

NATIONAL HEALTH POLICY



Centurion
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Shaping Lives...
Empowering Communities...

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National:

- **National** is used to describe something that belongs to or is typical of a particular country or nation.



Health:

Health is a state of **complete physical, mental and social well-being** and **not merely the absence of disease or infirmity.**



Health
&
Wellness

POLICY: -

A course or principle of action adopted or proposed by an organization or individual.



STEPS FOR IMPLEMENTATION OF A POLICY: -

Identification and issue recognition.



Policy formulation.



Policy implementation.



Policy evaluation.

NATIONAL HEALTH POLICY

- National health policy in India was not framed and announced until 1983.
- The ministry of health and family welfare evolved a National Health Policy in 1983, keeping in view the national commitment to attain the goal **health for all** by 2000 A.D.
- The policy lays stress on the **preventive, promotive, public health and rehabilitation aspects of health care.**

NATIONAL HEALTH POLICY (1983):-

- To attain the objectives “**Health for all by 2000 AD**”, the Union Ministry of Health and Welfare formulated National Health Policy 1983.



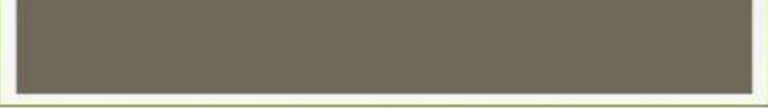
KEY ELEMENTS OF NATIONAL HEALTH POLICY 1983:-

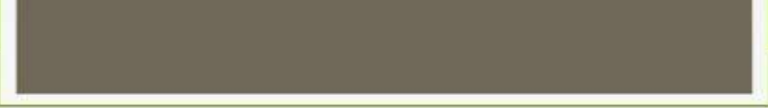
- Creation of greater **awareness of health problems** in the community and means to **solve the problems** by the community.
- Supply of **safe drinking water** and basic **sanitation** using technologies that people can afford.
- Reduction of existing imbalance in health services by **concentrating more on the rural health infrastructure**.

- Establishing of **dynamic health management** information system to support health planning and health program implementation.
- Provision of **legislative support** to health protection and promotion.
- Concerned actions to **combat** wide spread **malnutrition**.
- **Research** in alternative method of health care delivery and low cost health technologies.
- Greater **co-ordination** of different system of medicine.

FACTORS INTERFERING WITH THE PROGRESS TOWARDS HEALTH FOR ALL:-

- Insufficient political commitment to the implementation on *Health for All*.
- **Failure to achieve equity** in access to all primary health care elements.
- The continuing **low status of women**.
- Slow socio-economic development.

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- Difficulty in achieving intersectoral action for health.
 - **Unbalanced distribution** of and weak support for human resources.
 - Widespread **inadequacy of health** promotion activities.
 - **Weak health information** system and no baseline data.
 - Pollution, poor food, safety, and lack of water supply and sanitation.

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- Rapid demographic and epidemiological changes.
 - Inappropriate use of and allocation of resources, high-cost technology.
 - Natural and man-made disasters.

NATIONAL HEALTH POLICY

2001:-

Considering the kind and level of progress, the barriers and the change in health problems and the circumstances, the department of Health, Ministry of Health and Family Welfare felt it necessary to formulate a new health policy frameworks as National Health Policy 2001 (NHP 2001)-**The main objective of National Health Policy 2001 is to achieve acceptable standard of good health amongst the general population of the country.**

GOALS TO BE ACHIEVED BY 2000-2001 TO 2015:-

- | | | |
|--|---|-------------|
| ○ Eradicate Polio and Yaws | - | 2005 |
| ○ Eliminate Leprosy | - | 2005 |
| ○ Eliminate Kala- Azar | - | 2010 |
| ○ Eliminate Lymphatic Filariasis | - | 2015 |
| ○ Achieve zero level growth of HIV/AIDS | - | 2007 |
| ○ Reduce mortality by 50%
On account of TB, Malaria | - | 2010 |

- Other vector born and water born
Prevalence of blindness to 0.5% - **2010**
- Reduce IMR to 30/1000 and
MMR to 100/lakh - **2010**
- Improve nutrition and reduce LBW
Babies from 30% to 10% - **2010**
- Increase the utilization of Public Health
Facilities from current >20 to <75% - **2010**
- Establish an integrated system of surveillance - **2005**

National Health Accounts and Health statics:

- Increase health expenditure by government as a % GDP from 0.9 to 2% - **2010**
- Increase share of central grants to Constitute at least 35% of total Health spending - **2005**
- Increase State health spending From 5.5% to 7% of budget - **2010**

CURRENTS STAT'S

PROBLEM

STAT'S



Polio

Eradicated

Leprosy

.72/10,000

HIV/Aids

0.36%

Tuberculosis

1.8/100,000

Malaria

28.8/100,000

IMR

42/1000

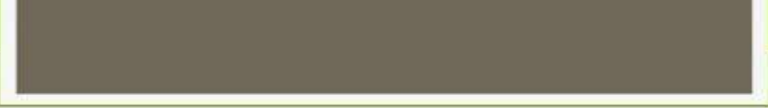
MMR

178/100,000

WHO'S CONTRIBUTION FOR HEALTH FOR ALL IN 21ST CENTURY:-

- Serve as the world's health advocate, by providing leadership for *Health for all* to all its member countries.
- Develop global, ethical and scientific norms and standards.
- Develop **international instruments** that promote global health.

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- Engage in **technical co-operative** with all countries.
 - Strengthen countries capabilities of **building sustainable health system** and improve the performance of essential public health functions.
 - **Protect the health** of vulnerable and poor communities and countries.
 - Faster the **use of** the innovation in **science and technology for health.**

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- Provide leadership for **eradication, elimination, or control** of selected diseases.
 - Provide technical support to **prevention of public health emergencies** and post-emergency rehabilitation.
 - Build partnership of health.

SHORT ANSWER TYPE QUESTIONS

- 1. Define health**
- 2. What is national health policy 1983.**
- 3. Write down the steps for implementation of a health policy**

LONG ANSWER TYPE QUESTIONS

- 1. Explain national health policy 2001 with its goals.**
- 2. Briefly explain WHO's contribution for 21st century health for all programme.**

