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Healthcare Information for all-Is it Achievable?

Yadav Sankalp^{1*} and Rawal Gautam²

¹General Duty Medical Officer-II, Chest Clinic Moti Nagar, North Delhi Municipal Corporation, New Delhi, India. Email: drsankalpyadav@gmail.com

²Attending Consultant, Critical Care, Rockland Hospital, Qutab Institutional Area, New Delhi, India. Email: drgautamrawal@hotmail.com

ABSTRACT:

The underdeveloped countries like India are facing a number of challenges. The effective healthcare system is still not available at the grass-roots level. The well-informed healthcare providers are still not available throughout the country. The most of the cases of preventable deaths can be stopped by the effective healthcare information to the caregivers and the citizens. The role of campaigns like Healthcare Information for All is very important in the proper dissemination of the basic healthcare knowledge to the masses.

KEY WORDS: Healthcare, Developing countries, Healthcare Information for All.

***Corresponding Author:**

Dr. Sankalp Yadav

General Duty Medical Officer-II, Chest Clinic Moti Nagar,

North Delhi Municipal Corporation, New Delhi, India,

Email: drsankalpyadav@gmail.com

INTRODUCTION:

Healthcare Information for All (HIFA), a non-profit organization based in the UK was launched in 2006. The aim of this campaign is for a world where people are no longer dying for lack of healthcare knowledge¹. Since its inception HIFA has grown leaps and bounds, with about 10,000 plus members all over the world. Also a number of organizations, in about 167 different countries support the noble cause, on which the HIFA is based. HIFA contributes to the broader goal of the Global Health Workforce Alliance: ‘All people everywhere will have access to a skilled, motivated and supported health worker, within a robust health system’¹. HIFA is a global forum, which provides space for professionals from all parts of the world to exchange views and share knowledge.

The HIFA is centered on improving the present state of the society, wherein the healthcare facilities are still not easily accessible to the poor and the underprivileged, due to the lack of healthcare education to the health workers. Even to the well to do sections of the society, healthcare information is not easily available. This leads to needless deaths and suffering. Most deaths are due to failure to provide life-saving interventions these are the interventions that are often locally available, but are simply not provided. The HIFA involves members from all over the world who interact with each other via email, discussion forums, which are presently available in three languages, in collaboration with WHO and others. The main motto behind these discussions is to encourage the spread of knowledge about healthcare services, so that nobody dies due to lack of the same.

DISCUSSION:

The underdeveloped and developing countries have by far been the most affected by the lack of healthcare information. The reasons are a lot, but mostly centered to poverty, lack of political commitment, illiteracy, corruption, lack of trained staff, ignorance, etc. The people of developing countries like India, where the population has crossed all its limits and is growing exponentially has always required campaigns like HIFA to help the underserved and innocent people deprived of the lack of healthcare information to health workers and citizens. The issues of preventable deaths are very serious and these deaths can be stopped by providing healthcare information to all. The author does not believe that India lacks facilities, but believes that healthcare information is not available to the healthcare workers and to the masses. The people of India are not able to use the health facilities to their best use due to lack of knowledge. The people of India are living in ignorance and thus the grave risk of

preventable deaths is at large. The dissemination of knowledge in the health realm is an absolute essential.

The authors insist that unless the people are having access to the healthcare information, India cannot call itself a developed nation. The country will develop only, if the mortality due to preventable causes is negligible. The roles of public and private companies are very important for the successful building of a nation, free of lack of knowledge about healthcare.

The private hospitals baring the few famous ones are mostly inclined at money making. These private hospitals are mostly the first place where the patient goes, due to long waitlist in the Government hospitals. The staff at Government hospitals is overburdened and mostly exhausted physically and mentally. These are some of the reasons which force an innocent patient to go to private hospitals. The lack of properly trained doctors and staff at the private hospital, thus completely drains the patient both financially and mentally. Besides, the staff in both public and private hospitals is deprived of basic healthcare knowledge.

