Review Article

Is There A Huge Research Gap In Indian Public Health System? A Review On Published Articles Related To National Health Programmes, In The Pubmed Indexed Journals.

Running Title: Research Gap in Indian Public Health System

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Abstract:

Background: Public health system in India has many national health programmes. Research is largely driven with the donor agencies, which may not have linkage to the actual needs of the programmes. *Objectives*: to understand the research gap in Indian Public Health System with respect to the National Health Programs. *Methodology*: Top ten national health programmes were selected based on the expert's programmes. Pubmed search was made for the past five years using keywords as the name of the health programme or its abbreviation. *Results*: Among the total 1053 line listed articles, only 304 articles have been included after a careful reading of title and abstract. Important key findings in our study are more than half (58%) of the researches are published in RNTCP (Revised National Tuberculosis Control Programme) followed by JSY (Janani Sureksha Yojana Scheme) which is 13%. Other national health programmes have very fewer publications including an important health programme, NACP (National AIDS Control Programme). *Conclusion*: There is a huge disparity in the number of published researches among each selected important national health programmes. There is a need to set up an operational research committee in each state to promote research.

Keywords: Health account diary, community participation, gaps in health care delivery

1. Introduction

India is second most populated country in the world.[1] Many of its states are having population more than most other independent countries in the world.[2] To tackle the problem of disease burden, there are more than thirty national health programmes (NHPs) operational in India.[3] Most of these programmes have evolved over time. At present public health system is mainly run by government machinery. International organizations like World Health Organizations, UNICEF(United Nations International

Children's Emergency Fund) and few Non-Government Organizations (NGOs) like the Tuberculosis Association of India(TAI) are working in different domains with the public health system to assist in running these programmes. The type of support offered by the different private organizations to the public health system may vary according to their objective. For the better and optimal performance of NHPs, implementation research needs to be promoted. Here, all the stakeholders including the public health machinery, government and private medical education & research institutes and NGOs have to work in tandem, without which research in the public health programmes may not have its desired impact. There might be many indicators to capture extent of researches that could have informed these programmes. We consider the number of publications pertaining to that particular programme in the Pubmed indexed journals would be one of the better indicators to know the research involved in these public health programmes. So we aimed to study the number of researches published in Pubmed on important selected public health programmes through a review.

2. Methods

National health programmes in India were line listed from National Health Portal.[3] Among these, ten health programmes were included in the study based on experts opinion. Two experts have independently ranked the programmes first and the conflicts in the ranking were resolved based on the discussion with a third expert. The experts were with a minimum qualification of MBBS, MD (Community Medicine) and the experience of minimum three years in this field. Among the listed programmes only those programmes which have been implemented seven or more years were selected. Selected programme names are given in table 1.

List of national health programmes, year of implementation and the number of publications from each programme for the past five years from the date of search (28/10/2018) in PUBMED.

S. No	Selected National Health Programmes	Year of implementation	Included N= 304 n (%)	Excluded
1.	Revised National Tuberculosis Control Programme	1993	176 (58)	1
2.	Janani Suraksha Yojana	2005	39 (13)	0
3.	National AIDS Control Programme	1992	24 (08)	79
4.	National Vector Borne Disease Control Programme	2003	20 (07)	0
5.	National Leprosy Eradication Programme	1983	16 (05)	0
6.	Integrated Disease Surveillance Programme	2004	12 (04)	0
7.	Janani Shishu Suraksha Karyakaram	2011	7 (02)	4
8.	National Tobacco Control Programme	2007	4 (01)	653
9.	National Programme for Prevention and Control of Cancer, Diabetes, Cardiovascular Diseases and Stroke	2010	3 (01)	0
10.	National Programme for Control of Blindness	1976	3 (01)	12

After selection of important ten health programmes, studies related to these programmes were searched in Pubmed electronic library. Search criteria were the full name of the programme and/or abbreviation of that particular programme in the title and/or in the abstract (Box I).

Keywords for each programme in the past five years from the date of search (28/10/2018) in PUBMED.

"Revised National Tuberculosis Control Programme" [tiab] OR RNTCP[tiab]
"National Programme for Prevention and Control of Cancer, Diabetes, Cardiovascular Diseases and Stroke" [tiab] OR NPCDCS[tiab]
"Janani Suraksha Yojana" [tiab] OR JSY[tiab]
"Janani Shishu Suraksha Karyakaram" [tiab] OR JSSK[tiab]
"National AIDS Control Programme" [tiab] OR NACP[tiab]
"National Leprosy Eradication Programme" [tiab] OR NLEP[tiab]
"Integrated Disease Surveillance Programme" [tiab] OR IDSP[tiab]
"National Vector Borne Disease Control Programme" [tiab] OR NVBDCP[tiab]
"National Tobacco Control Programme" [tiab] OR NTCP[tiab]
"National Programme for Control of Blindness" [tiab] OR NPCB[tiab]

Publications for the past five years were included. After search, the results were saved in the Pubmed library for further sorting and reference. Only Pubmed indexed journal were included in the study, considering the quality of the research and to avoid predator journals. Case studies, as well as studies not related to the programme, were excluded after careful examination of title and abstract. The number of studies published in the Pubmed library with respect to each programme was taken as the outcome of interest.

3. Results

Among the total of 1053 publications listed with the keywords, a total of 304 publications have been included after exclusion of 749 unrelated publications. The number of publications against each national health programmes presented in the table I. Among the ten NHPs RNTCP (Revised National Tuberculosis Control Programme) holds the highest publications (n=176 (58%), rest of the 42% contributed by all the other programmes. Surprisingly NTCP(National Tobacco Control Programme), NPCB(National Programme for Control of Blindness) and NPCDCS(National Programme for Prevention and Control of Cancer, Diabetes, Cardiovascular diseases and Stroke) holds the least number of publications n=4(1%), n=3(1%) and n=3(1%) respectively.

4. Discussion

To our knowledge after an extensive search, we couldn't able to find any article discussing the number of published researches in each national health programmes in India. This is the first initiative to study researches in health programmes. Limitation of this study is, we couldn't include all the national health programmes. In

this article we assumed that all these programmes are equally important but in real scenario the government support, budget and NGOs support would differ between each programmes. Strength of this article is by a simple search in pubmed we were able to identify the programmes supported through research.

Important key findings in our study are more than half (58%) of the researches are published in RNTCP followed by JSY (Janani Sureksha Yojana Scheme) which is 13%.[4–8] Other national health programmes had fewer publications, including an important health programme, NACP (National AIDS Control Programme).[9–11] One of the reasons why RNTCP's performance is outstanding, may be because RNTCP has a strong administrative divisions including a division in promotion of research, which is known as RNTCP OR (operational research committee). RNTCP OR committee of each states includes researchers and administrative officers from RNTCP public health, private and government medical colleges which enables and encourages the research in RNTCP programme.[12, 13] Whereas other programmes in India don't have such an administrative division as well as public-private partnership in terms of research. In general, the data from the public health system lies as the base for research. On the other hand researchers are either from private or government medical colleges or from NGOs.[12, 13] Getting data from the public health system in other programmes, other than RNTCP depends on the decision of the director of that particular programme which is usually subjective and there is no clear-cut guideline. This makes the researchers concentrate more on the RNTCP rather than other programmes in this country. Through this study we strongly recommend to set up an operational research committee under the chairmanship of Director of health in each state to promote operational and implementation research in that particular state.

A way forward in future research in this topic would be studying in detail, the researches happened in each individual national health programmes.

5. Conclusion

To conclude, we find a huge disparity in the number of researches published under each national health programmes in India.

6. References

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