Relying on serendipity is not enough
Building a resilient health sector in India

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Abstract
The novel coronavirus has caused a global public health crisis, and impacted countries irrespective of their development status. The health system preparedness has varied across countries, necessitating a hard look at how resilient health systems can be built to withstand the onslaught of sudden pandemics and epidemics. India has been grappling with the onslaught of COVID-19 since the last 6 months of the current year, bringing into focus the ability of its health system to withstand the pressures of dealing with such a pandemic. In this context, the paper analyses India’s health sector by focusing on infrastructure, personnel, financing and governance, to enable a better understanding of the extent of resilience in India’s health system. Using data from the latest household survey on health, the paper also looks at the disease profile of care seekers to illustrate why COVID transmission is likely to be rapid in the country, the potential impact of COVID care on non-COVID care, the groups that are most likely to forego care due to the lockdown and the diversion of resources to COVID care, choice of providers and out-of-pocket expenditure evidenced from such choice. The paper concludes that a country cannot effectively deal with a pandemic and reduce its socioeconomic impact by trying to fix its health system in real time. The lesson from the COVID era would be for India to immediately start with the much delayed health sector reforms, beginning with a substantial jump in public health financing, if impact of future epidemics and pandemics are to be minimised.

Keywords: India · Demand for care · Pandemic preparedness · Health sector reforms · Health financing