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GENERAL STUDIES 2: SOCIAL JUSTICE   **TOPIC:** URBAN HEALTH

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India's cities, their non-communicable disease burden

Urban Workers' Health Challenges

- The death of a Bengaluru bus driver from cardiac arrest highlights the precarious health conditions faced by urban workers, including gig economy participants, sanitation staff, and public transport drivers. These groups often operate in hazardouswork environments without formal contracts, job security, or health insurance.

- Such precarious conditions leave them vulnerable to workplace-related health issuesand financial instability during medical crises. The growing burden of **non- communicable diseases (NCDs), such as hypertension, diabetes, and cardiovascular conditions**, further exacerbates their vulnerability, compounded by limited access to primary healthcare and fragmented urban health systems.

Policy Gaps and Implementation Challenges

- India's national NCD surveillance policy seeks to address these issues through community-level screening and preventive care. However, poor implementation has hindered its effectiveness. Factors such as **rapid urbanisation, unplanned urban design, and weak healthcare infrastructure exacerbate the situation**. Globally, urbanisation is projected to reach 70% by 2050, with India already witnessing significant growth in urban migration.

- Nearly 41 million people migrate between states annually, and 49% of the urban population resides in slums. This demographic shift creates an urgent need for robust healthcare systems that can address the unique challenges faced by marginalised urban communities.

The Triple Burden of Urban Marginalised Populations

Urban marginalised groups bear a triple health burden:

1. **Hazardous Work Environments**: Physically demanding jobs with inadequate safety measures expose workers to severe health risks.

2. **Limited Healthcare Access**: Insufficient availability of affordable and quality healthcare facilities disproportionately impacts these populations.

3. **Financial Vulnerability**: High out-of-pocket healthcare expenses force families into economic instability, particularly during health crises.

Despite declining tobacco and alcohol consumption, data from NFHS surveys indicate risingrates of hypertension, diabetes, and obesity, underscoring the lack of preventive care and awarness.

Social Determinants of Health (SDoH)

- **Workplace safety, housing conditions, employment security, and communitysupport networks** critically shape health outcomes for urban marginalised populations. Unfortunately, public healthcare systems in urban areas often fail toprovide adequate coverage, leaving these groups underserved. This failure violates the principles of universal health coverage and perpetuates **cyclesof intergenerational poor health**. Addressing these determinants is essential for creating equitable health solutions.

The Role of Technology in Health Monitoring

- Technology offers significant potential in improving healthcare outcomes for urban populations. Digital health monitoring tools can enable real-time management of chronic conditions like hypertension and diabetes, empowering individuals to take control of their health.

- Community-based screening initiatives can serve dual purposes by providing critical epidemiological data for healthcare planning and raising awareness about NCD risksat individual and community levels. These efforts reduce the strain on health systemswhile promoting sustainable health education and preventive care.

Need for Integrated Solutions

State-level action plans must prioritise healthcare access for vulnerable groups, such as migrants and informal workers. Collaboration among urban local bodies, health departments,and community organisations is critical to developing inclusive and sustainable health strategies. Scaling up community-led NCD surveillance systems can address the healthcare challenges in informal settlements effectively, creating pathways for equitable healthcare delivery.

Conclusion

Urban health challenges require holistic, community-driven solutions. Co-creating strategieswith stakeholders ensures that the unique needs of marginalised groups are met, fostering equitable healthcare access. By prioritising integrated and sustainable approaches, urban areas can be transformed into healthy and inclusive cities for all, addressing the systemic health inequities faced by the most vulnerable populations.

- **Source: https://www.thehindu.com/opinion/op-ed/indias-cities-their-non-communicable-disease-burden/article68935631.ece**