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Conceptual Paper

Corona Virus and Economic Recovery

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Danane.

Corona virus waves vaccines and economic recovery is my todays topic if we all gather to exchange our ideas honestly we can immediately eradicate covid 19, I am thankful to IA2030 and echo team from WHO, whatever we have learned we could contribute in our nations development. And thus, play key role in primary health care and thus support universal health coverage.

Covid crisis globally that lead to devasted, Economy, lock down and poor job creation.

On the vaccine equity which is a joint effort by UNDP, WHO and the oxford university if the low-income countries boost the pace of their vaccination as compared with the high-income group countries, then it will eventually help them in recovering the economy,

Strengthening the public healthcare system to a large extent so that people do not be dependent on private service provider, the rural belt must provide basic facilities to these areas to avoid overcrowding of cities.

It's important to stimulate bank credits and return to institutional framework by giving space to entrepreneurship must be promoted in future so that private sector and free markets can also act.

Capital investment by government and private sector both job creation and boost to demand supply will also aid in revitalization of Indian economy, different sector such as aviation, supply chains, road investment, work in core industries, local consumption,

pharmaceutical industry, automobile work from home etc., these are now seeing a positive change post pandemic.

Behavior modification to practice a healthy lifestyle and hygiene should be utilized and create wellbeing awareness programmes to build a healthy nation. Were incredibly constructive and valuable for the path to economic recovery.

I as a family physician treated few covid patient at my clinic, after triaging the status of patient they were admitted accordingly, now the patient were on ventilator for months and few suffered from post covid or long covid. For the first time it was not possible to handle the chaos by government, citizens, healthcare workers, but economy burden on each patient was huge.

Healthcare in India is difficult there's a stark rich and poor divide. At 74th "World Health Assembly the Director General of the World Health Organization called for a broad social movement for immunization that will ensure that immunization remains high on global and regional health agendas and help to generate a grounds well of support or social movement for Immunization". Immunization Agenda (IA2030) was adopted by countries in 2020.Covid 19 left patients at home untreated due to phobia, unavailability of vaccines, drugs hospital beds, mortuaries were overburdened lack of oxygen, lack of skilled healthcare workers lead to mental stress, the covid appropriate behavior was maintained lately, still we see some citizen not willing to take vaccine. In few areas vaccination gave good number of vaccination and therefore decrease number of ICU admission.

Below data has been taken as it is detailed no changes:

- WHO Costing, Budgeting, financing, and Delivery of COVID-19 Vaccines
- How to apply for Gavi CDS Funding through the partners platform
- Costing for scale up
- Costing alone is not enough: Budgets need to be planned and executed Where does needed COVID-19 Vaccination funding come from in a costing and budgeting in country
- Process of covid-19 vaccination, planning, costing and Budgeting
- Regional approach to support covid 19 vaccination costing and budgeting in countries

To optimize the use of existing resources and technical assistance through sharing of guidance, tools, resources, learnings and best practices to support costing, trainings sharing best practices in communities, benefits, strategies to maintain routine immunization services, budgeting and financing. Of covid 19

- IA2030 Immunization Agenda 2030: A Global strategy to Leave No One Behind Immunization is an investment for the future, creating a healthier, safer and more prosperous world for all.
- Immunization programmes for Primary healthcare/ Universal health coverage
- Commitment and Demand
- Coverage and Equity
- Life course and Integration
- Outbreaks and Emergencies
- Supply and Sustainability
- Research and Innovation

India Healthcare: @forbesindia public

India's weaky on public healthcare has increased Indian's dependency on private hospitals

1	India's out of pocket health compared to 64 .2% India's out of pocket health expenditure compared to 18.2% world average			
2	74% hospitalization cases financed through			
	savings			
3	3 20% hospitalization cases financed through			
	borrowing			

Table 1

Selling household assets, mortgaging ornaments.

1	8.9% availability of free medicines for in patient care decline from 31.2% over the last two decades	
2	5.8 % Availability of free medicines for outpatient care decline from 17.8% over the last two decades	
3	More than 50% out of pocket expenditure utilized in purchasing medicines	
4	10% in medical and diagnostic labs	
5	63 million Indians pushed into poverty every year due to health costs alone	
	14% SCs and ST households registered with Pradhan mantra yogna or the national health insurance scheme	

Table 2

How bad is it?

Public funds for health have also been invested specifically on secondary and tertiary care rather than in the provisioning of primary healthcare: private healthcare providers are burgeoning: the result has been a widening of health inequalities been a widening of health inequalities along caste, class, gender and geography'- Oxfam India.

1	1 allopathic doctor for every 10,189 people WHO			
	recommends			
2	1 state run hospital for every 90,343 people			
3	0.54 beds per 1000indian people WHO recommends 5			
	beds per 1,000 people			
4	155/167 India's rank on bed availability			
5	1.58 lakh sub centers shortfall of 43, 736 or 23%			
6	26, 000 primary health centers shortfall of 8,764 or			
	28%			
7	5,600 Community health centers shortfall of 2,865 or			
	37%			
8	72.6 Years Global average for life expectancy			
9	69.42 Years in India : lower than its neighboring			
	countries and BRICS counterparts			
10	1.25% of GDP the current expenditure on health lowest			
	among the BRICS countries			

Table 3

The current health status of the country is a testament to the unfulfilled dream of "Health for All', The right to the highest attainable health is far from being realized. This holds especially true for the socially and economically marginalized. - Oxfam India.

1	8.3cr males have been vaccinated	
2	7.3 females have been vaccinated.	
3	30 doses per 100 persons in urban India	
4	12.7 doses per 100 persons in rural India	

Data collected on (May 2021).

Quality of care worse for the poor than it was for the rich during Covid 19.

Table 4

1	Slow response from the government	14.8% low income house- holds	No discrimination faced by high income households
2	Concern over quality of food served in hospitals	22.2% low income house- holds	4.8% high income households
3	Discrimination from neighbors and the community on testing from neighbours and the community on testing on testing positive for covid - 19	35% low income households	7.3%high income household
4	Mental health - anxiety	41.4% low income house- holds	12.2% high income households
5	Mental health -sleep deprivation	32.3% low households	22% high income households
6	Access to improved non shared sanitation facilities	65.7%households in general category	46.9% households in SC Category 39,5% households ST category
7	Difficulty in getting access to non covid 19 medical services	18.2%general category	47.4% OBC
			50.7%SCs and STs

Table 5

Conclusion

- 1. A global humanitarian is required
- 2. Improving Vaccination demand and addressing hesitancy for healthier future of kids.
- 3. Understand the root cause
- 4. Monitoring and evaluating interventions to improve uptake
- 5. Good budget for future has been given by Indian Government.

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