Every day, tens of thousands of children, women and men die needlessly for want of simple, low-cost interventions. These interventions are often already locally available. A major contributing factor is that the mother, family caregiver or health worker does not have access to the information and knowledge they need, when it is absolutely required, to make appropriate decisions and to save lives². Wardlaw T et al. 2006 mentioned that, 8 out of 10 caregivers in developing countries are unaware of the two key symptoms of childhood pneumonia i.e. fast and difficult breathing, which indicate the need for urgent treatment, thus despite the wide availability of antibiotics only 1 in 3 children with pneumonia survives resulting in about and 1.6 million deaths each year^{3,4}. Similarly, only 1 out of 10 children with diarrhea in India receive adequate fluids to prevent death due to dehydration. Almost, 4 in 10 receive fewer fluids to drink than normal, thereby tragically increasing their risk of death. By contrast, more than 1 in 3 is inappropriately given antibiotics, which are not generally recommended for childhood diarrhea. Almost half of children with diarrhea in India are given little or no food, contrary to WHO recommendations. On contrary to WHO recommendations, a thousand children die needlessly from diarrhea every day in India alone, due to basic errors in care from parents and health workers⁵. Also, Mishra G, et al. suggested that more than 9 out of 10 prescriptions for tuberculosis in India are incorrect, resulting in wrong categorization, predisposing those patients and the general population to multi-drug-resistant tuberculosis in the future⁶. The international community is committed to: reduce child deaths

worldwide by two-thirds, reduce maternal deaths worldwide by three-quarters, and reverse the spread of HIV/AIDS, malaria and other major diseases, and provide universal access to treatment for HIV/AIDS⁷. These will only be achieved if healthcare providers are better supported to deliver safe, effective care. Pakenham-Walsh N and Bukachi F in their paper, ‘Information needs of health care workers in developing countries: a literature review with a focus on Africa’ highlighted the problems in developing nations like Africa; most of this applies to India as well⁸.

There is an urgent need to improve the availability and use of healthcare information in developing countries. This can be achieved by encouraging the involvement of the masses in the HIFA campaign. As more and more number of people get involved with HIFA, the discussions on the healthcare forums will increase. This will not only help in the spread of healthcare information, but will help control the preventable deaths. Pakenham-Walsh N 2012, also mentioned about the problems and solutions to the healthcare workers in low-Income countries⁹.

In the year 2004 Godlee F,et al, published ‘Can we achieve health information for all by 2015?’ the answer is yes, but only if we work hard to involve the masses and create awareness by means of campaigns such as the HIFA campaign¹⁰. The goals of HIFA can only be achieved by active participation in discussion forums, thereby encouraging citizens to join HIFA and developing an effective way to disseminate the knowledge, in a cheaper and easier way. The WHO and other similar prestigious organizations are working in collaboration with HIFA to achieve the healthcare information for all.

CONCLUSIONS:

The HIFA campaign focuses on the information needs of healthcare providers, but clearly the full range of needs must be met to ensure high quality care. HIFA is continually seeking to promote and strengthen links with initiatives that address these needs, as well as those that address broader issues of health, human rights and international development.

HIFA and the Millennium Development Goals are ambitious challenges, but they can be achieved if all stakeholders work together¹⁰. The HIFA strategy will take us through 2015 and beyond towards the HIFA Vision: Every person and every health worker will have access to the healthcare information they need to protect their own health and the health of those for whom they are responsible.

REFERENCES:

1. People are dying for lack of knowledge [online]. 2015 [Cited 2015 March 19] Available from: URL: <http://www.hifa2015.org/>.
2. Why HIFA is needed [online]. 2015 [Cited 2015 March 19] Available from: URL: <http://www.hifa2015.org/about/why-hifa2015-is-needed/>.
3. Wardlaw T et al. Pneumonia: the leading killer of children. Lancet 2006; 368:1048-50.
4. UNICEF. State of the World's Children 2012 [online]. 2015 [Cited 2015 March 19] Available from: URL: <http://www.unicef.org/sowc2012/fullreport.php>.
5. Ministry of Health and Family Welfare Government of India. National Family Health Survey (NFHS-3) 2005/6 [online]. 2015 [Cited 2015 March 19] Available from: URL: <http://www.rchiips.org/nfhs/nfhs3.shtml>.
6. Mishra G et al. Tuberculosis Prescription Practices In Private And Public Sector In India. National Journal of Integrated Research in Medicine 2013; 4(2):71-78.
7. Progress towards MDGs 4, 5 and 6 [online]. 2015 [Cited 2015 March 19] Available from: URL: http://www.wpro.who.int/publications/docs/MDG_Progress_2010_11_MDG456.pdf.
8. Pakenham-Walsh N & Bukachi F. Information needs of health care workers in developing countries: a literature review with a focus on Africa. Human Resources for Health 2009; 7: 30.
9. Pakenham-Walsh N. Towards a Collective Understanding of the Information Needs of Health Care Providers in Low-Income Countries, and How to Meet Them. Journal of Health Communication, 2012; 17(2):122-124.
10. Godlee F, Pakenham-Walsh N, Ncayiyana D, Cohen B, Packer A. Can we achieve health information for all by 2015? Lancet 2004; 364(9430):295-300.