the hospitals. Cleanliness and sanitation of the hospitals is maintained by the strict cleanliness schedule with regular safai karmcharis and outsourced employees. Pest control work is regularly done. In this context special attention should made by the centre and state government and local administration for proper health planning.

References

- Akhtar, R., and Izhar, N.1986 a: Inequalities in the distribution of healthcare in India. In R. Akhtar & A. Learmonth (Eds), Geographical Aspects of Health and Disease in India. N. Delhi. Concept.
- Armstrons., R.W., 2010: Population health and Environment health as determinants of Socio-economic Development, In Akhtar,R., and Izhar.,N.(eds),Global Medical Geography, Jaipur, Rawat Publication,pp.335-345
- Lesisch., H, 2010: Medical Infrastructure and Demographic and Socio-economic Development in northern Thailand, In Akhtar,R. and Izhar.,N.(eds),Global Medical Geography, Jaipur, Rawat Publication,pp.346-360.
- Mathur.,H.S,1981 : Medical Facilities in the rural areas of Rajasthan: Spatial Perspectives, In Mishra.,B.N (eds), Rural Development in India: Basic Issues and Dimensions, Sharda Pustak Bhawan Allahabad,p.158-59.
- Singh.,S.N, Giri.,A.K., Mishra.,A.P,(January 2012) Impact Assessment & Analysis of Health Care Facilities in Varanasi City , A Geographical Perspective, Eastern Geographer,p.41-48
- Srinivasan., S. 2006: Health care Services in Rural India: Current status and future challenges, In Verma., S.B, Jiloka., S.K. Pathak., A. C, (eds) Rural health care and Housing, Deep and Deep publications, N. Delhi, pp.321-323.
- Srivastava., Saroj. 1993: Medical Geogrphy Saryupar Plain, Institute for Rural Eco-Development, Saumitra Publishers, Gorakhpur.