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PHC Doctors — A Case Where the Caregivers Need Care

Context

- Primary Health Centre (PHC) doctors form the **bedrock of India's public health system**.
- For millions in remote villages and underserved regions, **they are not only the most visible representatives of modern medicine** but also the first and often the only point of contact with organised health care.
- Yet, **their contributions and struggles remain largely unacknowledged** in public discourse and policy design.

Problems Faced by PHC Doctors

• The Expansive Role of PHC Doctors

- The work of PHC doctors **goes far beyond conventional clinical practice**. They serve as clinicians, administrators, educators, and leaders.
- **Each PHC typically caters to around 30,000 people in rural areas** (20,000 in hilly and tribal regions, and up to 50,000 in urban centres).
- This **diverse population includes children, women, the elderly**, and those with chronic conditions, making the responsibility both complex and demanding.
- Their **tasks include coordinating immunisation drives, running school health programmes** under the Rashtriya Bal Swasthya Karyakram (RBSK), managing disease surveillance, and leading outbreak response.
- They **also mentor community health workers such as ASHAs, ANMs, and Anganwadi staff**.
- Far from being perfunctory duties, **these activities are the very threads that tie national health policies to grassroots realities**.

• The Crushing Clinical and Administrative Load

- A typical day in a PHC can see **a doctor attend to around 100 outpatients**.
- On designated antenatal care days, **this number includes nearly 100 pregnant women**
- **Each consultation demands attentive listening, careful diagnosis**, and compassionate treatment, often under severe time constraints.

- **Unlike specialists, PHC doctors must remain proficient across the entire medical spectrum,** from paediatrics and maternal health to infectious diseases, geriatrics, and emergency care.
- Beyond clinical duties, **administrative responsibilities consume a disproportionate share of their energy.**
- **PHCs maintain over 100 registers covering maternal and child health,** drug inventories, sanitation, and more.
- Despite the introduction of digital platforms like the Integrated Health Information Platform (IHIP), Health Management Information System (HMIS), and Ayushman Bharat Portal, **doctors are forced to duplicate entries on both paper and electronic systems.**
- What was intended as streamlining has become a time-consuming burden.
- This **dual strain has created what many describe as a second shift:** long hours spent documenting after exhausting clinical duties. Ironically, doctors trained to heal are overwhelmed by paperwork and bureaucracy.

Burnout: A Silent Crisis

- The **cumulative effect of excessive workload, administrative overload,** and inadequate support is burnout.
- The **Lancet has identified physician burnout as a global public health crisis,** while the WHO has classified it as an occupational phenomenon. Symptoms include emotional exhaustion, detachment, and reduced efficacy.
- **Studies indicate that nearly one-third of primary care physicians in low- and middle-income countries experience emotional exhaustion,** a reality mirrored in India's PHCs.
- **Even in states such as Tamil Nadu,** celebrated for their relatively strong primary health infrastructure and National Quality Assurance Standards (NQAS) certification, **PHC doctors report systemic stressors.**
- **Certification processes often prioritise checklists over humane,** sustainable care.
- **The mismatch** between expectations and institutional support **undermines both physician well-being and patient outcomes.**

The Way Forward: The Need for Systemic Reform

- The solution lies not in adding more registers or protocols but in **reimagining systems with empathy.**
- **Documentation should be simplified,** redundant registers eliminated, and automation introduced wherever possible.
- **Non-clinical tasks must be delegated to trained administrative personnel,** freeing doctors to focus on patient care.
- **Global models provide useful inspiration.** The **25 by 5 campaign,** led by the U.S. National Library of Medicine and Columbia University, seeks to reduce clinician documentation time by 75% by 2025.
- **The Bhore Committee,** nearly eight decades ago, **envisioned a primary health system rooted in prevention and community engagement.**
- **PHCs remain central to that vision,** but their doctors are caught in a web of unrealistic demands. Shifting from a culture of compliance to one of facilitation is essential.

Conclusion

- PHC doctors are the **unsung backbone of India's health system**; they bridge the gap between lofty policy goals and the lived realities of rural communities.
- Yet, **they work under crushing pressure**, juggling clinical duties, administrative overload, and unrealistic expectations. **Burnout is no longer a silent risk but an urgent crisis.**
- **If India seeks to fulfil its promise of universal health care, it must begin by valuing its frontline doctors**, not only for what they deliver but also for what they endure.
- **Strengthening PHCs means reimaging care delivery as humane, enabling, and sustainable**; only then can primary health care truly serve as the cornerstone of a healthy and equitable nation.

PHC Doctors — A Case Where the Caregivers Need Care FAQs

Q1. Who are Primary Health Centre (PHC) doctors in India?

Ans. PHC doctors are frontline physicians who provide medical care, lead health programmes, and connect communities with the public health system.

Q2. What makes the role of PHC doctors unique?

Ans. Their role is unique because they must balance clinical care with administrative duties, health education, disease surveillance, and community engagement.

Q3. What is the major challenge faced by PHC doctors?

Ans. The major challenge is the overwhelming combination of heavy clinical workload and excessive administrative responsibilities.

Q4. Why is burnout a growing concern among PHC doctors?

Ans. Burnout is a concern because doctors face long hours, unrealistic expectations, and little systemic support, leading to emotional exhaustion and reduced effectiveness.

Q5. How can India strengthen its primary health system?

Ans. India can strengthen its system by simplifying documentation, delegating non-clinical tasks, adopting automation, and prioritising doctors' well-being.

Source: **The Hindu**

The Growing Relevance of Traditional Medicine

Context

- **Traditional medicine constitutes one of the oldest and most enduring health-care systems** in human history.
- According to the World Health Organisation (WHO), **it is practised in 170 of its 194 member states**, representing 88% of the global population (WHO, 2023).

- For billions, **particularly in low- and middle-income countries, traditional systems remain the primary source of health care** due to accessibility, affordability, and cultural familiarity.
- However, **their significance extends beyond health treatment to encompass biodiversity conservation**, nutritional security, and sustainable livelihoods.

Global Expansion of Traditional Medicine

- The **economic growth of the traditional medicine sector underscores its growing acceptance** and integration into mainstream health care.
- Projections estimate that the **global traditional medicine market will reach \$583 billion by 2025**, expanding at an annual rate of 10%–20% (Market Analysis Reports, 2024).
- **China leads with a \$122.4 billion traditional Chinese medicine industry**, followed by India's AYUSH sector valued at \$43.4 billion, and Australia's herbal medicine industry at \$3.97 billion.
- **Such rapid expansion reflects a paradigmatic shift in health-care philosophy**, from reactive treatment models focused on symptoms to preventive approaches aimed at addressing root causes of illness.

India's Ayurvedic Transformation

- India has emerged as **a global leader in the revival and promotion of traditional medicine**, particularly Ayurveda.
- **The AYUSH sector, comprising over 92,000 micro, small, and medium enterprises, has expanded nearly eight-fold** within a decade.
- **Manufacturing revenues increased from ₹21,697 crore in 2014-15 to over ₹1.37 lakh crore** in recent years, while service sector contributions exceeded ₹1.67 lakh crore (Government of India, 2023).
- Furthermore, **India exports AYUSH and herbal products worth \$1.54 billion to more than 150 countries**, enhancing its economic competitiveness and soft power.
- Public acceptance of AYUSH systems within India has been remarkable.
- The **National Sample Survey Office (2022-23) reported awareness levels of 95% in rural regions and 96% in urban centres**, with over half the population utilising these systems within the past year.
- **Ayurveda emerged as the preferred system**, particularly for preventive care and rejuvenation therapies.
- **These figures suggest a deeply entrenched cultural and health-care shift** that aligns with global trends toward integrative wellness.

Scientific Validation and International Outreach

- A **critical element in Ayurveda's global legitimacy** lies in its integration with **modern scientific methods**.
- **India has invested heavily in institutions such as the All India Institute of Ayurveda**, the Institute of Teaching and Research in Ayurveda, and the Central Council for Research in Ayurvedic Sciences.
- **These bodies focus on clinical validation**, drug standardisation, and integrative care models, thereby bridging the gap between traditional wisdom and evidence-based medicine.
- **India's international engagement has further amplified its outreach**. Through the Ministry of AYUSH's International Cooperation Scheme, India has signed 25 bilateral agreements, developed 52

institutional partnerships, and established 43 AYUSH information cells across 39 countries.

- The **creation of 15 academic chairs in foreign universities demonstrates growing academic recognition** of Ayurveda as a field of study.
- A **significant milestone was the establishment of the WHO Global Traditional Medicine Centre in India**, which seeks to integrate traditional practices with digital health, artificial intelligence, and big-data analytics (WHO, 2022).
- **WHO's recent guidance on AI in traditional medicine emphasises the potential for predictive care**, clinical validation, and global scalability.

Ayurveda for People and Planet

- The **philosophical foundation of Ayurveda lies in the pursuit of balance**, between body and mind, humans and nature, and consumption and conservation.
- This **holistic worldview holds contemporary relevance** as societies grapple with lifestyle-related diseases and global challenges such as climate change.
- **Ayurveda extends its principles beyond human health to include veterinary medicine** and plant well-being, embodying an ecological approach to health systems.
- The **theme for Ayurveda Day 2025, Ayurveda for People & Planet, captures this dual emphasis** on individual and planetary health.
- **It frames Ayurveda not merely as a medical system but as a comprehensive wellness movement** capable of addressing twenty-first-century challenges by harmonising ancient wisdom with modern innovations.

Conclusion

- **Traditional medicine is experiencing a renaissance**, driven by global demand for preventive, sustainable, and culturally rooted health systems.
- **India's Ayurvedic transformation exemplifies how traditional knowledge can be revitalised** through scientific validation, institutional investment, and international cooperation.
- By aligning with modern science and technology, **Ayurveda is not only strengthening its credibility but also positioning itself as a vital component** of global health architecture.

The Growing Relevance of Traditional Medicine FAQs

Q1. What percentage of WHO member states practise traditional medicine?

Ans. Traditional medicine is practised in 88% of WHO member states, or 170 out of 194 countries.

Q2. Why has the global traditional medicine market grown rapidly in recent years?

Ans. The market has grown rapidly because of increasing acceptance of preventive and holistic health-care approaches.

Q3. How has India's AYUSH industry transformed in the past decade?

Ans. India's AYUSH industry has expanded nearly eight-fold, with manufacturing revenues rising from ₹21,697 crore in 2014-15 to over ₹1.37 lakh crore.

Q4. What role do Indian research institutions play in promoting Ayurveda?

Ans. Indian research institutions focus on clinical validation, drug standardisation, and developing integrative care models that combine Ayurveda with modern medicine.

Q5. What is the theme of Ayurveda Day 2025, and what does it signify?

Ans. The theme of Ayurveda Day 2025 is Ayurveda for People & Planet, which signifies Ayurveda's holistic approach to both human health and ecological sustainability.

Source: The Hindu

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